1-1-2012

Resilience through the eyes of the St. Labre Indian School employees: an exploration of the variables that encourage stable employment within this rural population

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Recommended Citation

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Resilience Through the Eyes of the St. Labre Indian School Employees:
An Exploration of the Variables that Encourage Stable Employment within this Rural Population

by
Kristie Knows His Gun

Presented to the Faculty of the
Graduate Department of Clinical Psychology
George Fox University
in partial fulfillment
of the requirements for the degree of
Doctor of Psychology
in Clinical Psychology

Newberg, Oregon
May 2012
Resilience through Employment

Resilience through the Eyes of the St. Labre Indian School Employees:
An Exploration of the Variables that Encourage Stable Employment within this Rural Population

by

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has been approved

at the

Graduate Department of Clinical Psychology

As a Dissertation for the PsyD degree

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Resilience Through the Eyes of the St. Labre Indian School Employees:  
An Exploration of the Variables that Encourage Stable Employment within this Rural Population

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You already possess everything necessary to become great. (Crow Proverb, n.d.)

Abstract

Native Americans are the original people from the vast region of North America. The historical trauma they endured wounded generations, yet many were able to overcome their impoverished living conditions and maintain full-time employment. It is hypothesized that protective factors promoted resilience within these individuals, which encouraged a successful future. The present study examines the degree and types of trauma experienced by a sample of Native Americans during childhood, along with their current levels of spiritual functioning and resilience.

The participants included 161 adult male and female employees of St. Labre Indian School and its affiliates, St. Charles Mission School and Pretty Eagle Catholic School; 88 (54.7%) were Native American and 73 (45.3%) were Caucasian. St. Labre is a non-profit organization located on the Northern Cheyenne and Crow reservations in Southeastern Montana. This study administered four scales: (a) The Adverse Childhood Experience Rating Scale (ACE),
(b) The Spiritual Well-Being Scale, Short Version (SWB-6), (c) The Connor-Davidson Resilience Scale (CD-RISC), and (d) an Employment Survey.

It was found that the Native American participants were exposed to significantly more childhood adversities and reported lower levels of education and employment status when compared to the Caucasian counterparts. Despite this, however, the Native American employees, in general, are unusual in the fact that they were not debilitated by their exposure to adverse experiences. While the current study cannot explicitly state what protective factors encouraged resilience, we can confidently conclude many factors existed for these individuals. It was also found that job stability was the most powerful predictor. Because St. Labre provides a stable work environment, provides support for achieving college advancement, encourages spiritual participation, and honors cultural beliefs, it is hypothesized that St. Labre itself is one protective factor fostering the emergence of resilience. Therefore, participants of this rural population had been protected and as one might suspect, individuals are able to function in a more sufficient manner when defended from crippling experiences. These individuals are gaining the necessary tools that encourage stable employment rather than succumbing to poverty and hardship.
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Chapter 1

Introduction

Native Americans are the original people from the vast region of North America. They encompass both distinct and heterogeneous ethnocultural groups (Belcourt-Dittloff, 2006). Part of their distinction is attributed to the diversity of each tribe’s customs and values, creating a sense of identity with distinguishing worldviews and practices (McGoldrick, Giordano, & Garcia-Preto, 2005). Despite these idiosyncrasies, tribes shared the innate ability to adapt to their living conditions and wisely use the natural resources available, thus obtaining and maintaining proficiency (All About History, 2012).

As an increasing number of settlers passed through North America, problems arose for the Native Americans. The once abundant game decreased, disease was introduced, and the settlers brought with them different worldviews that led to their desire to “civilize, Christianize, and educate the Indian” (Weist, 1984, p. 123). The establishment of reservations began during the 1850s (Bauerle, 2003); this confinement stripped all tribal members of their decision-making powers and ultimately forced them into dependence upon the US government, thus striking the heart of the Native Americans as their culture, traditions, and identity became forbidden (Weist, 1984).

Many continue to experience postcolonial trauma (Jervis, 2009) as this historical suffering wounded generations through the inheritance of ancestral pain. Genocidal acts distorted cultural identity, self-concept, and values, causing depression, self-destructive behavior,
substance abuse, and chronic bereavement (Yellow Horse Brave Heart, 1999). As a result, poverty among Native Americans has resulted in some of the harshest living conditions facing any ethnic group in the United States (Belcourt-Dittloff, 2006),

While many individuals and communities continue to struggle in their attempt to conquer adversity, many have also demonstrated a remarkable ability to overcome these extraordinary conditions and thrive (Belcourt-Dittloff, 2006). An individual’s capacity to “maintain relatively stable, healthy levels of psychological and physical functioning” (Bonanno, 2004, p. 20), despite exposure to negative events, is known as resilience. Resilience provides the ability to utilize personal skills and strengths to cope and recover from problems or challenges (Cherry, 2011). It supports the ability to flourish rather than be defeated by the discrimination, genocidal practices, and oppression that has plagued many Native Americans. The protective factors that constitute resilience for these individuals are frequently overlooked, yet they are important to consider (Belcourt-Dittloff, 2006).

Research by Long and Nelson (1999) suggested that within Native American populations resilience involves an interdependence of factors that are relational through intergenerational cultural beliefs and traditions, rather than existing within a linear worldview.

Donnon (2010) suggested that individuals with positive situational and internal factors in their daily lives are more likely to lead pro-social and constructive lifestyles. These include both extrinsic and intrinsic factors; extrinsic are protective features outside of oneself and include family, peers, school, and the community. Intrinsic factors include protective features within oneself, such as an existence of a positive self-concept, self-control, empowerment, and cultural and social sensitivity.
Masten’s (2001) review of resilience highlighted that it occurs through ordinary, daily processes rather than just extraordinary events; for Masten this ability is an operation of a basic human adaptational system. He found this system includes three components: (a) individual-level characteristics, such as cognitive functioning, sociability, and self-efficacy; (b) family-level characteristics which includes close relationships with caring adults and authoritative parenting; and (c) extra-familial characteristics, including social support and effective schooling (Masten & Coatsworth, 1998).

Richardson (2002) found resilience to be a process of growth or adaptation through adversity or disruption rather than simple endurance or recovery. It is believed that the energy, or source of resilience, comes from the collective unconscious, spirit, and from the social, ecological, and spiritual environment.

Belcourt-Dittloff (2006) firmly highlighted the importance and specific functional role that culture, community, hope, spirituality, and identity may perform in relation to adversarial growth and resilience for Native Americans. Many participants in her study cited Christian beliefs and/or American Indian Spirituality as important resilience factors. Spirituality is likely to be intertwined with factors of communal support, hope, and traumatic growth and recovery processes. Through these results it appears that the Native Americans who relied upon resilient, culturally specific, internal and external coping strategies were likely to report higher levels of positive psychosocial status.

Long and Nelson (1999) used the Ethnic, Culture, and Religion/Spirituality (ECR) Questionnaire (Cross, 1995) and found four major factors within the Native American relational framework. These major forces represent the constant interplay among the context, the mental, the physical, and the spiritual. When considered together, the model is viewed as an interdependence of relationships that explains resilient family behavior. The constructs are
Exploring Resilience through Employment

further defined as: (a) the context – culture, community, family, peers, work, and school; (b) the mental – intellect, thoughts, memories, judgment, and emotional processes; (c) the physical – gender, age, and physical condition; and (d) the spiritual – spiritual practices and teachings, dreams, symbols, stories, gifts, and intuition.

Within the literature there is consensus that protective factors surrounding an individual holistically prevents adversities from becoming debilitating while also creating a shield from additional adverse experiences, resulting in the emergence of resilience. Within Native American populations specifically, culturally specific protective factors provide coping strategies that also increase the levels of positive psychosocial status (Long & Nelson, 1999).

Many Native Americans have been able to overcome the impoverished living conditions and high unemployment rates that constrain their people (Belcourt-Dittloff, 2006). Despite the hardships endured, these individuals have prevailed by becoming and remaining successful through the pursuit of employment and/or higher education. Even though they are the most underrepresented group in academia, Native American college student enrollment has almost tripled in the last 33 years nationwide. The US Department of Education reported that in 1976 college enrollment of Native American/Native Alaskans was approximately 76,100 and in 2009 enrollment reached 207,900 (US Department of Education, 2010).

Resilience may explain why these youth, who were exposed to adverse and harmful experiences, were able to form positive social, school, and behavioral adjustment and become healthy functional adults (Leve, Fisher & Chamberlain, 2009). A study by Okagaki and colleagues (Okagaki, Helling, & Bingham, 2009) examined how some Native American students are able to persist and succeed in higher education, while others are not. Students in their study
reported that doing well in school and obtaining a college education was an important aspect for how they viewed themselves. They believed a good education was an important step towards employment and gaining the skills to survive in the world today. The students’ perceptions of parental support also served as a positive factor in their education.

Other factors that fostered success among Native American students included the presence of structured social support within the educational system, such as American Indian clubs, multicultural offices, and other groups organized to provide social support. These groups improved the retention of Native American students by helping them adapt to the university setting (Shotton, Oosahwe, & Cintron, 2007). It appears exposure to internal and external support systems allowed these students to thrive while also creating hope for future generations, initiating a reminiscence of their ancestors.

Some individuals may not venture down the path of higher education. Yet they still possess the ability to overcome and break free from the crippling grip of unemployment by prevailing with full-time employment. The aim of the current study is to examine resilience among the employees of St. Labre Indian School and its affiliates. The degree and types of trauma they experienced during childhood will be examined, as well as their current levels of spiritual functioning. It is hypothesized that despite exposure to adversities, these employees possess an increased amount of resilience that allows them to be successful adults through sustained employment.
Chapter 2

Methods

Sample

The sample consisted of 161 (72.7% female and 27.3% male) employees of St. Labre Indian School and its affiliates, St. Charles Mission School, and Pretty Eagle Catholic School. St. Labre is a non-profit organization located on the Northern Cheyenne and Crow reservations in Southeastern Montana. Participants included 88 (54.7%) Native Americans and 73 (45.3%) Caucasians. Fourteen participants were omitted, including the Asian and multiracial participants and the participants who did not specify racial identity. Making meaningful and accurate inferences about each of these groups would be problematic due to the small number of participants within each.

Among the participants, ages ranged from 23 to 73 with a mean age of 46.81 (SD = 12.842); 72 (44.7%) endorsed being raised in SE Montana, 59 (36.7%) reported not being locally raised, and 30 (18.6%) did not specify the region of their upbringing.

Materials

A packet of materials was prepared containing a cover page with the informed consent and several measures, including: the Adverse Childhood Experience Rating Scale (ACE), Spiritual Well-Being Scale, Short Edition (SWB-6), Connor-Davidson Resilience Scale (CD-RISC), and an Employment Survey including demographic information.

Adverse Childhood Experience (ACE). The Adverse Childhood Experience Rating Scale (ACE) developed by Felitti et al. (1998) was originally intended as a checklist; however,
the present study utilized it as a 10-question self report measure of perceived childhood maltreatment and family dysfunction. Participants were asked to indicate if they were or were not exposed to each event during their childhood by marking either yes or no. Felitti et al. (1998) found that exposure to any single category increases the probability of exposure to any additional category, this ranged from 65%-93% (median: 80%); similarly, the probability of additional exposures ranged from 40%-74% (median: 54.5%). The present study found adequate internal consistency when treating these items as a scale ($\alpha = .778$).

**Spiritual Well-Being, Short Edition (SWB -6).** To measure spirituality the Spiritual Well-Being Scale was used. The full SWB developed by Ellison (1983) measures religious functioning in a variety of settings: physical health, mental health, and religious settings. The short edition developed by Bufford (2011) was created as a brief version to be used in institutional settings. Data analysis showed that the short version has strong internal consistency and it accounted for over 90% of the variance on the full SWB.

The short version is a 6-item scale with 3 reversed items (items: 2, 3, and 5). Respondents rated each item on a 6-point scale from SA (strongly agree) to SD (strongly disagree). Range is 1-6 with higher scores indicating higher religious functioning. In the current study the SWB-6 demonstrated adequate internal consistency (Cronbach’s Alpha = .615).

**Connor-Davidson Resiliency Scale (CD-RISC).** The CD-RISC, developed by Connor and Davidson (2003), is a 25-item scale that measures the ability to cope with stress and adversity. Respondents rate items on a scale from 0 (not true at all) to 4 (true nearly all the time). Total scores range from 0-100 with higher scores reflecting greater resilience. The version utilized in this study was taken from Connor and Davidson’s (2003) original paper. They reported an internal consistency reliability coefficient of .89. Additionally, a test-retest reliability
coefficient of .87 was obtained after two consecutive clinical visits. Evidence for convergent validity was demonstrated by the positive relationship between the CD-RISC and the Kobasa (1979) hardiness measure. In the present study, the coefficient alpha for the CD-RISC was = .910.

**Employment Survey.** The employment survey consists of 17 questions regarding demographic information, participant’s employment, educational level, and social economic status. Questions asked for length of their current employment, how many jobs they held had in the past five years, and how long participants were unemployed before working at St. Labre/affiliate schools.

**Procedure**

After receiving clearance from George Fox University’s Human Subjects Research Committee and gaining permission from St. Labre Indian School and its affiliates, St. Charles Mission School and Pretty Eagle Catholic School, I approached each employee at their place of employment. The study was explained as an exploration of childhood hardships and the ability to overcome the adversity and become successfully employed adults. Each individual was asked to fill out the packet of materials, which included an informed consent statement that indicated completion of materials constituted consent. It was also noted that participants could discontinue their participation at any time without penalty. The majority of participants completed the questionnaires immediately. Before data analysis 14 participants were excluded due to the small numbers who endorsed of specific ethnic backgrounds other than Native American and Caucasian, which created an inability to make meaningful and accurate inferences for these racial groups.
Upon completion each individual was thanked for participation and invited to enter a drawing for a chance to one win one of ten $25.00 Wal-Mart gift cards. Because the number of employees at St. Labre was greater, six gift certificates were presented there, with two at St. Charles, and two at Pretty Eagle.

Participants were informed that the results for this study would be available after its completion. Data were analyzed by using IBM/SPSS Version 19.0 (IBM, Armonk, New York, USA).
Chapter 3

Results

Descriptive statistics, including means and standard deviations, were computed for the sample. Comparisons were made among groups and correlational analyses were made. Results will be reported, in turn, for employment, education, Adverse Childhood Experiences, Spiritual Well-Being, and CD-RISC.

Employment

A cross tabulation revealed that 24% of the Native American population hold Level 1 employment positions (no degree or skill set required) 26% have Level 2 employment (do not require a degree, but minimum skills), 13% have Level 3 employment (do not require a degree, but large skill set) and 18% compromise Level 4 employment (degree required.) In contrast, 7% of the Caucasian population holds Level 1 employment, 17% has Level 2 employment, 8% have Level 3 employment, and lastly 36% comprise Level 4 employment. A Chi-Square revealed that this difference is significant ($t_{(1,3)} = 17.39; p = .001$).

Education

A cross tabulation also revealed that 43% of the Native American population has received a college education. A breakdown shows that 18% have their Associate degree, 19% hold bachelor degrees, and 9% have received their masters. In contrast, 71% of the Caucasian population has received a college education; 12% have their associate degree, 34% hold bachelor degrees, and 25% have received their masters. This difference is also significant (Pearson Chi-
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Figure 1. Distribution of employment by level and race.

Square $\chi^2(4) = 17.22; p = .002$. Results also show that 10% of the Native American participants are currently attending college and 11% of the Caucasian participants are currently attending; this latter difference is not significant.

**Adverse Childhood Experiences**

Mean item score for items of the Adverse Childhood Experience Rating Scale (ACE) in the present study ranged from .10 to .45 with SD ranging from .303- to .499 (see Table 1). The employees as a whole experienced an average of 2.41 adverse experiences. Among participants, 24.8% reported no adverse childhood experiences, 19.9% reported one, 16.8% reported two, 11.8% reported three, 6.8% reported four, and 18% reported five or more adverse experiences respectively. In all, 75.2% of the sample reported fewer than four adverse childhood experiences, while 24.8% had four or more (see Figure 2).
Table 1

*Means and Standard Deviations (SD) for the Endorsement of ACE Items in the Current Study*

<table>
<thead>
<tr>
<th>Item no.</th>
<th>Abbreviated item</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Experienced emotional humiliation</td>
<td>.36</td>
<td>.482</td>
</tr>
<tr>
<td>2</td>
<td>Physically abused</td>
<td>.15</td>
<td>.361</td>
</tr>
<tr>
<td>3</td>
<td>Sexually abused</td>
<td>.18</td>
<td>.389</td>
</tr>
<tr>
<td>4</td>
<td>Mother was treated violently</td>
<td>.23</td>
<td>.422</td>
</tr>
<tr>
<td>5</td>
<td>Household member abused drugs/alcohol</td>
<td>.45</td>
<td>.499</td>
</tr>
<tr>
<td>6</td>
<td>Household member was incarcerated</td>
<td>.15</td>
<td>.361</td>
</tr>
<tr>
<td>7</td>
<td>Household member depressed, suicidal, mentally ill, or psychiatric hospital</td>
<td>.21</td>
<td>.409</td>
</tr>
<tr>
<td>8</td>
<td>Raised by both biological parents</td>
<td>.31</td>
<td>.462</td>
</tr>
<tr>
<td>9</td>
<td>Experienced physical neglect</td>
<td>.10</td>
<td>.303</td>
</tr>
<tr>
<td>10</td>
<td>Experienced emotional neglect</td>
<td>.26</td>
<td>.441</td>
</tr>
</tbody>
</table>

*Note.* Item 8 is a reversed item and scored accordingly, therefore, 31% represents the percentage of the population that was not raised by both biological parents.

An analysis of variance revealed significant effects for five items when participants were compared by race: ACE-4 (*mother treated violently*; $F_{(1,158)} = 4.013; p = .047$), with the Native American group endorsing the item more frequently (30% of the Native Americans compared to 16% of the Caucasian group); ACE-5 (*household member abusing drugs/alcohol*; $F_{(1,158)} = 20.417; p < .001$), with the Native American group endorsing the item more frequently (60% compared to 26% of the Caucasian group); ACE-6 (*household member incarcerated*; $F_{(1,158)} = 8.144; p = .005$), with the Native American group endorsing the item more frequently (23% compared to 7% of the Caucasian group); and ACE-9 (*experiencing physical neglect*; $F_{(1,158)} = 11.790; p = .001$), with the Native American group endorsing the item more frequently (17%)
compared to 1% of the Caucasian group); and ACE-10 (*experiencing emotional neglect*; $F_{(1,158)} = 4.368; p = .038$), with the Native American group again endorsing the item more frequently (32% compared to 18% of the Caucasian group). Therefore, the Native Americans in this sample were significantly more likely to experience each of these five negative events during their childhood when compared to the Caucasian participants (see Figure 3).

In further exploration of adversity and race, a cross tabulation showed that 34.5% of Native American population experienced four or more adversities while 15.1% of the Caucasian population experienced four or more. Descriptive statistics revealed that an overall mean of 2.95 adverse experiences was endorsed by the Native American group ($SD = 2.616$) and an overall mean of 1.78 adverse experiences was endorsed by the Caucasian group ($SD = 1.78$). This difference is significant ($F_{(1,155)} = 9.772; p = .002$). These findings indicate Native American
participants experienced various adversities at about double the levels of their Caucasian counterparts.

A one-way analysis of variance showed that individuals raised in Southeastern Montana, but not born there experienced the highest number of adversities at 3.14, \((SD = 2.410)\). The participants raised in MT, but not the southeastern corner were exposed to 2.68, \((SD = 2.476)\) and those raised in SE MT were exposed to 2.52 \((SD = 2.411)\). Individuals raised in Midwestern United Stated experienced 3.08, \((SD = 2.957)\), those raised within the Western United States were exposed to .89 \((SD = .928)\), and the Easterners experienced the least number of adversities at .75 \((SD = 1.165)\). While there was some variation in adversities experienced based on where the participants were raised, the differences were not significant.

The mean range for each ACE item based on employment level varied from .05-.67 with \(SD\) range .218-.479. A cross tabulation showed that as employment levels increased the reported history of exposure to adversities decreased. Among the Level 1 employees \((no\ degree\ or\ skill\ set\ required)\) 43.4% experienced four or more childhood adversities; in comparison 30.2% of the Level 2 employees \((do\ not\ require\ a\ degree,\ but\ minimum\ skills)\), 25% of the Level 3 employees \((do\ not\ require\ a\ degree,\ but\ large\ skill\ set)\), and 9.4% of the Level 4 employees \((degree\ required)\), experienced four or more adversities.
One-way analyses of variance revealed that four items had significant mean differences between employment groups: ACE-2 (*physically abused*; $F_{(3,145)} = 4.866; p = .003$), Level 1 employees endorsed the item more frequently (35%); endorsement was 14%, 24% and 6% for Levels 2, 3, and 4, respectively. For item ACE-5 (*household member abused drugs/alcohol*; $F_{(3,144)} = 3.389; p = .020$), Level 1 employees endorsed the item more frequently (67%); endorsement was 47%, 48%, and 31% for Levels 2, 3, and 4, respectively. For Item ACE-6 (*household member was incarcerated*; $F_{(3,145)} = 3.748; p = .012$), Level 1 employees again endorsed the item more frequently (30%); endorsement was 19%, 14%, and 6% for Levels 2, 3, and 4, respectively. Finally, for Item ACE-9 (*experienced physical neglect*; $F_{(3,145)} = 3.748; p = .012$), the Level 1 employees once again endorsed the item more frequently (23%); endorsement was 12%, 5%, and 2% for Levels 2, 3, and 4, respectively. Post hoc tests revealed a common pattern for each of the significant items: Level 1 employees endorsed more negative experiences than the Level 4 employees. This difference was significant for four items: ACE-2 ($t_{(3,145)} = 4.86; p = .005$), ACE-5 ($t_{(3,144)} = 3.38; p = .021$), ACE-6 ($t_{(3,144)} = 3.18; p = .031$), and ACE-9 ($t_{(3,145)} = 3.74; p = .018$). Level 2 and Level 3 employment positions scored between Level 1 and Level 4 for each of these items, but did not differ significantly from either of these levels in the post hoc tests (see Table 2).

### Table 2

<table>
<thead>
<tr>
<th>Item</th>
<th>Abbreviated Item</th>
<th>L1 (SD)</th>
<th>L2 (SD)</th>
<th>L3 (SD)</th>
<th>L4 (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Experienced emotional humiliation</td>
<td>.50(.509)</td>
<td>.40(.495)</td>
<td>.40(.503)</td>
<td>.28(.455)</td>
</tr>
</tbody>
</table>
Exploring Resilience through Employment

1. **Physically abused**
   - Level 1: .35(.486)
   - Level 2: .14(.351)
   - Level 3: .24(.436)
   - Level 4: .06(.231)

2. **Sexually abused**
   - Level 1: .26(.445)
   - Level 2: .21(.412)
   - Level 3: .19(.402)
   - Level 4: .15(.359)

3. **Mother was treated violently**
   - Level 1: .37(.490)
   - Level 2: .28(.454)
   - Level 3: .24(.436)
   - Level 4: .13(.339)

4. **Household member abused drugs/alcohol**
   - Level 1: .67(.479)
   - Level 2: .47(.505)
   - Level 3: .48(.512)
   - Level 4: .31(.469)

5. **Household member was incarcerated**
   - Level 1: .30(.466)
   - Level 2: .19(.394)
   - Level 3: .14(.359)
   - Level 4: .06(.231)

6. **Household member depressed, suicidal mentally ill, or psychiatric hospital**
   - Level 1: .19(.402)
   - Level 2: .21(.412)
   - Level 3: .19(.402)
   - Level 4: .19(.392)

7. **Raised by both biological parents**
   - Level 1: .39(.495)
   - Level 2: .23(.427)
   - Level 3: .33(.483)
   - Level 4: .28(.452)

8. **Experienced physical neglect**
   - Level 1: .23(.425)
   - Level 2: .12(.324)
   - Level 3: .05(.218)
   - Level 4: .02(.136)

9. **Experienced emotional neglect**
   - Level 1: .32(.475)
   - Level 2: .35(.482)
   - Level 3: .33(.483)
   - Level 4: .13(.339)

Note. **Level 1**: does not require skill or degree, **Level 2**: does not require a degree, but requires minimum skills, e.g., computer knowledge, **Level 3**: does not require a degree, but requires a large skill set, e.g., supervisors, **Level 4**: requires a degree. Means reflect the percentage who endorsed each adversity.

*Note. Item 8 is a reversed item, therefore, those scores represent the means and standard deviations for the individuals who were not raised by both biological parents.*

Further examination of the average number of adversities experienced by each employment level revealed that Level 1 employees experienced an average of 3.63 adversities, (*SD* = 2.883). Level 2 experienced 2.58, (*SD* = 2.452), Level 3 experienced 2.65, (*SD* = 2.346), and Level 4 experienced 1.58, (*SD* = 1.781). These differences are also significant (*F*(3,142) = 5.163; *p* = .002).

A Pearson Correlation showed that adverse experiences were negatively correlated with employment levels (*r* = -0.299; *p* < .001) and education levels (*r* = -0.177; *p* = .034). The number of different times an individual had been employed by St. Labre was positively correlated with adverse experiences (*r* = 0.206; *p* = .015).
To ascertain what factors predicted employment position, a step-wise regression was computed using the following as predictors: Education and ACE scores. Both of the variables entered into the regression had significant contributions. Results accounted for 63.5% of the variance within employment position: (a) education ($R = .786; R^2 = .617; F_{(1,123)} = 198.42; p < .001$), and (b) ACE scores ($R = .801; R^2 = .641; \Delta R^2 = .024; F_{(1,122)} = 109.03; p < .001$).

**Spiritual Well-Being**

On average, St. Labre employees were found to have relatively high levels of Spiritual Well-Being ($M = 5.293, SD = .858$). T-tests were used to compare current scores to other samples. It was found that the current population’s scores were significantly lower than Adams’ (1993) Christian Association for Psychological Studies sample ($M = 5.46, SD = .59; t_{(484)} = 2.54; p = .01$). However, current scores were significantly greater than Boliou’s (1989) Air National Guard sample ($M = 3.75, SD = .38; t_{(205)} = 12.52; p = <.001$) and significantly greater than Endyke’s (1999) sample of Pacific Northwesterners ($M = 4.64, SD = .97; t_{(303)} = 6.20; p < .001$; see Table 3). Current scores were also comparable to known scores from other religious groups as cited in Bufford, Paloutzian, & Ellison (1991). These include: Paloutzian and Ellison’s (1979) Evangelical college student sample ($104.26/20 = 5.21$), Davis et al.’s (1987) Alliance religious sample ($103.00/20 = 5.15$), and Huggins’ (1988) Conservative Baptist sample ($105.93/20 = 5.29$).

<table>
<thead>
<tr>
<th>Sample</th>
<th>Study</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>Diff</th>
<th>se</th>
<th>df</th>
<th>t</th>
<th>Sig</th>
<th>ES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Montana</td>
<td>Knows His Gun (2012)</td>
<td>155</td>
<td>5.29</td>
<td>.86</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Christian Assoc</td>
<td>Adams (1993)</td>
<td>331</td>
<td>5.46</td>
<td>.59</td>
<td>-0.17</td>
<td>.065</td>
<td>484</td>
<td>2.54</td>
<td>=0.01</td>
<td>-.19</td>
</tr>
<tr>
<td>Air Ntl</td>
<td>Boliou</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
When compared by race, Spiritual Well-Being was as follows: Native Americans ($M = 5.47$, $SD = .80$), and Caucasians ($M = 5.09$, $SD = .88$). A one way analysis of variance revealed there is a significant difference between races ($F_{(1,153)} = 7.824$; $p = .006$). There was also a significant difference for gender with the female participants endorsing higher levels of spiritual functioning ($F_{(1,153)} = 3.298$; $p = .034$).

Scores of Spiritual Well-Being separated by geographical location where the participants were raised are as follows: Southeastern MT ($M = 5.30$, $SD = .91$), raised in SE MT, but not born there ($M = 4.78$, $SD = .83$), raised in MT, but not the southeastern half ($M = 5.63$, $SD = .77$), Western U.S. ($M = 5.51$, $SD = .99$), Midwestern U.S. ($M = 5.32$, $SD = .65$), and Eastern U.S. ($M = 5.04$, $SD = .90$). There were no significant differences among groups based on where the individuals were raised.

Scores for each employment level are as follows: Level 1 ($M = 5.13$, $SD = .93$), Level 2 ($M = 5.21$, $SD = .81$), Level 3 ($M = 5.49$, $SD = .79$), and Level 4 ($M = 5.34$, $SD = .86$). There were no significant differences between groups based on employment position.

A Pearson Correlation revealed that Existential Well-Being was positively correlated with resilience ($r = .234$; $p = .003$) and Spiritual Well-Being was positively correlated with how satisfied the employees of St. Labre are with their employment ($r = .254$; $p = .002$). While the number of days absent from work ($r = -.176$; $p = .029$) was negatively correlated with employee satisfaction.

**CD-RISC**
Despite undergoing a variety of adverse experiences, St. Labre employees were found to have normal levels of resilience ($M = 78.0, SD = 13.3$); $t$-tests were used to compare current scores to published data. It was found that the current population’s scores were lower than Connor-Davidson’s general population sample ($M = 80.4, SD = 12.8$); while this difference was significant, the effect size was minimal ($t_{(1.15,736)} = 2.08; p = .037; ES = -.09$). No differences were found between participants in an African-American college sample and the St. Labre sample ($t_{(1.44,313)} = 0.13; p = .889; ES = -.007$). Finally, the St. Labre participants scored significantly higher than several clinical samples ranging from primary care to PTSD patients, (See Table 4).

Table 4

<table>
<thead>
<tr>
<th>Sample</th>
<th>Study</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>Diff</th>
<th>se</th>
<th>df</th>
<th>t</th>
<th>Sig</th>
<th>ES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Montana</td>
<td>Know His Gun (2011)</td>
<td>161</td>
<td>78.0</td>
<td>13.3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General Population</td>
<td>Connors (2003)</td>
<td>577</td>
<td>80.4</td>
<td>12.8</td>
<td>-2.4</td>
<td>1.15</td>
<td>736</td>
<td>2.08</td>
<td>.037</td>
<td>-.09</td>
</tr>
<tr>
<td>Primary Care</td>
<td>Connors (2003)</td>
<td>139</td>
<td>71.8</td>
<td>18.4</td>
<td>6.2</td>
<td>1.83</td>
<td>298</td>
<td>3.37</td>
<td>&lt;.001</td>
<td>.18</td>
</tr>
<tr>
<td>Psychiatric Outpatients</td>
<td>Connors (2003)</td>
<td>43</td>
<td>68.0</td>
<td>15.3</td>
<td>10.3</td>
<td>2.35</td>
<td>202</td>
<td>4.23</td>
<td>&lt;.001</td>
<td>.32</td>
</tr>
<tr>
<td>GAD Patients</td>
<td>Connors (2003)</td>
<td>24</td>
<td>62.4</td>
<td>10.7</td>
<td>15.6</td>
<td>2.84</td>
<td>183</td>
<td>5.48</td>
<td>&lt;.001</td>
<td>.54</td>
</tr>
<tr>
<td>PTSD Patients-Pre</td>
<td>Connors (2003)</td>
<td>22</td>
<td>47.8</td>
<td>19.5</td>
<td>30.2</td>
<td>3.21</td>
<td>181</td>
<td>9.38</td>
<td>&lt;.001</td>
<td>.67</td>
</tr>
<tr>
<td>PTSD Patients-Post</td>
<td>Connors (2003)</td>
<td>22</td>
<td>52.8</td>
<td>20.4</td>
<td>25.2</td>
<td>3.25</td>
<td>181</td>
<td>7.74</td>
<td>&lt;.001</td>
<td>.59</td>
</tr>
<tr>
<td>African-Am. Psych</td>
<td>Brown (2008)</td>
<td>154</td>
<td>78.2</td>
<td>12.2</td>
<td>-0.2</td>
<td>1.44</td>
<td>313</td>
<td>0.13</td>
<td>ns</td>
<td>-.007</td>
</tr>
<tr>
<td>Women w/ Infertility</td>
<td>Sexton, et al. (2010)</td>
<td>40</td>
<td>68.1</td>
<td>14.3</td>
<td>9.9</td>
<td>2.38</td>
<td>199</td>
<td>4.15</td>
<td>&lt;.001</td>
<td>.33</td>
</tr>
</tbody>
</table>
When compared by race, CD-RISC scores were as follows: Native Americans ($M = 78.33, SD = 15.429$), and Caucasians ($M = 77.53, SD = 10.342$). Analysis of variance indicated there was not a significant difference between racial groups ($F(1,159) = .141; p = .708$).

Scores separated by the geographical location where the participants were raised are as follows: Southeastern MT ($M = 77.85, SD = 13.146$), raised in SE MT, but not born there ($M = 75.43, SD = 9.964$), raised in MT, but not the southeastern corner ($M = 78.64, SD = 11.970$), Western U.S. ($M = 82.44, SD = 7.552$), Midwestern U.S. ($M = 71.92, SD = 24.109$), and Eastern U.S. ($M = 81.00, SD = 10.994$). There were no significant differences between groups based on where the individuals were raised ($F(5,125) = .807; p = .547$).

Resilience scores for each employment level were: Level 1 ($M = 77.03, SD = 18.643$), Level 2 ($M = 76.58, SD = 12.339$), level 3 ($M = 80.24, SD = 10.963$), and Level 4 ($M = 77.98, SD = 12.001$). Again, no significant differences were found between groups based on employment levels ($F(3,145) = .373; p = .773$).

**Predicting Resilience Scores**

Using a Pearson Correlation it was found that adverse childhood experiences ($r = -.158; p = .048$), years of unemployment ($r = -.184; p = .021$), and amount of time participants were employed ($r = -.202; p = .012$) were negatively correlated with CD-RISC scores.

A stepwise regression was computed to ascertain what factors predicted CD-RISC scores in the present sample. Based on the correlational findings, total scores on the ACE, EWB scores, time working at St. Labre, days absent from work, number of times employed at St. Labre, and years of unemployment were entered into the regression. Three variables entered the regression with significant contributions: duration of time on the job, EWB, and years unemployed. Results accounted for 16.1% of the variance on the CD-RISC: (a) time on the job ($R = .252; R^2 = .064, F_{(1,149)} = 10.12; p = .002$); (b) EWB ($R = .353; R^2 = .125; \Delta R^2 = .060; F_{(1,148)} = 10.52; p < .001$);
and (c) years unemployed ($R = .422; R^2 = .178; \Delta R^2 = .053; F_{(1,147)} = 10.62; p < .001$). ACE did not contribute additional significant variance.
Chapter 4
Discussion

The current study evaluated the amount of adverse childhood experiences the employees of St. Labre Indian School, St. Charles Mission School, and Pretty Eagle Catholic School (collectively called St. Labre) experienced, along with their religious functioning, and current levels of resilience. We will examine childhood adversity, spiritual wellbeing, and resilience, in turn, and then will address overall conclusions.

Adverse Childhood Experiences

It was revealed that of the 10 adverse items encompassing the Adverse Childhood Experience Rating Scale (ACE), 75% of the St. Labre employees were exposed to a variety of negative childhood experiences. In order to capture the dynamics of this diversified population, data analysis evaluated scores by racial identity, geographical location where the individuals were raised, and their current employment level.

Knowing that historical trauma has wounded generations through the inheritance of ancestral pain (Yellow Horse Brave Heart, 1999), it was imperative to understand this population by exploring their exposure to negative childhood events. When specifically looking at race it was found that when compared to the Caucasian participants, the Native American group experienced significantly more physical and emotional neglect, household members abusing drugs or alcohol, household members being incarcerated, and exposure to their mother being treated violently. A federal report released by MSNBC stated that almost 12% of deaths among
Native Americans/Alaskan Natives are alcohol-related, which is more than three times the percentage in the general population. Their study found that the greatest number of tribal alcohol-related deaths occur in the Northern Plains, where reservations are remote and often destitute (msnbc.com). John Yellow Bird Steele, the tribal president for the Pine Ridge reservation in South Dakota, reported that 90% of criminal cases in the court system, and a similar number of reservation illnesses, are caused by alcohol. It was also noted that fetal alcohol syndrome, fatal drunken driving accidents, and beer-fueled murders have hindered the Pine Ridge reservation for decades (Williams, 2012).

Felitti et al. (1998) explained that experiencing four or more different adversities during childhood is considered significant and creates an increased risk for serious adverse adult outcomes. The St. Labre employees only endorsed an average of 2.41 adversities, which reveals that, as a whole, these participants were not exposed to a debilitating amount of negative experiences. However, with further examination it was found that 34.5% of the Native American population and 15.1% of the Caucasian population experienced four or more such negative events. Yet, this also reveals that 65.5% and 84.9% of participants within these groups were not exposed to the number of adversities considered significantly harmful.

Looking within geographical location of upbringing it was found that individuals who were raised in Southeastern Montana, but not born in that region and individuals who were raised in Midwestern United States experienced the most negative events; whereas, individuals from Western and Eastern United States endorsed relatively fewer. However, geographical locations where the employees were raised were not found to be significantly related to the number of adversities experienced. This, therefore, suggests that the local participants from this rural area of
Montana have experienced similar amounts of adversities when compared to participants who originally resided across the United States and subsequently moved to southeast Montana.

An exploration of the relationship between adversity and the different levels of employment established by St. Labre revealed that the employees in positions that require a greater amount of education or skill experienced fewer adversities than employees in positions with fewer requirements. Level 1 employees (*no degree or skill set required*) endorsed a significantly greater exposure to physical abuse, physical neglect, a household member abusing drugs or alcohol, and a household member being incarcerated when compared to Level 4 employees (*degree required*). It was also found that the Level 1 employees had the largest proportions of individuals experiencing four or more negative events during their childhood at 43.4%, whereas only 9.4% of the Level 4 employees were exposed to this significant amount. It was revealed that approximately one quarter of the Native American participants retain Level 1 employment (24%), yet almost half of the Native American participants also have a college education (43%). While, this is significantly lower than the Caucasian population, where 71% have a college education, these statistics reveal that the employees of St. Labre are not only able to maintain employment, but also pursue higher education.

Some participants struggle to maintain stable employment and have been employed numerous times by St. Labre. It was revealed that adverse experiences are positively correlated with how many different times an individual had been employed. This suggests that increased exposure to negative experiences hinders the ability to maintain stable employment.

It was also revealed that childhood adversities are negatively correlated with the amount of time an individual stays within a particular employment position. Therefore, as negative
experiences increase, changes within employment positions decrease. A possible explanation for this unexpected finding is that these results are portraying a curvilinear approach to these factors. For instance, people doing well change jobs through advancements and people doing poorly lose their jobs or quit. Individuals in between these two polarities are able to manage their positions for long periods of time, but without progression or decline.

**Spiritual Well-Being**

This sample was found to have relatively high levels of spiritual well-being when compared to other published studies. Due to this study’s positive correlation between Spiritual Well-Being and how satisfied the employees of St. Labre are with their employment, we can conclude that overall these participants have a sense of fulfillment. This is likely to only further enhance their capacity to maintain stable employment.

While participants in this study possess relatively high levels of spiritual well-being, these scores may be an underrepresentation of their current level of spiritual functioning due to the inclusion of three reversed items within the SWB-6. Anecdotal findings by Carlson et.al, (2011), suggested that reversed items tend to be less reliable for ethnically diverse older adults. They are found to have less internal consistency, were associated with lower item-scale correlations, and were often answered in atypical ways at an intra-individual level. To illustrate this, in the present study a Native American participant asked for clarification on how to answer one of the reversed items on the SWB-6 during this study. Therefore, these reversals may have adversely affected the overall score and internal consistency for this scale.

It was also found that women had significantly higher levels of spiritual well-being. This may be due, in part, by the fact that there were almost three times as many female participants
than male. Yet, this difference is still worth noting as most studies did not find gender-related differences when comparing levels of spiritual well-being (Paloutzian, Bufford, & Wildman, 2012).

It should also be noted that the results for the SWB-6 were computed for this study so comparisons could be made with other published data. The mean item score for the SWB-6 of 5.293 corresponds to 105.86 on the twenty-item scale; see Bufford et al. (1991) for a further comparison of scores.

**Resilience**

Despite undergoing a variety of adverse experiences, St. Labre employees were found to have essentially normal levels of resilience. Even though they scored significantly lower than Connor-Davidson’s general population sample, the effect size was minimal. Also, no differences were found between the current participants and an African-American college sample, participants of which were found to possess highly resilient features. The current sample also scored significantly higher than several clinical samples ranging from primary care patients to PTSD patients. Therefore, it is likely that these individuals were exposed to protective factors that promoted their capacity to maintain relatively stable, healthy levels of psychological and physical functioning.

This may be explained by focusing on the reverse percentage of exposure to adversities. For example, 10 to 45% of the participants in this study reported experiencing the various negative events listed on the ACE. However, these results also reveal that 55-90% of participants reported that they were not exposed to any specific negative event. Therefore, this is another
finding that suggests these individuals were exposed to protective factors that promoted wellbeing and resilient qualities.

Despite the fact that the Native American group experienced more adversities and retain more Level 1 employment positions, they were not found to possess lower levels of resilience. This suggests that these individuals utilized personal skills and strengths to cope and recover from the problems or challenges they experienced.

Employment position and resilience were found to correlate negatively with adverse experiences. Therefore, as exposure to negative events decreases, employment and resilience levels increase, and vice versa. Because this population of participants, as a whole, has not been exposed to a debilitating amount of negative experiences, they possess higher levels of resilience, which in turn, has allowed stable employment.

**Summary and Conclusion**

Historical traumas and the inheritance of ancestral pain have crippled generations of Native Americans. Prior research shows that genocidal acts distorted cultural identity, self-concept, and values, thus causing depression, self-destructive behavior, substance abuse, and chronic bereavement for many Native Americans (Yellow Horse Brave Heart, 1999). This study found that the Native American participants were exposed to significantly more childhood adversities than Caucasian participants. The Native Americans also reported lower levels of education and lower employment status when compared to the Caucasian counterparts. Despite this, however, the Native American employees of St. Labre, in general, are unusual in the fact that they were not debilitated by their exposure to adverse experiences. Although many Native Americans within this sample reported that they had endured at least four or five adverse
childhood experiences, suggesting intense hardships, they were similar to normal samples in terms of resilience and spiritual wellbeing. This is an interesting outcome, as it reveals the Native Americans within this sample possess more resilient qualities than we might expect.

While resilience factors were not a primary focus of this investigation, these scores suggest that the current sample had exposure to many of the resilience factors found by Connor and Davison (2003). These include: (a) personal competence, high standards, and tenacity, endorsing one’s strong sense of power and adherence to one’s goal when facing setback situations; (b) Trust in one’s instincts, tolerance of negative affect, and strengthening effects of stress; (c) Positive acceptance of change and secure relationships with others, adaptability; (d) Control of achieving one’s own goal and the ability to access assistance from others (social support); and (e) Spiritual influences, one’s faith in God or in fate.

Resilience was also found to be positively correlated with Existential Well-Being, an additional protective factor (Paloutzian et al, 2012) that was closely examined. The St. Labre employees have relatively high levels of spiritual wellbeing. While the Native American group showed significantly greater scores, both racial groups expressed moderately high levels. This perhaps is not surprising since St. Labre is a private Catholic institution. Due to the findings that spirituality is positively correlated with employee satisfaction, it is likely that this organization is providing an environment that promotes a sense of wellbeing and satisfaction for their employees.

A stepwise regression showed that time on the job, existential wellbeing, and years of unemployment, in that order of significance, all predicted resilience. Because the data are correlational, it is not possible to make causal conclusions. However, job stability is the most powerful predictor of resilience. Because St. Labre provides a stable work environment,
supplementation of achieving college advancement, encouragement of spiritual participation, and honors cultural beliefs, it is hypothesized that St. Labre itself is one protective factor providing the emergence of resilience. To further support this, no significant differences in resilience were found between the differing employment levels, which imply that all levels of employment are exposed to similar protective factors within this same organization. Therefore, participants of this rural population are gaining the necessary tools that encourage and promote successful outcomes.

Previous research by Long and Nelson (1999) and Belcourt-Dittloff (2006) examined resilience specifically within Native American populations. They both found that cultural beliefs and traditions, community, hope, spirituality, and identity are important resilient factors. Native American individuals who relied upon these resilient, culturally specific, internal and external coping strategies were likely to report higher levels of positive psychosocial status. The employees of St. Labre were found to possess resilient qualities regardless of their race, region of upbringing, employment level, or exposure to harsh conditions. While the current study cannot explicitly state what protective factors encouraged resilience for these individuals, we found, that in general, this population had been protected. As one might suspect, individuals are able to function in a more sufficient manner when defended from crippling experiences. For these individuals it has been expressed through their ability to thrive as adults through employment, rather than succumb to poverty and hardship.
References


Bufford, R. K. (2011). *Short version of spiritual well-being scale for institutional research.* Unpublished manuscript, Department of Psychology, George Fox University, Newberg, Oregon.


Knows His Gun, K. (2012). *Resilience through the eyes of the st. labre Indian school employees: An exploration of the variables that encourage stable employment within this rural population* (Doctoral dissertation).


Appendix A

Consent
Consent

Thank you for your participation in this study. The purpose of this project is to investigate factors that enable individuals to overcome negative childhood experiences and develop resilience, the ability to experience stress without surrendering to it. The study then looks at how these factors affect education and employment. The measures used for this study include: ACE, CD-RISC, SWB-6, and an Employee Survey. There are no right or wrong answers except what is true about your experiences. It will take approximately 10 minutes to complete all four. You are under no obligation to take part in this study and may choose to end your participation at any time and return the uncompleted materials. You are also free to decline answering any question by skipping it.

No personal identification will be collected. The information for the raffle will be gathered and used solely for that purpose. It will be destroyed immediately upon completion.

Participation in this research project serves as your consent, which means you are giving me permission to combine your answers with all others that will be collected.
Appendix B

Adverse Childhood Experience Rating Scale
Adverse Childhood Experience Rating Scale

For each of the following, indicate whether you **WERE (yes)** or **WERE NOT (no)** exposed to this event during your childhood:

<table>
<thead>
<tr>
<th>Event</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did you experience recurrent emotional humiliation?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Were you physically abused (e.g., was beaten, not merely spanked)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Did you experience contact sexual abuse?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Was your mother treated violently?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Did a household member abuse drugs or alcohol?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Was a household member incarcerated?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Was a household member chronically depressed, suicidal, mentally ill, or in psychiatric hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Were you raised by both biological parents?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Did you experience physical neglect?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Did you experienced emotional neglect?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix C

Spiritual Well-Being Scale
**Spiritual Well-Being Scale**

For each of the following statements circle the choice that best indicates the extent of your agreement or disagreement as it describes your personal experience:

<table>
<thead>
<tr>
<th></th>
<th>SA = Strongly Agree</th>
<th>A = Agree</th>
<th>MD = Moderately Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MA = Moderately Agree</td>
<td>D = Disagree</td>
<td>SD = Strongly Disagree</td>
</tr>
</tbody>
</table>

1. I feel very fulfilled and satisfied with life ........................................SA MA A D MD SD

2. I don’t enjoy much about life ........................................................................SA MA A D MD SD

3. I don’t have a personally satisfying relationship with God .......................SA MA A D MD SD

4. I feel most fulfilled when I’m in close communion with God ......................SA MA A D MD SD

5. I feel unsettled about my future .....................................................................SA MA A D MD SD

6. I believe that God is concerned about my problems .....................................SA MA A D MD SD
Appendix D

CD-RISC
CD-RISC

For each statement give the response that best describes your experience: **not true at all** (0), **rarely true** (1), **sometimes true** (2), **often true** (3), **true nearly all of the time** (4)

<table>
<thead>
<tr>
<th>Statement</th>
<th>Not true</th>
<th>True</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Able to adapt to change</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>2. Close and secure relationships</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>3. Sometimes fate or God can help</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>4. Can deal with whatever comes</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>5. Past success gives confidence for new challenge</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>6. See the humorous side of things</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>7. Coping with stress strengthens</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>8. Tend to bounce back after illness or hardship</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>9. Things happen for a reason</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>10. Best effort no matter what</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>11. You can achieve your goals</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>12. When things look hopeless, I don’t give up</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>13. Know where to turn for help</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>14. Under pressure, focus and think clearly</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>15. Prefer to take the lead in problem solving</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>16. Not easily discouraged by failure</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>17. Think of self as strong person</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>18. Make unpopular or difficult decisions</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>19. Can handle unpleasant feelings</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>20. Have to act on a hunch</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>21. Strong sense of purpose</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>22. In control of your life</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>23. I like challenges</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
<tr>
<td>24. You work to attain your goals</td>
<td>0 1 2 3 4</td>
<td></td>
</tr>
</tbody>
</table>
25 Pride in your achievements------------------------ 0  1  2  3  4

Appendix E
Employment Survey
Employment Survey

1. Sex:

   ____ Male
   ____ Female

2. Age in years at last birthday: _________________

3. Ethnicity:

   ____ American Indian (please specify tribal affiliation) ________________________________
   ____ Caucasian
   ____ Asian
   ____ African American
   ____ Hispanic or Latino

   Other (please specify) _______________________________________________________________

4. Were you born and raised in Southeastern Montana:

   ____ Yes (please specify where) ______________________________________________________
   ____ No (please specify where) _____________________________________________________

5. Do you now, or have you ever, lived on a reservation:

   ____ Yes
   ____ No

6. Highest Educational Level:

   ____ Grade School
   ____ High School/GED
7. Are You Currently Attending School:

_____Yes
_____No

8. Current Marital Status:

_____Married
_____Single
_____Divorced
_____Cohabiting

9. Do you have children:

_____Yes
_____No

10. If Yes, how many:_______________

11. What are their ages:________________________________________________________

12. How many different jobs have you had in the past five years:___________________

13. How long have you been employed by St. Labre/affiliate schools:___________________

14. On average how many workdays do you miss monthly:

_____ 0 days
_____1-3 days
_____4-6 days
15. What is your current position at St. Labre/affiliate schools: __________________________

16. In the past 5 years, how many annual raises have you received: ____________________

17. How satisfied are you with your current employment:

   Dissatisfied
   1  2  3  4  5  6  Satisfied
   7

18. How many different times have you worked for St. Labre/affiliate schools: __________

19. Since the age of 20, how many years in total have you ever been unemployed:

   _____ None
   _____ Less than 1 year
   _____ One to two years
   _____ Two to five years
   _____ Five to ten years
   _____ Ten to twenty years
   _____ More than twenty years

20. Prior to working at St. Labre/affiliate schools were you unemployed:

   _____ Yes
   _____ No

21. If Yes, how many months/years were you unemployed before working at St. Labre: ______

22. How many times have you quit a job: _________________________

23. What is your current income bracket:

   _____ < $5,000
24. What motivates you to maintain employment:

Thank you for completing this survey, don’t forget to register for the drawing!
Appendix F

Curriculum Vitae
EDUCATION

GEORGE FOX UNIVERSITY, NEWBERG, OR
Doctor of Psychology

GEORGE FOX UNIVERSITY, NEWBERG, OR
Master of Arts, Clinical Psychology

MONTANA STATE UNIVERSITY – BILLINGS, BILLINGS, MT
Master of Science, Psychology

MONTANA STATE UNIVERSITY – BILLINGS, BILLINGS, MT
Bachelor of Arts, Psychology

SUPERVISED CLINICAL EXPERIENCE

INTERNSHIP (AUGUST 2012–AUGUST 2013)
Wasatch Mental Health
Psychology Intern
Supervisor: Larry Dunning, PhD
Population: Medicaid recipients: Children, Adolescents, Adults, Couples, and Families
- Conducted and documented intake interviews, diagnosis, SPMI/SED, and treatment planning
- Provided weekly individual, family, and couples psychotherapy to outpatient clients
- Conducted psychosocial and neurological assessments, diagnosis, and treatment planning
- Provided oral and written feedback of test findings to clients and parents/guardians
- Facilitated and Co-facilitated group therapy
- Conducted assessments in collaboration with Dept of Workforces for disability purposes
- Conducted psychoeducational didactics
- Collaborated with research projects
- Received individual supervision with a primary and secondary supervisors and group supervision that involved case presentations and consultation
Pre-Intern (September 2011-June 2012)
School Based Behavioral Health, GFU Rural Consortium
Graduate Coordinator
Supervisor: Elizabeth Hamilton PhD
Population: Children, Adolescents, Adults
• Provided weekly individual and group supervision to practicum students within the Rural School District Consortium
• Coordinated monthly specialized training seminars
• Coordinated monthly all site meetings
• Conducted comprehensive psychoeducational evaluations
• Supervised peers with the administration, scoring, and interpretation of psychodiagnostic assessments
• Supervised peers on the compilation and writing of comprehensive reports and demonstrated how to provide oral feedback of test findings
• Provided individual and group psychological services
• Facilitated service delivery through collaboration with a multi-disciplinary team of school staff, nurse practitioners, and mental health specialists
• Conducted program evaluation to assess optimal strategies for service delivery
• Received individual supervision that involved case presentations and consultation

Practicum II (September 2010-June 2011)
Rural School District Consortium – Yamhill-Carlton School Based Health Center
Supervisor: Elizabeth Hamilton PhD
Population: Children and Adolescents
• Designed and developed a collaborate program of mental health service delivery during the first year of operation of the School Based Health Center
• Provided weekly individual psychotherapy with students from Yamhill-Carlton Intermediate and High School
• Conducted psychosocial and educational assessments, diagnosis, and treatment planning
• Provided oral and written feedback of test findings to parents/guardians and teachers
• Provided multi-faceted interventions within a multi-disciplinary team of school staff, nurse practitioners, and mental health specialists
• Delivered group interventions at both elementary and high school levels, including social skills, organizational skills, peer relationships, and family dynamics
• Conducted program evaluation of Healthy Relationship curriculum
• Received group and individual supervision that involved case presentations and consultation

Practicum I (August 2009-July 2010)
George Fox Behavioral Health Clinic
Supervisor: Joel Gregor PsyD
Population: Low and No Income Children and Adults
• Provided weekly individual and family psychotherapy to outpatient clients from children age 6 to geriatrics
• Conducted comprehensive psychosocial and educational evaluations for both children and adults
• Provided debriefing sessions explaining test results and provided recommendations
• Conducted and documented intake interviews, diagnosis, and treatment planning
• Co-facilitated eight-week parenting skills groups
• Received group and individual supervision that involved videotape review, case presentations, and consultation

**PRE-PRACTICUM (October 2008-April 2009)**
George Fox University
Supervisor: Clark D. Campbell PhD, ABPP
Population: Undergraduate Student Volunteers
  • Conducted intake interviews, mental-status exams, and individual weekly therapy
  • Obtained informed consent at the beginning of treatment, developed treatment plans, maintained progress notes, and provided a termination summary at the end of treatment
  • Participated in weekly supervision, both individual and group, with videotape review, case presentations, and consultation

**TEACHING ASSISTANCE**

**ADVANCED COUNSELING – UNDERGRADUATE LEVEL CLASS**
George Fox University
Fall 2010-2011 Semester
  • Provided psychoeducation and facilitated discussions and role playing within a small group of undergraduates
  • Viewed videotaped mock therapy sessions
  • Provided and received feedback

**LIFESPAN DEVELOPMENT – GRADUATE LEVEL CLASS**
George Fox University
Fall 2011-2012 Semester
  • Collaborated test questions with study guides
  • Consultation of program development possibilities

**adolescent psychopathology – graduate level class**
George Fox University
Summer 2012 Semester
  • Complied appropriate material for class
  • Provided feedback on presentations
  • Co-facilitated lessons
  • Consultation of program development possibilities

**Research and Presentations**
Exploring Resilience through Employment


Knows His Gun, K., & Mackay, H., (June, 2011). *Outcomes of the Healthy Relationships Curriculum*. Presented to Yamhill County as a factor for continual grant support, Yamhill County, OR.

Knows His Gun, K., & Peterson, M., (2012). *Psychoeducational Presentation of the Behavioral Assessment System for Children, 2nd Edition (BASC-2)*. Presented as Continuing Education Units at George Fox University, Newberg, OR.

Knows His Gun, K., Modrell, J., Lawry, C., Borrelli, J., (May, 2012). *Students against Bullying*. Presented at Providence Kid’s Day Health Fair, Portland, OR.

Bufford, R.K., Knows His Gun, K., Gaige, T., & Wade, T.J., (August, 2010). *International Trauma: Gender and Trauma in India*. Poster submitted for presentation at the annual meeting of the American Psychological Association, Orlando, FL.

**Professional Development**

**MULTI-CULTRUAL EMPHASIS:**

**MULTI-CULTURAL COUNSELING: AN ALTERNATIVE CONCEPTUALIZATION**

George Fox University: Newberg, OR

Carlos Taloyo, Ph.D.

**TOWARDS A GLOBAL CHRISTIAN PSYCHOLOGY:**

**RE-CONSIDERING CULTURE AND CONTEXT**

**SEPTEMBER 2009**

**OCTOBER 2008**
Exploring Resilience through Employment

George Fox University: Newberg, OR
J. Derek McNeil, Ph.D.

ASSESSMENT EMPHASIS:

ASSESSMENT AND TREATMENT OF ANGER, AGGRESSION
AND BULLYING IN CHILDREN AND ADULTS
AND THE MINI-MENTAL STATE EXAMINATIN-2ND ED
June, 2012
2012 Annual Northwest Psychological Assessment Conference
George Fox University: Newberg, OR
Ray DiGiuseppe, PhD and Joel Gregor, PsyD

ASSESSMENT OF ADHD IN CHILDREN AND ADULTS
June, 2011
2011 Annual Northwest Psychological Assessment Conference
George Fox University: Newberg, OR
Steven J. Hughes, PhD, LP, ABPdN

BEST PRACTICES IN MULTI-CULTURAL ASSESSMENT
October 2010
George Fox University: Newberg, OR
Eleanor Gil-Kashiwabara, PhD

CHILDREN & ADOLESCENT EMPHASIS:

CHILD CUSTODY EVALUATION: NOT FOR EVERYONE
FEBRUARY 2011
REVIEW OF RECENT APA PRACTICE GUIDELINES
George Fox University: Newberg, OR
Wendy Bourg Ransford, PhD

INFANT ADOPTION TRAINING INITIATIVE
October 2009
UNDERSTANDING INFANT ADOPTION
George Fox University: Newberg, OR
Sally Guyer

TREATMENT AND TEACHING INTERVENTIONS FOR
April 2009
CHILDREN WITH AUTISM
George Fox University: Newberg, OR
Gary Mesibov, Ph.D.

OVERALL CLINICAL EMPHASIS:

MOTIVATIONAL INTERVIEWING
October 2011
George Fox University: Newberg, OR
Michael J. Fulop, PsyD
Exploring Resilience through Employment

**Neurobiological Effects of Trauma**
George Fox University: Newberg, OR
Anna Berardi, PhD

**Primary Care Behavioral Health:**
*Where Body, Mind (& Spirit) Meet*
George Fox University: Newberg, OR
Neftali Serrano, PhD

**Current Guidelines for Working with Gay, Lesbian, and Bisexual Clients:**
The New APA Practice Guidelines
George Fox University: Newberg, OR
Carol Carver, PhD

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**Volunteer Work**

**Admissions Committee** *(2010-Present)*
- Reviewed applicant files
- Participated in collaboration with the committee regarding each applicant
- Facilitated duties during interview days
- Participated as a student interviewer during the interview process

**Multi-Cultural Committee** *(2010-Present)*
- Attended monthly meetings
- Participated in the planning for the vision of the committee
- Discussed the establishment of a Mission Statement and goals

**Supplemental Parent Support, Edwards Elementary** *(2009-Present)*
- Coordinated parent volunteer schedule
- Planned and provided activities for special events

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**Affiliations & Memberships**

**Psi Chi National Psychology Honor Society**
2006-Present

**American Psychological Association:**
*Graduate Affiliate (APAGS)*
2008-Present

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**Honors & Awards**
Exploring Resilience through Employment

**Departmental Letter of Commendation**
George Fox University 2011-2012

**Departmental Letter of Commendation**
George Fox University 2010-2011

**Richter Scholar Research Grant Recipient**
George Fox University 2010

**Cum Laude Recipient**
Montana State University - Billings 2006

**References**

**See Attached Material**