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## Resilience and Representations of God Among Sri Lankan Youth

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Resilience and Representations of God Among Sri Lankan Youth

by

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Presented to the Faculty of the  
Graduate School of Clinical Psychology

George Fox University

in partial fulfillment

of the requirements for the degree of

Doctor of Psychology

in Clinical Psychology

Newberg, Oregon

December 6, 2019

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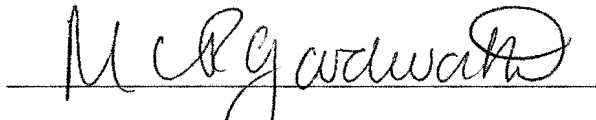
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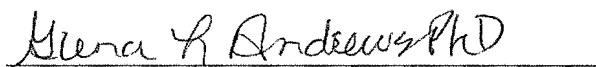
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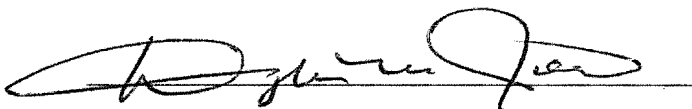
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## Resilience and Representations of God Among Sri Lankan Youth

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**Abstract**

Developing countries have unique challenges and minimal resources resulting in vulnerability to psychological distress. International research suggests youth in developing countries are often impacted by adversity. Resilience reduces the effects of adversity. Kent, Davis and Reich (2014) found representations of god(s) can serve as protective factors, mitigating the effects of hardship, or as a source of distress, contributing to psychological symptoms. The current study examined the relationship between resilience and representations of god(s) among Sri Lankan youth. The Tamil version of the Connor-Davidson Resilience Scale, Questionnaire of God Representations, and a demographic questionnaire was administered to Tamil participants (ages 11-24) who identified as Hindu or Christian. Resilience scores were significantly lower among the Hindus than Christians. Higher scores of resilience correlated with positive representations of god(s) including experiencing positive emotions towards god(s) and viewing god(s) as supportive. Viewing god(s) as supportive was a significant predictor of resilience. Lower scores of resilience were not correlated with negative representations of god(s) such as; experiencing negative emotions toward god(s) including anger or anxiety, and viewing

god(s) actions as ruling, punishing, or passive. Positive representations of god(s) contribute to resiliency in a Tamil sample of youth; mitigating the effects of adversity. Including spirituality or religiosity in clinical intervention and providing religious and spiritual resources to educators may decrease vulnerability to psychological symptoms and increase resiliency among individuals in developing countries.

*Keywords:* Hindu, Christianity, Sri Lanka, God Representations, Resilience, Attachment

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## **Chapter 1**

### **Introduction**

Children's functioning and well-being are greatly influenced by their environments. Children who were exposed to adverse events demonstrated a decreased ability to adapt to change (Catani et al., 2010). Experiencing trauma and shock during childhood impacts the neurological, social, emotional sensorial, psychological, moral, and cognitive development (Treisman, 2017). Children are especially impacted by traumatic stress since their brains are rapidly changing (Siegel, 2010). Neurons in the brain are activated by experiences. Repetition, emotional arousal, novelty, and attention are conditions necessary for the strengthening of synaptic connections, which is how experience changes the structure of the brain. If early experiences are positive, chemicals that are released in the brain influence gene expression and can alter the regulation of the nervous system, reinforcing emotional resilience. However, if early experiences are negative, alterations in genes influencing the stress response may diminish resilience in children, compromising their ability to adapt to stressful events in the future (Siegel, 2010).

### **Attachment and Trauma**

If children who have been traumatized can develop and maintain representational models that are open and secure, there is a greater likelihood they will experience successful interpersonal relationships and more positive adaptation overall (Siegel, 2012). Seeking proximity, using another being as a safe haven to help soothe oneself when distressed,

internalizing the other being as a mental image, and providing a sense of a secure base are basic elements of secure attachment. However, if children who have experienced trauma have insecure representational models, they may be more likely to experience traumatic stress reactions (Siegel, 2012).

### **Attachment and Resilience**

Resilience is an individual's ability to thrive in the face of adversity (Prince-Embury & Saklofske, 2014). Connor and Davidson (2003) demonstrated resilience as a multidimensional quality that varies depending on individual characteristics and life circumstances. Protective factors include personal qualities: a higher intellectual ability, an easy temperament, increased autonomy, increased self-reliance, sociability, effective coping strategies, and strong communication skills (Prince-Embury & Saklofske, 2014). Other protective factors associated with the child's social environment includes family warmth, cohesion, emotional support, positive styles of attachment, and a close bond with a caregiver.

Individuals with a high level of resilience are more likely to experience positive affect, and have higher levels of self-confidence (Prince-Embury & Saklofske, 2014). Flexibility in controlling emotion and better psychological adjustment is also associated with greater resilience. The ability of an individual to make sense of experiences is a source of strength (Siegel, 2010). Likewise, supportive relationships are a source of comfort and healing during stressful times.

Relationships provide a foundation for resilience (Prince-Embury & Saklofske, 2014). The need for connection and supportive relationships is hard-wired in person's neurobiology (Siegel, 2012). When children have a sense of felt safety, they have the ability to be flexible and adapt to stress. Secure attachment is communicated by being attentive and reflective, allowing

for co-regulation to take place; increasing one's ability to self-soothe and demonstrate empathy for others which increases one's ability to recover from distress. Healthy development requires secure attachment, providing "psychological immunity" for developing children (Hoffman & Siegel, 2017).

Prince-Embury and Saklofske, 2014, demonstrated children's development of pathology in the presence of adversity as being related to their emotional reactivity, inability to regulate their emotions, and behavioral maladjustment. However, supportive relationships and secure attachment mitigates the risk for emotional reactivity and inability to regulate. Secure attachment enhances the ability to tolerate stress, manage emotional experience, and learn (Hoffman & Siegel, 2017). Strong social support increases an individual's ability to recover from adverse experiences.

### **Religion, Spirituality, and Trauma**

Religion and spirituality is associated with well-being and mental health (Tung et al., 2018). Religion is an organized system of beliefs, rituals, practices, and symbols designed to connect believers with the sacred or transcendent (Behere et al., 2013). Spirituality involves the personal pursuit for meaning as well as a sense of morality (Van Hook, 2016). Spirituality is a broad term, encompassing various religions or lack thereof, and it may include experiences of the transcendent or relationship with the sacred. Religion and spirituality are correlated with positive emotions and decreased psychological distress (Tung et al., 2018). Researchers identified religion as a psychological necessity, increasing tolerance to stressors (Behere et al., 2013). Religion provides a foundation for experiencing meaning in life, and it provides methods for coping (Tung et al., 2018). Religion and spirituality are often impacted by life events and personal experiences.

Trauma disrupts the integration of body, mind, and emotions; often impacting interpersonal and spiritual aspects of an individual's life (Van Hook, 2016). Previous studies linked trauma with an increase in both, spirituality and religion, as well as a decrease in spirituality and religious faith. When an individual experiences trauma, assumptions about the purpose of life, the world and the divine are often questioned. While research demonstrates the positive effects of religion and spirituality on well-being and mental health, previous studies found a relationship between religious involvement, depression, and anxiety (Tung et al., 2018).

Pargament et al. (2006) suggested the experience of trauma influences spirituality, which is linked with posttraumatic growth as well as struggle, leading to growth or decline in psychological health. People who were resilient following traumatic experiences demonstrated positive affect toward god, and they had a stronger sense of purpose (Kent et al., 2014). Spirituality is a key protective factor against negative outcomes for trauma survivors, and it is the foundation for adaptive coping strategies (Van Hook, 2016).

In contrast, trauma can cause disruptions in positive religious worldviews, leading to higher levels of distress strategies (Van Hook, 2016). For example, a significant loss may be appraised as highly inconsistent with views of a loving and benevolent god. Religious beliefs and experiences of the divine may change following stressful life events, influencing how an individual is coping. Although there is a body of research examining spirituality, religion, and mental health, there is a limited body of literature that considers spirituality, religion, and resilience in youth who have survived trauma (Bryant-Davis et al., 2012).

### **Representations of God**

Spirituality encompasses, but is not limited to, experiences of the divine (Van Hook, 2016). Representations of god is an aspect of spirituality that involves affective experiences of

the divine and perceptions of a divine being's actions (Schaap-Jonker et al., 2008). God representations do not focus on specific beliefs associated with particular religious affiliations; rather it focuses on the individual's personal experience of god. The presence of a positive god representation can enhance an individual's ability to make meaning of difficult experiences and increase positive coping (Van Hook, 2016).

Schaap-Jonker et al. (2017) evaluated representations of god in psychiatric and nonclinical Dutch populations. One common representation of god between both groups was the positive-authoritative god representation, which consisted of high levels of positive feelings and supportive actions as well as low levels of anxiety, anger, and perceiving god's actions as negative. The second most common representation of god was the passive-unemotional god representation, which consisted of low scores on the scales measuring positive and negative feelings towards god, supportive and ruling/punishing actions, in combination with high scores on the scale measuring god's actions as passive.

### **Representations of God, Attachment, and Resilience**

Kirkpatrick (2004) identified god or other divine beings with whom one is in relationship as an attachment figure who is able to provide security and comfort. Attachment to caregivers or parents influences attachment to god (Kirkpatrick, 1998). Kirkpatrick and Shaver (1992) found people who were securely attached had positive images of god. Literature suggests secure attachments and positive images of god contribute to greater resilience (Siegel, 2012; Nguyen et al., 2015). Individuals who demonstrated avoidant attachment tended to stay away from religion and relationship with god, and negative images of god were associated with lower levels of resilience (Kirkpatrick, 1998; Nguyen et al., 2015).

Representations of god were found to be related to mental health symptoms, resilience, and attachment (Tung et al., 2018). Punitive representations of god were positively associated with symptoms of social anxiety, paranoia, obsession, and compulsion, whereas, benevolent god representations were negatively correlated with those mental health symptoms (Silton et al., 2014). Viewing god as benevolent was associated with psychological adjustment (Tung et al., 2018). Attachment to god accounted for the positive relationship between mental health and a benevolent god representation.

God may function as a substitute attachment figure for individuals who lack secure attachments (Kirkpatrick, 1998). Respondents who described their attachments with a caregiver or parent as avoidant reported having personal relationships with god and reported higher levels of commitment, church attendance, and belief in god. Therefore, attachment significantly influences one's representation of god and level of resilience.

### **Vulnerability in Developing Countries**

Vulnerability is increasing as population growth and globalization combine to raise an individual's exposure to risk via climate change, natural disasters, disease, conflict, and financial crises (Naudé et al., 2009). Although these risks affect everyone, residents of developing countries are more susceptible due to the higher incidence of poverty. Individuals living in extreme poverty have limited opportunities to protect themselves and prepare for future setbacks as well as a limited means of coping with adversity. Institutional environments influence how exposed or resilient a country or household is when exposed to shock (Naudé et al., 2009). In developing countries, many people live in areas with inadequate willingness or capacity to assist households in reducing and coping with risks, and with weak capacity to manage macroeconomic shocks and natural hazards. In developing countries, particularly in politically

unstable regions, exposure to disaster often co-occurs with other stressful events; conflict, family violence, and poverty.

Youth in developing countries were exposed to various stressors (Catani et al., 2010). Macro-level stressors may include hazards such as war, disease outbreaks, natural disasters, and macroeconomic shocks (Naudé et al., 2009). Micro-level stressors include inaccessibility to medical care or drinking water, poverty, food insecurity, and violence. Catani et al. (2010) conducted research in Sri Lanka and noted youth living in “high risk” situations tended to experience a “pile up” of events, impairing their health and development. However, there is minimal data to describe children’s adaptation to adverse experiences in developing countries (Catani et al., 2010).

### ***Sri Lanka***

Sri Lanka is a developing country located in southern Asia, south of India (Central Intelligence Agency, 2018). The population, approximately 22.4 million, consists of primarily Sinhalese people, which makes up 74.9% of the population. Other ethnic groups include Sri Lankan Tamil (11.2%), Moors (9.2%), and Indian Tamil (4.2%). The most prevalent religion in Sri Lanka is Buddhism, accounting for 70.2% of the population. Other religions in this region includes Hinduism (12.6%), Muslim (9.7%), Roman Catholic (6.1%), and Christian (1.3%).

Youth in Sri Lanka were exposed to various distressing events including civil war, political upheaval, family violence, natural disaster, and poverty (Catani et al., 2010). In 1983, a war erupted between the Tamil Tigers and the government forces in Sri Lanka after Sinhalese mobs “punished” the Tamil people by burning properties and killing them (Wickremesekera, 2016). The war ended in 2009: over 100,000 lives were lost during the war, significantly impacting the people in Sri Lanka.



In 2004, Sri Lanka experienced a tsunami after an earthquake (Shaw, 2015). Over 36,000 lives were lost in Sri Lanka, and the unstable political situation affected the recovery process in several regions of Sri Lanka. Catani et al. (2010) assessed the psychological impact of school-aged Tamil children's exposure to traumatic events, and their findings indicated the tsunami, war, and incidents of family violence significantly contributed to decreased adaptation in children.

A countrywide devastation occurred in 2017 when there was a dengue fever outbreak with 184,442 cases and over 320 deaths (Herriman, 2018). The total number of cases were 3 times higher in 2017 than in 2016. Hospitals were overwhelmed and forced to turn patients away (Dengue Fever: Sri Lanka, 2017). Exposure to adversity is current for children in Sri Lanka.

On Easter Sunday in 2019, a series of bombs exploded in churches and hotels in Sri Lanka during Easter Sunday service ("Nearly 300 Arrested," 2019). Christians were targeted by an Islamist extremist group, who carried out the attacks. This event was the deadliest occurrence of violence since the civil war ended in 2009, killing 258 people. Sri Lanka has endured many devastating events in the last couple of decades.

### ***Resilience and Spirituality in Sri Lanka***

Although the psychological effects of trauma on Sri Lankan youth is documented, there is limited research on spirituality and adaptation to adversity (Catani et al., 2010). The positive outcomes of spirituality are significant in African American and Caucasian people (Pargament et al., 2006). Positive representations of god in an Asian immigrant population in Canada were associated with greater resilience (Nguyen et al., 2015). Research evaluating spirituality, religion, and positive adaptation in youth living in developing countries is limited. According to Somasundaram and Sivayokan, 2013, spiritual involvement was identified as an important aspect

of Asian culture, and the current study is interested in the relationship between religion, spirituality, and adaptation to adversity in Tamil youth.

### **Purpose of the Study**

The purpose of this study is to explore the relationship between religion, representations of god, and resilience in Tamil youth.

### **Hypotheses**

Hypothesis 1: Positive feelings toward God and perceiving God as supportive, as measured by the Questionnaire of God Representations, will be positively correlated with resilience, as measured by the Connor-Davidson Resilience Scale total. Additionally, Positive feelings toward God and perceiving God as supportive will predict higher levels of resilience.

Hypothesis 2: Feelings of anger, feelings of anxiety, viewing God as punishing or ruling, and viewing God's actions as passive will be inversely correlated with resilience.

Hypothesis 3: The difference in resilience scores between Hindus and Christians will not be significant.

## Chapter 2

### Methods

#### Participants

The sample included 31 Sri Lankan participants between the ages of 11 and 24 ( $M = 15$ ,  $SD = 3.18$ ) who were involved with the child development centers. All participants were Tamil; 17 participants were Hindu and 14 participants were Christian (see Table 1).

**Table 1**

*Demographic Characteristics of the Sample*

Variable	<i>N</i>	%	<i>M(SD)</i>
Age	31		15.39 (3.18)
Gender	31		
Male	17	54.8%	
Female	14	45.2%	
Ethnicity	31		
Tamil	31	100%	
Sinhalese	0	0%	
Other	0	0%	
Religion	31		
Hindu	17	54.8%	
Christian	14	45.2%	
Other	0	0%	
Grade Level	31		
6	2	6.5%	
8	5	16.1%	
9	7	22.6%	
9A	2	6.5%	
10	4	12.9%	
10A	1	3.2%	
10C	1	3.2%	
12	2	6.5%	
13	3	9.7%	
Advanced	1	3.2%	

## Materials

### *Demographic Questionnaire*

A demographic questionnaire was given to participants to obtain information regarding their age, gender, ethnicity, level of education, and religion (see Appendix E-F). Participants were also given a list of attachment figures (i.e., mom, dad, cricket coach, teacher, god, religious leader, brother, sister, uncle, aunt, grandpa, grandma, and/or other) and asked to check all that applied (see Appendix E-F).

### *Connor-Davidson Resilience Scale*

The Tamil translation of the Connor-Davidson Resilience Scale (CD-RISC) was used to measure individuals' ability to cope with adversity (Connor & Davidson, 2003). The CD-RISC assesses internal and external protective factors including, self-efficacy/hardiness, adaptation/optimism, resourcefulness/spirituality, and purpose. It contains 25 items (e.g., "*I am able to adapt when changes occur.*") that are scored on a rating scale ranging from 0 (*not true at all*) to 4 (*true nearly all the time*). The total possible score ranges from 0 to 100; higher scores reflect greater resilience. The psychometric properties of the CD-RISC reflect reliability of the measure and convergent validity with Kobasa hardiness measure (Cronbach's  $\alpha = 0.89$ ; Group 3,  $n = 30$ , Pearson  $r = 0.83$ ,  $p < .0001$ ). Although this measure is not validated for children, the authors indicated the CD-RISC has been used successfully for ages 9 and over (J. Davidson, personal communication, November 2, 2018). The internal consistency of the CD-RISC for the current study indicates strong reliability (Cronbach's  $\alpha = 0.834$ ).

The American sample from the Connor & Davidson (2003) study consisted of 784 participants with a mean age of 43.8 ( $SD = 15.3$ ) years. Participants were divided into 6 groups based upon their involvement in mental health services, including primary care outpatients,

psychiatric outpatients in private practice, individuals not seeking help, individuals with generalized anxiety disorder, individuals with PTSD, and a comparison group. In this study, 65% of the participants were female, 35% were male, 77% were white, and 23% were non-white.

The CD-RISC was administered to an Asian sample and results demonstrated strong reliability (Cronbach's  $\alpha = 0.97$ ; Ni et al., 2015). Participants included in the study were Hong Kong residents, ranging in age from 20 to over 65. A total of 10,997 participants completed the study: their marital status, level of education, income, and employment status varied across participants.

### ***Questionnaire of God Representations***

The Questionnaire of God Representations (formerly named the Dutch Questionnaire God Image) was used to evaluate individual's affective experiences of god and their perceptions of god's actions (Schaap-Jonker et al., 2008; Schaap-Jonker et al., 2016). There are two dimensions of the scale: feelings and perceptions of god's actions. The first dimension consists of three scales including positive feelings (POS; e.g., "*When I think of god, I experience thankfulness*;" Cronbach's  $\alpha = 0.94$ ), feelings of anxiety (ANX; e.g., "*When I think of god, I experience fear of being rejected*;" Cronbach's  $\alpha = 0.80$ ), and feelings of anger towards god or the divine being (ANG; e.g., "*When I think of god, I experience anger*;" Cronbach's  $\alpha = 0.61$ ; Schaap-Jonker et al., 2017). The second dimension consists of three scales which measure supportive actions (SUP; e.g., "*god comforts me*;" Cronbach's  $\alpha = 0.97$ ), ruling or punishing actions (RULP; e.g., "*god exerts power*;" Cronbach's  $\alpha = 0.90$ ), and passivity (PAS; e.g., "*god leaves people to their own devices*;" Cronbach's  $\alpha = 0.79$ ). The QGR does not include assumptions of god's ontology, and the QGR measures feelings towards god who may be

perceived as personal or impersonal. Therefore, it is appropriate to administer this measure to a Christian and Hindu population.

The QGR has a total of 33 items that are scored on a rating scale ranging from 1 (*absolutely not applicable*) to 5 (*completely applicable*). The mean for each of the six scales was used for the analyses. Since this measure is not validated for individuals in Sri Lanka, the data will be interpreted with caution. The QGR was translated to Tamil and back translated to ensure the items remain consistent. The internal consistency of the QGR for the current study indicates poor to moderate reliability; positive (9 items; Cronbach's  $\alpha = 0.760$ ), supportive (10 items; Cronbach's  $\alpha = 0.768$ ), anxiety (5 items; Cronbach's  $\alpha = 0.539$ ), anger (3 items; Cronbach's  $\alpha = 0.660$ ), ruling/punishing (4 items; Cronbach's  $\alpha = 0.437$ ), and passive (2 items; Cronbach's  $\alpha = 0.005$ ). Subscales with fewer items have lower reliability. Therefore, it is likely the internal consistency is poor on the following subscales due to having few questions: passive, ruling/punishing, anger, and anxiety.

The Dutch sample from the Schaap-Jonker et al., (2008) study consisted of 804 individuals with a mean age of 47 ( $SD = 18$ ) years. Participants currently in psychotherapy were included in the study (244 people). Participants were involved in a variety of church backgrounds including Roman Catholics (13%), Evangelicals or Baptists (19%), mainstream Protestant (27%), conservative Protestant (22%), orthodox-reformed (16%), and individuals who did not respond or are a part of a minority denomination (4%). Education status ranged from 8 to 18 years.

## **Procedure**

Following IRB approval, consent and assent forms were translated into Tamil and back-translated by a native translator. Participants were given consent forms and assents forms (for

participants under the age of 18) prior to the study, and the forms were returned to the child development center (see Appendix A-D). In a classroom setting, The Tamil version of the demographic questionnaire (see Appendix E-F), Connor-Davidson Resilience Scale (see Appendix G-H), and the Questionnaire of God Representations (see Appendix I-J) were distributed to participants in a child development center in Sri Lanka. An interpreter stated the purpose of research and requirements for participation. The interpreter was present throughout the duration of administration to answer questions and ensure the participants understood the questions. Since the participants were at the child development center on different days, there were multiple administrations over the course of about four days. It is likely there were slight variations in the instructions given by the interpreter across the administration sessions. All individuals at the child development center were offered a goody bag, regardless if they participated in the study or not. All materials were de-identified and locked away for safekeeping.

### Chapter 3

#### Results

Prior to running the analysis, two missing values were replaced with the QGR mean pertaining to the individual. These two items loaded on the following scales of the QGR: Anxiety and Ruling/Punishing.

Participants indicated the following close attachments: mom (90.3%), dad (77.4%), cricket coach (19.4%), teacher (35.5%), god(s) (90.3%), religious leader (16.1%), brother (45.2%), sister (41.9%), uncle (29%), aunt (29%), grandpa (32.3%), grandma (38.7%), and other (35.5%) (see Table 2).

**Table 2**

*Means and Standard Deviations of the Connor-Davidson Resilience Scale (CD-RISC), Questionnaire of God Representations (QGR), and Attachment*

Variable	CD-RISC	POS	SUP	ANG	ANX	RULP	PAS	Attachment
<i>M</i>	68.48	40.84	44.13	6.871	12.23	13.00	5.387	5.806
<i>SD</i>	12.08	3.634	4.551	2.617	3.757	3.416	1.647	3.420

#### Hypothesis 1

The two positive QGR scales, Positive and Supportive, were hypothesized to be positively correlated with resilience. Pearson correlations were run to evaluate the relationship between resilience and the two positive subscales of the QGR. As hypothesized, there was a



significant positive correlation between resilience and positive feelings toward god(s) and between resilience and perceiving god(s) as supportive (see Table 3).

**Table 3**

*Correlations Between Variables in the Tamil Population*

Variable	<i>n</i>	CD-RISC	POS	SUP
CD-RISC	31	1	.437*	.558**
POS	31		1	.729**
SUP	31			1

*Note.* \* Correlation is significant at the 0.05 level. \*\* Correlation is significant at the 0.01 level.

A hierarchical regression analysis was conducted to examine the contribution of age, gender, total attachment, religion, and representations of god including; positive, supportive, anger, anxiety ruling/punishing, and passive, to resilience. Age and gender were entered first. Age, gender, and total number of attachments were entered second. Age, gender, total number of attachments, and religion were entered third. Lastly, age, gender, total number of attachments, religion, and QGR scales (positive, supportive, anger, anxiety, ruling/punishing, and passive) were entered. Demographic factors including age, gender, and total number of attachments did not significantly contribute to resilience. Although religion was not a significant contributor, it increased the variance to 22%. The fourth regression block was significant; viewing god as supportive was a significant contributor to resilience, accounting for 40% of the variance,  $R^2 = .404$ ,  $F(5, 25) = 3.396$ ,  $p < .05$ . The remaining representations of god did not contribute to resilience and were excluded in the fourth model (see Table 4).

**Table 4***Multiple Regression Analysis for Variables Predicting Resilience*

	$R^2$	$\Delta R^2$	$\beta$	$F$	$p$
CD-RISC					
Model 1	0.018	-0.052	0.760	0.259	0.774
Model 2	0.026	-0.082	0.607	0.239	0.868
Model 3	0.219	0.099		1.820	0.155
Model 4	0.404	0.285		3.396	0.018*

*Note.*  $N = 31$ . Model 1: Age and Gender, Model 2: Age, Gender, Total Attachment, Model 3: Age, Gender, Total Attachment, Religion, Model 4: Age, Gender, Total Attachment, Religion, Supportive. \* $p < .05$ , \*\* $p < .01$ .

**Hypothesis 2**

The following QGR subscales: Anger, Anxiety, Ruling/Punishing, and Passive, were hypothesized to be inversely correlated with resilience. Pearson correlations were run to evaluate the relationship between resilience and the four negative subscales of the QGR. There was not a significant negative correlation between resilience and Anger, Anxiety, Ruling/Punishing, and Passive (see Table 5).

**Table 5***Correlations between variables in the Tamil population*

Variable	$n$	CD-RISC	ANG	ANX	RULP	PAS
CD-RISC	31	1	-.122	-.055	.222	-.025
ANG	31		1	.637**	.369*	.113
ANX	31			1	.143	.185
RULP	31				1	.279
PAS	31					1

*Note.* \* Correlation is significant at the 0.05 level. \*\* Correlation is significant at the 0.01 level.

### Hypothesis 3

The difference in resilience scores between Hindus and Christians was hypothesized to be non-significant. An independent sample t-test was run to compare the level of resilience between the two religious groups. Contrary to the hypothesis, Tamil Christians endorsed greater resilience compared to Tamil Hindus,  $t = -2.292$ ,  $p < .05$ . Additionally, there was a large effect size, indicating there is a meaningful difference in resilience between the two groups (see Table 6).

**Table 6**

*Independent-Samples t Test Comparing Resilience in the Christian and Hindu Groups*

Christian Sample ( $n = 14$ ) $M (SD)$	Hindu Sample ( $n = 17$ ) $M (SD)$	$t$	$p$	<i>Cohen's d</i>
73.57 (10.73)	64.29 (11.77)	-2.292	0.029	0.824

### Additional Analysis

#### ***QGR: Supportive Action***

To understand the differences in resilience between Tamil Hindus and Tamil Christians, an independent-samples t test was run to evaluate if there was a significant difference on the supportive action subscale of the QGR, which was found to be a significant predictor of resilience in this sample. The results of the t test indicate there is a significant difference between the Hindu and Christian groups,  $t = -4.603$ ,  $p < 0.001$ . Additionally, there was a large effect size, indicating there is a meaningful difference in viewing god(s) as supportive between the two groups (see Table 7).

**Table 7**

*Independent-Samples t Test Comparing the Perception of God(s) As Supportive Between the Christian and Hindu Groups*

QGR	Christian Sample ( <i>n</i> = 14) <i>M</i> ( <i>SD</i> )	Hindu Sample ( <i>n</i> = 17) <i>M</i> ( <i>SD</i> )	<i>t</i>	<i>p</i>	<i>Cohen's d</i>
SUP	47.21 (2.082)	41.59 (4.487)	-4.603	< 0.001	-1.609

### ***Comparison of Resilience Between Samples***

A means comparison was used to determine if the findings on resilience in the Tamil sample were significantly different from an American sample and a Hong Kong sample. The Tamil group reported significantly lower scores of resilience compared to the American group,  $t = -5.065$ ,  $p = 0.000$ . The large effect size indicates there is a meaningful difference in resilience between the two groups. The Tamil group reported a significantly higher level of resilience compared to the Hong Kong group,  $t = 3.39$ ,  $p = 0.001$ . The moderate effect size indicates the difference in resilience is meaningful.

### ***Comparison of God Representations Between Samples***

To understand the differences in representations of god between Tamil Hindus and Tamil Christians, an independent-samples *t* test was run to evaluate if there were significant differences on the subscales of the QGR. Results indicate differences between the Christian Tamil group and the Hindu Tamil group on the following subscales: Positive,  $t = -3.37$ ,  $p = 0.002$ , and Supportive,  $t = -4.31$ ,  $p < 0.001$ . Additionally, there was a large effect size for the two scales, Positive and Supportive, indicating there is a significant difference in experiencing positive feelings towards god(s) and viewing god(s) as supportive between the two groups (see Table 8).

**Table 8**

*Means Comparison of Resilience Between a Tamil Sample, American Sample, and a Hong Kong Sample*

Tamil Sample ( <i>n</i> = 31) <i>M</i> ( <i>SD</i> )	Connor & Davidson, 2003 <sup>a</sup> ( <i>n</i> = 577); Ni et al., 2015 <sup>b</sup> ( <i>n</i> = 10,997) <i>M</i> ( <i>SD</i> )	<i>t</i>	<i>p</i>	<i>Cohen's d</i>
68.48 (12.08)	80.4 (12.8) <sup>a</sup>	-5.065	0.000	-0.934
68.48 (12.08)	60 (13.9) <sup>b</sup>	3.39	0.001	0.61

*Note.* <sup>a</sup>Connor & Davidson, (2003). Development of a new resilience scale: The Connor-Davidson Resilience Scale (CD-RISC). *Depression and Anxiety*, 18(2), 76.

<sup>b</sup>Ni et al. (2015). Normative data and psychometric properties of the Connor–Davidson Resilience Scale (CD-RISC) and the abbreviated version (CD-RISC2) among the general population in Hong Kong. *Quality of Life Research*, 25(1), 111-116.

No significant differences were found between the Christian Tamil group and the Hindu Tamil group on scales measuring Anxiety, Anger, Ruling/Punishing, and Passive.

A means comparison was used to determine if the findings on representations of god in the Christian Tamil sample were significantly different from a nonpsychiatric Dutch sample. Results indicate there were significant differences between the Christian Tamil group and the Dutch group on the following subscales: Positive, Supportive, Anger, and Passive (see Table 8). Additionally, there was a large effect size for the following subscales: Positive, Anger, and Passive, indicating there is a meaningful difference in resilience between the two groups. A medium effect size for the Supportive subscale indicates the difference between the Tamil and Dutch groups is moderate (see Table 9).

**Table 9**

*Independent-Samples  $t$  Test Comparing Representations of God Between the Christian and Hindu Groups*

QGR	Christian Sample ( $n = 14$ ) $M (SD)$	Hindu Sample ( $n = 17$ ) $M (SD)$	$t$	$p$	$Cohen's d$
POS	42.93 (2.369)	39.12 (3.638)	-3.37	0.002	-1.22
SUP	47.21 (2.082)	41.59 (4.487)	-4.31	< 0.001	-1.56
ANX	12.21 (4.560)	12.24 (3.093)	0.021	0.983	0.008
ANG	6.571 (2.709)	7.118 (2.595)	0.5573	0.571	0.207
RULP	12.93 (3.689)	13.06 (3.288)	0.104	0.918	0.037
PAS	5.143 (1.657)	5.588 (1.661)	0.743	0.463	0.268

On the following subscales, no significant differences were found between the Christian Tamil group and the Dutch group: Anxiety,  $t = 1.435$ ,  $p = 0.152$  and Ruling/Punishing,  $t = 0.615$ ,  $p = 0.539$ .

A means comparison was used to determine if the findings on representations of god in the Hindu Tamil sample were significantly different from a nonpsychiatric Dutch sample. Results indicate there were significant differences between the Hindu Tamil group and the Dutch group on the following subscales: Positive,  $t = 2.847$ ,  $p = 0.005$ , Anger,  $t = 5.316$ ,  $p = 0.000$ , and Passive,  $t = 5.172$ ,  $p = 0.000$ . Additionally, there was a large effect size for the subscales, Anger and Passive, indicating there is a meaningful difference in resilience between the two groups. A medium effect size for the Positive subscale indicates the difference between the Tamil and Dutch groups is moderate (see Table 10).

**Table 10**

*Means Comparison of Representations of God Between a Christian Tamil Sample and a Christian Dutch Sample*

QGR Scale	Christian Tamil Sample ( <i>n</i> = 14) <i>M</i> ( <i>SD</i> )	Schaap-Jonker et al., 2008 <sup>b</sup> ( <i>n</i> = 545) <i>M</i> ( <i>SD</i> )	<i>t</i>	<i>p</i>	<i>Cohen's d</i>
POS	42.93 (2.369)	34.4 (6.8)	4.683	0.000	1.267
SUP	47.21 (2.082)	42.5 (7.8)	2.255	0.024	0.610
ANG	6.571 (2.709)	4.6 (1.9)	3.787	0.000	1.025
ANX	12.21 (4.56)	10.5 (4.4)	1.435	0.152	0.388
RULP	12.93 (3.689)	12.2 (4.4)	0.615	0.539	0.166
PAS	5.143 (1.657)	3.3 (1.8)	3.790	0.000	1.026

*Note.* <sup>a</sup>Schaap-Jonker et al. (2008). Development and validation of the Dutch Questionnaire God Image: Effects of mental health and religious culture. *Mental Health, Religion & Culture*, 11(5), 501–515.

On the following subscales, no significant differences were found between the Hindu Tamil group and the Dutch group: Supportive,  $t = -0.478$ ,  $p = 0.633$ , Anxiety,  $t = 1.617$ ,  $p = 0.106$ , and Ruling/Punishing,  $t = 0.799$ ,  $p = 0.425$ .

#### ***Attachment Correlation with Resilience and Representations of God***

A Pearson correlation was used to evaluate the relationship between the quantity of close attachments, resilience, and representations of god. There was not a significant correlation between the total number of attachments and the following scales: Resilience ( $r = -.089$ ,  $p = .635$ ), Positive ( $r = .244$ ,  $p = .186$ ), Supportive ( $r = .214$ ,  $p = .248$ ), Anger ( $r = -.297$ ,  $p = .105$ ), Anxiety ( $r = -.251$ ,  $p = .174$ ), Ruling/Punishing ( $r = .060$ ,  $p = .749$ ), and Passive ( $r = -.105$ ,  $p = .575$ ) (see Tables 11 and 12).

**Table 11**

*Means Comparison of Representations of God Between a Hindu Tamil Sample and a Christian Dutch Sample*

QGR Scale	Hindu Tamil Sample ( <i>n</i> = 17) <i>M</i> ( <i>SD</i> )	Schaap-Jonker et al., 2008 <sup>b</sup> ( <i>n</i> = 545) <i>M</i> ( <i>SD</i> )	<i>t</i>	<i>p</i>	<i>Cohen's d</i>
POS	39.12 (3.638)	34.4 (6.8)	2.847	0.005	0.701
SUP	41.59 (4.487)	42.5 (7.8)	-0.478	0.633	-0.118
ANG	7.118 (2.595)	4.6 (1.9)	5.316	0.000	1.309
ANX	12.24 (3.093)	10.5 (4.4)	1.617	0.106	0.398
RULP	13.06 (3.288)	12.2 (4.4)	0.799	0.425	0.197
PAS	5.588 (1.661)	3.3 (1.8)	5.172	0.000	1.274

*Note.* <sup>a</sup>Schaap-Jonker, H., Eurelings-Bontekoe, M., Zock, H., & Jonker, E. (2008). Development and validation of the Dutch Questionnaire God Image: Effects of mental health and religious culture. *Mental Health, Religion & Culture*, 11(5), 501–515.

**Table 12**

*Correlations Between Variables in the Tamil Population*

Variable	<i>n</i>	CD-RISC	POS	SUP	ANG	ANX	RULP	PAS	Total Attachment
CD-RISC	31	1	.437*	.558**	-.122	-.055	.222	-.025	-.089
POS	31		1	.729**	-.167	-.027	.075	-.140	.244
SUP	31			1	-.323	-.234	.096	-.225	.214
ANG	31				1	.637**	.369*	.113	-.297
ANX	31					1	.143	.185	-.251
RULP	31						1	.279	.060
PAS	31							1	-.105
Attachment Total	31								1

*Note.* \* Correlation is significant at the 0.05 level. \*\* Correlation is significant at the 0.01 level.



## **Chapter 4**

### **Discussion**

#### **Sample Characteristics**

The general population in Sri Lanka includes various religions. Compared to only 7.4% of the nation identifying as Christian, approximately half of the current sample identified as Christian (45.2%). All participants were involved in a Christian-based child development center and have been exposed to the Christian faith. Therefore, some participants may have been influenced by both religions. The culture in Sri Lanka is heavily influenced by Hinduism. Some participants may practice Hinduism culturally and hold Christian beliefs or they may be in the process of transitioning between the two religions, which explains why a few participants identified a Hindu deity as well as a Christian God with whom the individual felt close.

#### **Discussion of Hypotheses**

For Hypothesis 1, positive representations of god were related to greater levels of resilience. Individuals who experienced positive emotions toward god and viewed god's actions as supportive reported less difficulty adapting to change and recovering from adverse experiences. Additionally, viewing god's actions as supportive predicted resilience. Perceiving god as supportive may contribute to resilience due to perceived social support. Individuals who view god as supportive may experience a sense of empowerment and hope, which helps mitigate the effects of adversity (Dezutter, et al., 2010). These findings are consistent with previous research; Nguyen et al. (2015) found a positive correlation between perceiving god as supportive and increased resilience in a Vietnamese immigrant population. However, Nguyen et al. also

found positive emotions towards god were a predictor of resilience in the Vietnamese sample, which is contrary to the current study. Experiencing positive emotions towards god(s) may not contribute to resilience because the perceived social support or empowerment that results from a relational experience with god(s) may not exist.

For Hypothesis 2, there was not a significant inverse relationship between the negative representations of god, feelings of anger or anxiety as well as viewing god's actions as ruling/punishing or passive, and resilience. Previous research on Vietnamese immigrants found a significant inverse correlation between negative feelings toward god and resilience (Nguyen et al., 2015). It is important to note Nguyen et al. edited the QGR by combining the two subscales, anger and anxiety, and deleting a few questions, which may explain the difference in results when compared with the current study. The absence of an inverse relationship between negative representations of god and resilience may be explained by the presence of other factors or effective coping skills that contribute to resilience. The QGR scales (anxiety, ruling/punishing, and passive) also have lower reliability ranging from -0.005 to 0.539.

Contrary to Hypothesis 3, resilience scores were greater among the Christian Tamil group compared to the Hindu Tamil group. Additionally, the Christian group scored significantly higher on viewing god as supportive. Hindus may have scored lower in resilience due to a different understanding of resilience, suffering, and god compared to Christians. However, since the culture in Sri Lanka is heavily influenced by Hindusim, there is overlap between the culture and Christian identification. It is important to note all participants were exposed to the Christian faith since they were involved in a Christian child development center which may have influenced their religious identification.

Christianity and Hinduism both teach that suffering is part of life, but growth can be the outcome (Tan, 2013). Within Hinduism, the doctrine of karma teaches that good deeds result in pleasure and enjoyment while bad deeds result in suffering and pain (Bhaskarananda, 2002). God is not responsible for the pleasure or pain of creation: individuals are responsible for their own enjoyment and suffering.

In Christianity, the relational perspective of suffering provides hope, meaning, and comfort (Tan, 2013). Sharing in the fellowship of Christ's sufferings is specific to Christianity, and this perspective of suffering is not present within Hinduism. Although Hinduism also provides a sense of meaning, the Christian perspective of God suffering alongside individuals provides relational support, which may explain why Christians scored higher on resilience and viewing God as supportive.

### **Limitations**

Several limitations may restrict the generalizability of this study. The sample included was unique compared to the general population of Sri Lanka; all individuals were involved with a Christian organization. Therefore, the distinction between religious groups is unclear. Participants were not asked about the extent of involvement in their particular religion. It is unknown to what degree participants were committed to the beliefs and practices of the religion of which they identified with.

Additionally, participants who identified as Hindu may also believe in Jesus or be in the process of transitioning to Christianity, which was evident in a few participants' responses; they identified a Hindu deity and Jesus as divine attachment figures (Oshan Isemonth, Personal Communication, 2019). Although, the two groups may have overlap in terms of religious belief,

participants still chose to identify as Christian or Hindu. It is not clear how participants selected their religious group.

Measures used in the study were not normed on a Sri Lankan population and were developed in western countries. Cultural differences regarding god concepts and views on suffering or resilience may affect the validity of the results. Additionally, a few subscales on the QGR had limited reliability, which was likely due to the small sample size and the limited number of questions on the subscales. The QGR was translated and back-translated; there may have been slight changes in meaning due to language compatibility.

The methodology of the study includes limitations. Data were gathered across multiple days. Therefore, it is highly likely the interpreted instructions were not uniform across administrations. Since the participants had various levels of education and faith development, their understanding of the questions may have been different. However, to combat this limitation, interpreters were available throughout administration sessions, to allow participants to ask questions and clarify the meaning of the items on each questionnaire. Language barriers may have influenced the comprehension of the measures.

### **Implications**

Although mental health providers tend to be less religious than the general population, educating mental health providers on the necessity of spiritual and religious health and providing training on integrating clients' religion and spirituality in clinical work may increase resilience in clients (Behere et al., 2013). Results of the current study indicate that religion and spirituality may decrease vulnerability to psychological symptoms and increases resiliency among individuals in developing countries. Providing religious and spiritual resources to educators in

developing countries may increase resiliency by preventing the onset of psychological symptoms when individuals are faced with adversity or by aiding in recovery following hardship.

Current research may benefit teachers, mentors, pastors, or other adults in Sri Lanka who are involved with youth. Adults may be able to implement current research within their interactions with youth by fostering a positive and supportive view of god. Focusing on the supportive and positive aspects of god may increase their resilience. Increasing resilience in Sri Lankan communities may decrease the devastating effects of trauma and lead youth to positive outcomes as they transition to adulthood.

### **Future Directions**

Future studies may want to use measures validated for the population and religious groups. Although the CD-RISC has been normed among other Asian populations, it may not be sensitive to Tamil culture. The QGR has not been normed on Asian populations. Therefore, using measures that are sensitive to the particular culture may enhance the generalizability of results. Including participants who are not exposed to multiple religions may help to distinguish religious differences more effectively. Providing more research on resilience in vulnerable populations will be beneficial to the communities that experience adversity on a macro level. Similar studies may replicate research on resilience and representations of god among other religious groups and use measures to identify what extent individuals practice their religion.

Future researchers could replicate the current study to assess if resilience and representations of god were impacted in the Christian population after the bombings occurred in Christian churches on Easter Sunday in 2019. The devastation from the bombings may have impacted their positive representations of god since the attack targeted their particular faith and religion.

**Conclusions**

Spirituality and religion may serve as a protective factor for individuals to combat the effects of adversity. Holding positive views of god and experiencing positive emotions in relation to god increases one's ability to cope with hardship. Effective treatment for individuals who have experienced trauma may include spiritual and religious integration. Although research has shown the negative effects of a negative representation of god on individuals' well-being, current research did not confirm previous research results.

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## **Appendix A**

### **Informed Consent**

#### **View of God and the Ability to Recover from Difficulties**

I would like to invite your child to answer some questions regarding his or her view of God/deity and ability to recover quickly from difficulties among children. Your child's participation will involve filling out two questionnaires, which will take approximately 15-20 minutes.

Answering these questions does not put your child at risk in any way. We hope these answers will help us better understand resilience in children.

Your child's privacy will be protected. Each completed questionnaire will be anonymous, and all questionnaires will be kept in a locked file to maintain confidentiality. Your child's identity will not be revealed in any publication resulting from this study.

Participation in this questionnaire is voluntary. You may refuse to allow your child to participate or withdraw your child from answering the questionnaires at any time without any consequences.

If you have any questions or concerns, please contact Courtney Chapin at court.chapin@gmail.com. If you have any questions or concerns about your child's rights as a research participant, please contact Dr. Douglas Jones at douglasjones@whitworth.edu or Dr. Marie-Christine Goodworth at mgoodworth@georgefox.edu.

**I have read this parental permission form and have received a copy.**

**I give permission for \_\_\_\_\_ (print child's name) to participate in this study.**

**Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

## Appendix B

### Informed Consent (Tamil)

கடவுள் / அன்பிற்கும் பிரதிநிதித்துவங்கள் மற்றும் மீண்டுவரும்தன்மை

நான் கடவுள் / தெய்வம் பிரதிநிதித்துவங்கள் மற்றும் குழந்தைகள் மத்தியில் ஒன்றுக்குபதிலாக நிலை தொடர்பாக சில கேள்விகளுக்கு பதிலளிக்க உங்கள் குழந்தை அழைக்க விரும்புகிறேன். உங்கள் குழந்தையின் பங்கு இரண்டு கேள்வித்தாள்கள் நிரப்புவதன் ஈடுபடுகின்றன வேண்டும், கானர்-டேவிட்சன் மீண்டுவரும்தன்மை ஸ்கேல் (குறுவட்டு-RISC) மற்றும் கடவுள் பிரதிநிதித்துவங்கள் இன் கேள்வித்தாளை (QGR), தோராயமாக பதினைந்து இருபது நிமிடங்கள் எடுக்கும்.

பங்கேற்பது விளைவிக்கும் என்று குழந்தைக்கு அறியப்பட்ட ஆபத்துகள் உள்ளன. நன்மைகள் இந்த குழந்தைகள் கடவுள் / தெய்வம் பிரதிநிதித்துவங்கள் மற்றும் ஒன்றுக்குபதிலாக எங்களின் பொது புரிதல் அதிகரிக்க கூடும் என்று உள்ளன.

மிகுந்த கவனத்துடன் உங்கள் குழந்தையின் தனியுரிமை பாதுகாக்க எடுக்கப்படும். ஒவ்வொரு நிறைவு பாக்கெட் பல குறியீட்டு வேண்டும், மற்றும் ஒரு பூட்டிய கோப்பில் உள்ள எல்லா தரவின் ரகசியம் பராமரிக்க வைக்கப்படும். உங்கள் குழந்தையின் அடையாளம் இந்த ஆய்வு விளைவாக எந்த வெளியீட்டில் தெரிய முடியாது.

இந்த ஆய்வில் பங்கு தன்னார்வ. உங்கள் குழந்தையின் பங்கேற்க அல்லது எந்த நேரத்திலும் ஆய்வு இருந்து உங்கள் குழந்தை திரும்ப அனுமதிக்க மறுத்தால். நீங்கள் உங்கள் குழந்தைக்கு உங்கள் குழந்தை பங்கேற்க அல்லது இந்த ஆய்வு உங்கள் குழந்தை திரும்ப அனுமதிக்க வேண்டாம் என நீங்கள் முடிவு வேண்டும் எந்த வழியில் அபராதம் விதிக்கப்படாது.

இந்த ஆய்வு ஜார்ஜ் ஃபாக்ஸ் பல்கலைக்கழகம் ஸ்தாபன மதிப்பீட்டு கழகம் ஏற்றுக் கொள்ளப்பட்டிருக்கிறது, மற்றும் ஆய்வு மேற்கொள்வதற்கான அமெரிக்க மனோதத்துவ சங்கத்தின் நன்னெறி வழிகாட்டலின்படி. நீங்கள் இந்த ஆய்வில் பற்றி ஏதேனும் கேள்விகள் அல்லது கருத்துகள் அல்லது எந்த பிரச்சினைகள் எழுந்தால், court.chapin@gmail.com மணிக்கு கர்ட்னி சாபின் தொடர்பு கொள்ளவும் என்றால். நீங்கள் ஒரு ஆராய்ச்சி பங்கு உங்கள் குழந்தையின் உரிமைகள் பற்றி எந்த கேள்விகள் அல்லது கவலைகள் இருந்தால், mgoodworth@georgefox.edu மணிக்கு douglasjones@whitworth.edu அல்லது டாக்டர் மேரி-கிறிஸ்டின் Goodworth டாக்டர் டக்ளஸ் ஜோன்ஸ் தொடர்பு கொள்ளவும்.

நான் இந்த பெற்றோரின் அனுமதி வடிவம் படித்துவிட்டேன் ஒரு பிரதியை பெற்றுள்ளோம்.  
நான் இந்த ஆய்வில் பங்கேற்க \_\_\_\_\_ (அச்சு குழந்தையின் பெயர்) அனுமதி கொடுங்கள்.

பெற்றோர் / காப்பாளர் கையொப்பம் \_\_\_\_\_ தேதி \_\_\_\_\_

## **Appendix C**

### **Informed Assent**

#### **View of God and the Ability to Recover from Difficulties**

You are invited to answer some questions about how you adapt to changes and your ideas about God. This should take about 15-20 minutes.

We hope your answers help us understand how you see God and how you cope. Most people find this enjoyable, but you can refuse to answer the questions or stop at any time. Nothing will happen if you decide not to answer questions. Your information will be kept private.

If you have any questions, please ask Douglas Jones at [douglasjones@whitworth.edu](mailto:douglasjones@whitworth.edu) or Courtney Chapin at [court.chapin@gmail.com](mailto:court.chapin@gmail.com).

**I read this assent form and have received a copy.**

**I, \_\_\_\_\_, (print participant's name) agree to participate in this study.**

**Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_**

## Appendix D

### Informed Assent (Tamil)

கடவுள் / அன்பிற்கும் பிரதிநிதித்துவங்கள் மற்றும் மீண்டுவரும்தன்மை

நிங்கள் படிக்கும் நேரத்தில் உதவ அழைக்கப்பட்டுள்ளனர். நான் கடவுள் பற்றி உங்கள் யோசனைகளைக் கேட்க ஆர்வமாக இருக்கிறேன். நான் கேள்விகளுக்குப் பதிலளிக்க வேண்டும். அது பற்றி பதினைந்து இருபது நிமிடங்கள் எடுக்கும்.

நாம் கடவுளை உங்களால் பார்க்க மற்றும் நிங்கள் சமாளிக்க எப்படி எப்படி புரிந்து கொள்ள நம்புகிறேன். நாம் உங்கள் பதில்களை எங்களுக்கு உதவ நம்புகிறேன். பெரும்பாலான மக்கள் இந்த இன்பம் விட சங்கடமான கண்டுபிடிக்க.

உங்கள் தகவல் தனிப்பட்டது. நாம் உங்கள் பெயர் பதிலாக பல பயன்படுத்தி அதைத் தனிப்பட்ட முறையில் வைத்திருக்க வேண்டும்.

நான் உங்களுக்கு உதவ வேண்டும், ஆனால் நிங்கள் பங்கேற்க அல்லது எந்த நேரத்திலும் ஆய்வு இருந்து திரும்ப மறுத்தால். நிங்கள் பங்கேற்க வேண்டாம் என்று முடிவு செய்தால் எதுவும் நடக்கும்.

இந்த ஆய்வு ஜார்ஜ் ஃபாக்ஸ் பல்கலைக்கழகம் உள் மதிப்பீட்டு கழகம் ஏற்றுக் கொள்ளப்பட்டிருக்கிறது. மற்றும் ஆய்வு மேற்கொள்வதற்கான அமெரிக்க மனோதத்துவ சங்கத்தின் நன்னெறி வழிகாட்டலின்படி. நிங்கள் எந்த கேள்விகள் இருந்தால், court.chapin@gmail.com மணிக்கு கர்ட்னி சாபின் கேளுங்கள்.

நான் இந்த ஒப்புதல் வடிவம் படித்து ஒரு பிரதியை பெற்றுள்ளோம்.

நான் \_\_\_\_\_, (அச்சு பங்கேற்பாளர்களின் பெயர்) இந்த ஆய்வில் பங்கேற்க ஒப்புக்கொள்கிறீர்கள்.

பங்கேற்பாளர் கையொப்பம் \_\_\_\_\_ தேதி\_\_\_\_\_

**Appendix E**  
**Demographic Survey**

Gender: \_\_\_\_\_

Age: \_\_\_\_\_

Year in School: \_\_\_\_\_

Ethnicity: ☐ Tamil    ☐ Other: \_\_\_\_\_

Religion: \_\_\_\_\_

Who do you feel close to:

- ☐ Mom
- ☐ Dad
- ☐ Cricket Coach
- ☐ Teacher
- ☐ God
- ☐ Religious Leader
- ☐ Brother
- ☐ Sister
- ☐ Uncle
- ☐ Aunt
- ☐ Grandpa
- ☐ Grandma
- ☐ Other: \_\_\_\_\_

Which God? \_\_\_\_\_

## Appendix F

## Demographic Survey (Tamil)

பால்: \_\_\_\_\_

வயது: \_\_\_\_\_

பாடசாலையில் கற்கும் வகுப்பு: \_\_\_\_\_

இனம்: ☐ தமிழ் ☐ ஏனையவை: \_\_\_\_\_

மதம்: \_\_\_\_\_

நீங்கள் யாருடன் நெருக்கமாயிருப்பதாக உணர்கிறீர்கள்:

- ☐ தாய்
- ☐ தந்தை
- ☐ கிரிக்கட் பயிற்றுவிப்பாளர்
- ☐ ஆசிரியர்
- ☐ கடவுள்                      எந்த கடவுள் : \_\_\_\_\_
- ☐ மத தலைவர்
- ☐ சகோதரன்
- ☐ சகோதரி
- ☐ மாமா
- ☐ மாமி
- ☐ தாத்தா
- ☐ பாட்டி
- ☐ வேறு: \_\_\_\_\_



# Appendix G

## Connor-Davidson Resilience Scale

### Connor-Davidson Resilience Scale 25 (CD-RISC-25) ©

For each item, please mark an "x" in the box below that best indicates how much you agree with the following statements as they apply to you over the last **month**. If a particular situation has not occurred recently, answer according to how you think you would have felt.

	not true at all (0)	rarely true (1)	sometimes true (2)	often true (3)	true nearly all the time (4)
1. I am able to adapt when changes occur.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I have at least one close and secure relationship that helps me when I am stressed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. When there are no clear solutions to my problems, sometimes fate or God can help.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. I can deal with whatever comes my way.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Past successes give me confidence in dealing with new challenges and difficulties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. I try to see the humorous side of things when I am faced with problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Having to cope with stress can make me stronger.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. I tend to bounce back after illness, injury, or other hardships.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Good or bad, I believe that most things happen for a reason.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. I give my best effort no matter what the outcome may be.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. I believe I can achieve my goals, even if there are obstacles.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Even when things look hopeless, I don't give up.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. During times of stress/crisis, I know where to turn for help.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Under pressure, I stay focused and think clearly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. I prefer to take the lead in solving problems rather than letting others make all the decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. I am not easily discouraged by failure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. I think of myself as a strong person when dealing with life's challenges and difficulties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. I can make unpopular or difficult decisions that affect other people, if it is necessary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. I am able to handle unpleasant or painful feelings like sadness, fear, and anger.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. In dealing with life's problems, sometimes you have to act on a hunch without knowing why.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. I have a strong sense of purpose in life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. I feel in control of my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. I like challenges.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. I work to attain my goals no matter what roadblocks I encounter along the way.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. I take pride in my achievements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Add up your score for each column

0 + \_\_\_\_ + \_\_\_\_ + \_\_\_\_ + \_\_\_\_

Add each of the column totals to obtain CD-RISC score

= \_\_\_\_\_

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## Appendix H

## Connor-Davidson Resilience Scale (Tamil)

## Connor-Davidson Resilience Scale 25 (CD-RISC-25) ©

கானர்-டேவிட்சன் ரெஸிலியன்ஸ் ஸ்கேல் (சிட்-ரிஸ்க்-25)

முதலெழுத்துகள் □□□ அடையாள எண்# □□□□□□ தேதி □□/□□/□□□□ வருகை □□ வயது□□

கடந்த ஒரு மாதத்தில் உங்களுக்கு பொருந்துகின்ற பின்வரும் வாக்கியங்களுடன் நீங்கள் எந்தளவு ஒப்புக் கொள்கிறீர்கள் என்பதை மிகச் சரியாக குறிக்கும் கட்டத்தில் (□) தயவுசெய்து “x” குறியிடவும். வாக்கியத்தில் குறிப்பிட்டவாறு சூழ்நிலை சமீபத்தில் ஏற்படவில்லையெனில், அதுகுறித்து எங்களும் உணர்ந்திருப்பீர்கள் என நினைக்கின்றீர்களோ, அதன்படி புதிலளிக்கவும்.

	உண்மையே இல்லை (0)	எப்போதாவது உண்மை (1)	சில நேரங்களில் உண்மை (2)	பெரும்பாலும் உண்மை (3)	எல்லா நேரங்களிலும் உண்மை (4)
1. மாற்றங்கள் ஏற்படும் போது அதற்கு தகுந்தவாறு ஒத்துப்போக என்னால் முடிகிறது	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. நான் மன உளைச்சலில் இருக்கும்போது எனக்கு உதவியெய்ய குறைந்தது, ஒரு நெருங்கிய மற்றும் பாதுகாப்பான சொந்தமேனும் உள்ளது.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. என் பிரச்சினைகளுக்கு தெளிவான தீர்வுகள் இல்லாதபட்சத்தில் சில சமயங்களில் விதியோ அல்லது கடவுளோ உதவ முடியும்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. என் வாழ்க்கையில் என்ன பிரச்சனை வந்தாலும் அதை என்னால் சமாளிக்க முடியும்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. முந்தைய வெற்றிகள் புதிய சவால்கள் மற்றும் கஷ்டங்களைக் கையாள்வதற்கான நம்பிக்கையை எனக்குத் தருகிறது.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. பிரச்சனைகளை சந்திக்கும் வேளையில், அதிலுள்ள நகைச்சுவையான விஷயத்தைப் பார்க்க நான் முயற்சி செய்கிறேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. மன உளைச்சலை சமாளிப்பதினால் நான் மேலும் வலிமையாக முடியும்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. நான் நோய், காயம் அல்லது பிற துன்பங்களிருந்து மீண்டு சகஜ நிலைக்கு வந்து விடுவது வழக்கம்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. நல்லதோ/கெட்டதோ, பெரும்பாலான விஷயங்கள் ஏதோ ஒரு காரணத்துடனே நடக்கின்றன என நான் நம்புகிறேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. முடிவுகளைப் பற்றி கவலைப்படாமல் என் முழு முயற்சியைத் தருவேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. தடைகள் இருப்பினும், என் குறிக்கோள்களை என்னால் அடைய முடியும் என நான் நம்புகிறேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. விஷயங்கள் நம்பிக்கையளிக்காத தருணங்களிலும், நான் முயற்சியைக் கைவிட மாட்டேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. மன உளைச்சல்/நெருக்கடியான காலங்களில், எங்கே உதவி கேட்க வேண்டுமென எனக்கு தெரியும்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. நெருக்கடியான சூழ்நிலையிலும், என்னால் முழுக்கவனத்துடன், தெளிவாக சிந்திக்க முடியும்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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15. பிரச்சனைகளைக் குறித்து அனைத்து முடிவுகளையும் மற்றவர்களை எடுக்க விடாமல், நானே முன்னின்று தீர்வு காண்பதையே விரும்புகிறேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. தோல்வியைக் கண்டு நான் எளிதில் மனம் தளர்ந்தது இல்லை.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. வாழ்க்கையில் ஏற்படும் சவால்கள் மற்றும் கஷ்டங்களை கையாளும் தருணங்களில் நான் என்னை வலிமையானவன் என கருதுகிறேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. பிறரைப் பாதிக்கும் கடினமான அல்லது பிறறால் விரும்பப்படாத முடிவுகளை, தேவைப்பட்டால் என்னால் எடுக்க முடியும்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. விரும்பத்தகாத அல்லது வலி நிறைந்த உணர்வுகளான சோகம், பயம் மற்றும் கோபம் போன்றவற்றை என்னால் கையாள முடியும்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. வாழ்க்கையில் பிரச்சனைகளைக் கையாளும்போது சில நேரங்களில், காரணம் ஏதுமின்றி நம் உள்ளுணர்வுக்கேற்ப செயல்பட வேண்டும்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. என் வாழ்க்கைக்கு வலுவான நோக்கமுள்ளது.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. வாழ்க்கை என் கட்டுப்பாட்டில் உள்ளதாக நான் உணர்கிறேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. எனக்கு சவால்கள் பிடிக்கும்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. வழியில் என்ன தடைகளை சந்திக்க நேரிட்டாலும், என் குறிக்கோள்களை அடையவே நான் உழைக்கின்றேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. என் சாதனைகளைக் குறித்து நான் பெருமிதம் அடைகிறேன்.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

உரிமைகள் அனைத்தும் பதிவு செய்யப்பட்டவை. இந்த ஆவணத்தின் எந்த பகுதியையும், டாக்டர் டேவிட்சன் அவர்களுக்கு [mail@cd-risc.com](mailto:mail@cd-risc.com) - ல் எழுத்து மூல அனுமதி பெறாமல், மின்னனு அல்லது இயந்திர வடிவத்தில், போட்டோ பிரதி, தகவல் சேமிப்பு அல்லது மீட்டி முறை உட்பட மறுபதிப்பு செய்யவோ அல்லது பரப்பவோ கூடாது. மேற்கொண்டு, அளவுகோள் மற்றும் அதைப் பயன்படுத்தும் தகவல்களை [www.cd-risc.com](http://www.cd-risc.com) இணையதளத்தில் காணலாம். பதிப்புரிமை © 2001, 2013, கேத்ரின் எம். கானர், எம்.டி., மற்றும் ஜொனாதன் ஆர்.டி. டேவிட்சன். எம்.டி. மொழிபெயர்ப்பு - சித்ரா அரவிந்த், திலகவதி விஜயக்குமார், பெத்தால் விஸ்வநாதன் மற்றும் சரஸ்வதி ஜெய்குமார்.

## Appendix I

### Questionnaire of God Representations

When you think of God, you may have particular feelings. Below you find some feelings people may experience in relationship to God. Please indicate for *every* feeling to what extent you experience it by marking a box, even though you would like your feelings towards God to be different.

1 = absolutely <u>not</u> applicable 2 = largely not applicable 3 = partly applicable/ partly not applicable 4 = largely applicable 5 = completely applicable
---

When I think of God I experience...

	1	2	3	4	5
thankfulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
closeness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
trust	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
fear of being rejected	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
respect	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
disappointment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
satisfaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
love	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
fear of being not good enough	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
solidarity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
anger	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
guilt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
uncertainty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
affection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
fear of being punished	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dissatisfaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The following statements deal with God.  
Please indicate to what extent these  
statements reflect who/what God is for  
you by marking a box.

1 = absolutely not applicable  
2 = largely not applicable  
3 = partly applicable/ partly not applicable  
4 = largely applicable  
5 = completely applicable

God...

	1	2	3	4	5
exerts power	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
comforts me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
punishes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
gives me strength	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
has patience with me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
lets me grow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
is trustworthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
lets everything take its course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
leaves people to their own devices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
freedom from my guilt	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
protects me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
sends people to hell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
guides me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
gives me security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
is unconditionally open to me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Appendix J

## Questionnaire of God Representations (Tamil)

நீங்கள் தேவனைக் குறித்து நினைக்கும்போது உங்களுக்கு ஒரு குறித்த உணர்வு ஏற்படலாம். தேவனோடுள்ள உறவில் மக்கள் அனுபவப்பட்ட சில உணர்வுகள் கீழே குறிப்பிடப்பட்டுள்ளன.

தேவனைக் குறித்த உங்கள் உணர்வுகள் வித்தியாசமாயிருந்தாலும், ஒவ்வொரு உணர்விற்கும் நீங்கள் எந்த அளவுக்கு அனுபவப்பட்டிருக்கிறீர்கள் என்பதை கட்டத்தின் மீது புள்ளியிடுவதன் மூலம் தெரிவியுங்கள்.

- 1 = முற்றிலும் பொருத்தமற்றது  
 2 = பொருத்தமற்றது  
 3 = ஓரளவு பொருத்தமானது / ஓரளவு பொருத்தமற்றது  
 4 = பொருத்தமானது  
 5 = முற்றிலும் பொருத்தமானது

தேவனைக் குறித்து நினைக்கும்போது நான் அனுபவிப்பது....

	1	2	3	4	5
நன்றியுணர்வு	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
நெருக்கம்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
நம்பிக்கை	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
நிராகரிக்கப்படுதல் குறித்த பயம்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
மதிப்பு	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ஏமாற்றம்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
திருப்தி	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
பாதுகாப்பு	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
அன்பு	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
சிறந்தவரல்ல என்ற பயம்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ஒற்றுமை	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
கோபம்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
குற்றத்தன்மை	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
உறுதியின்மை	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
பாசம்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
தண்டிக்கப்படும் பயம்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
அதிருப்தி	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

கீழ்காணும் அறிக்கைகள் தேவனோடு தொடர்புடையவை. தேவன் உங்களுக்கு யாராயிருக்கிறார் அல்லது எதுவாயிருக்கிறார் என சரியாக பிரதிபலிக்கும் கட்டத்தின் மீது புள்ளியிடுக.

1 = முற்றிலும் பொருத்தமற்றது  
2 = பொருத்தமற்றது  
3 = ஓரளவு பொருத்தமானது / ஓரளவு பொருத்தமற்றது  
4 = பொருத்தமானது  
5 = முற்றிலும் பொருத்தமானது

தேவன்...

	1	2	3	4	5
அதிகாரம் செலுத்துபவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
எனக்கு ஆறுதல் தருபவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
தண்டிப்பவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
எனக்கு வலிமை தருபவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
என்னுடன் பொறுமையாயிருப்பவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
நான் வளர உதவுபவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
நம்பகமானவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ஆளுபவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
சகலத்தையும் அதன் போக்கில் விடுபவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
மக்களை அவர்களின் வினைகளுக்கு விட்டு விடுபவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
எனது குற்ற உணர்விலிருந்து என்னை விடுவிப்பவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
என்னை பாதுகாப்பவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
மக்களை நரகத்திற்கு அனுப்புவவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
என்னை வழிநடத்துபவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
என்னை பாதுகாப்பவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
நிபந்தனைகளின்றி செவிசாய்ப்பவர்	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Appendix K

### Curriculum Vitae

#### Courtney Chapin

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#### EDUCATION

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##### **Doctor of Clinical Psychology** Anticipated July 2021

George Fox University  
 Assessment and Neuropsychology Track  
 Dissertation Title: *Resilience and Representations of God Among Sri Lankan Youth*  
 Dissertation Chair: Dr. Marie-Christine Goodworth

##### **Master of Arts, Clinical Psychology** April 2018

George Fox University  
 APA Accredited  
 Newberg, OR

##### **Master of Arts, Theological Studies** Anticipated May 2021

Westminster Theological Seminary  
 Glenside, PA

##### **Bachelor of Arts, Psychology** May 2016

Whitworth University  
 Spokane, WA

#### SUPERVISED CLINICAL TRAINING EXPERIENCE

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##### **Pre-Doctoral Internship: Chicago Area Christian Training Consortium:** August 2020-July 2021

Primary Site: Central Dupage Pastoral Counseling Center

Location: Carol Stream, IL

Supervisors: Nancy Cochran, PsyD; Neal Bowen, PsyD; Elissa McGovern, PsyD

Position: Primary Intern

Description: Provide therapeutic and comprehensive assessment services for a variety of clients in a community mental health setting.

Secondary Site: Meier Clinics

Location: Wheaton, IL

Supervisors: Lisa Naatz, PsyD, ABSNP; Ben Pyykkonen, PhD

Position: Secondary Intern

Description: Provide neuropsychological assessment for low income individuals of all ages in a medical clinic setting.

##### **Pre-Internship** 2019-2020



Site: George Fox University Health and Counseling Center

Supervisor: William Buhrow, PsyD; Luann Foster, PsyD

Location: Newberg, OR

Description: Provide solution-focused psychotherapy and assessment services to George Fox University students in a university counseling setting.

Psychotherapy sessions are discussed in individual and group supervision settings.

### **Practicum II**

2018-2019

Site: Portland Mental Health

Supervisor: Individual Supervisor: Cynthia Song, PsyD; Group Supervisors: Camille Curry, PsyD and Del Rapier, PsyD

Location: Portland, OR

Description: Provide trauma-informed psychotherapy to low-income individuals of diverse backgrounds in a community mental health setting.

Psychotherapy sessions are discussed in individual and group supervision settings.

### **Practicum I**

2017-2018

Site: Lot Whitcomb Elementary School, Cascade Heights, and Early Childhood Evaluation Center

District: North Clackamas School District

Supervisor: Fiorella Kassab, Ph.D.

Description: Provide skills training and psychotherapy to elementary children in the school setting. Administer assessments to children from ages 0 to 5 to determine eligibility for special education services.

Psychotherapy and assessment sessions are discussed in individual and group supervision settings.

### **Pre-Practicum**

Spring 2017

Site: George Fox University

Location: Newberg, OR

Setting: College Counseling

Supervisor: Glenna Andrews, Ph.D

Population: University Students

Description: Provide Person-Centered psychotherapy for 10 sessions from initial assessment to termination.

Sessions are videotaped, reviewed, and discussed in individual and group supervision settings.

### **Supplemental Practicum**

2017-2020

Site: George Fox University: Behavioral Health Clinic

Supervisor: Glenna Andrews, Ph.D, MSCP, ABPP

Location: Newberg, OR

Description: Provide psychotherapy and administer assessments in a community mental health setting.

Sessions and assessment cases are discussed during individual supervision.

### **Providence Health Depression and Anxiety Recovery Program**

Fall 2016

Supervisor: Glenna Andrews, Ph.D

Description: Group Facilitator

Facilitated small group discussion for an 8-week psychoeducational course provided for community members.

### Clinical Teams

Site: George Fox University

Location: Newberg, OR

Setting: Group Supervision

Supervisors: Celeste Jones, PsyD (2019-2020), Kristie Knows His Gun, PsyD (2018-2019), Rodger Bufford, Ph.D. (2017-2018), Brooke Kuhnhausen, Ph.D. (2016-2017)

Description: Clinical team meetings are held weekly and consist of students from each year in the program. Each week one student presents a case and receives consultation from the team.

### Undergraduate Internship

Spring 2016

Site: Whitworth University

Location: Spokane, WA

Setting: Whitworth University Marriage and Family Therapy Clinic

Supervisor: Douglas Jones, Ph.D.

Description: Reviewed individual/couple/family therapy sessions and consulted with master's level students and site supervisor. Participated in supervision and assisted current students with scoring and interpreting Taylor-Johnson Temperament Analysis assessments.

## RELEVANT WORK EXPERIENCE

Site: Private Practice

2019-2020

Supervisors: Gary Monkarsh, PhD

Location: Lake Oswego, OR

Position: Psychometrician

Description: Administered and scored assessments for a variety of clients in a private practice setting.

### Supplemental Practicum

2018-2020

Site: Providence Newberg Medical Center and Willamette Valley Medical Center

Supervisors: Mary Peterson, Ph.D., Luann Foster, Psy.D., Joel Gregor, Psy.D., William Buhrow, Psy.D.

Location: Newberg, OR

Position: Behavioral Health Crisis Consultant

Description: Provide crisis consultation and administer risk assessments in the emergency department to patients presenting with suicidal/homicidal ideation or psychosis.

## TEACHING ASSISTANT EXPERIENCE

Teaching Assistant: Learning, Cognition, and Emotion

May 2019

Description: Provided resources including research articles and graded assignments/exams. Provided feedback and support to students. Revised syllabus to meet accreditation standards.

George Fox University

Newberg, OR

**Teaching Assistant: Theories of Counseling**

Fall 2015

Description: Provided support to students regarding assignments and class material. Graded assignments/exams and provided feedback to students.

Whitworth University

Spokane, WA

**SUPERVISION EXPERIENCE****Central Dupage Pastoral Counseling Center**

2020-2021

Description: Provided weekly individual supervision for a 3<sup>rd</sup> year PsyD practicum student at a community mental health center for therapeutic intervention.

**Meier Clinics**

2020-2021

Description: Provided individual supervision for 2<sup>nd</sup> and 3<sup>rd</sup> year PsyD practicum students as needed for neuropsychological testing.

**Willamette Valley Medical Center**

2019-2020

Description: Provided individual peer supervision for a PsyD student in practicum I at a medical facility, providing co-located psychotherapy services.

**Providence Health Depression and Anxiety Recovery Program**

Fall 2017

Description: Provided weekly supervision for peer PsyD students who were leading process groups for the 8-week psychoeducational course on depression and anxiety, which was provided for community members.

**RESEARCH EXPERIENCE****Dissertation: Resilience and Representations of God Among Sri Lankan Youth** 2018-2019

Advisor: Marie-Christine Goodworth, PhD

George Fox University

Newberg, OR

**Thesis: Motivation and Personality**

Fall 2015

Advisor: Patricia Bruininks, PhD

Whitworth University

Spokane, WA

**PRESENTATIONS**

**Chapin, C.,** Goodworth, M., Andrews, G., Jones, D. (March, 2020). *Resilience and Representations of God Among Sri Lankan Youth*. Presented at Christian Association for Psychological Studies, Atlanta, GA.

**Chapin, C.,** (September, 2019). *Dialectical Behavioral Therapy*. Invited presentation at the Health and Counseling Center at George Fox University.

**Chapin, C.,** Shumway, K., Andrews, G., & Napier, L. (July, 2019). *Connections Between Frontal Lobe Activity and Anxiety in Collegiate Athletes*. Presented at the 89<sup>th</sup> International Neuropsychological Society (INS), Rio de Janeiro, Brazil.

**Chapin, C.,** Johnson, K. (April, 2016). *What's my motivation? Extroversion and its relationship to extrinsic and intrinsic motivation*. Presented at the Western Psychological Association Conference, Long Beach, CA.

**Chapin, C.,** Johnson, K. (December, 2015). *What's my motivation? Extroversion and its relationship to extrinsic and intrinsic motivation*. A discussion of the level of extroversion and how it relates to extrinsic/intrinsic motivation. Presented at the Whitworth University Undergraduate Psychological Research Conference, Spokane, WA.

## PROFESSIONAL TRAINING

### Conferences

**Christian Association for Psychological Studies**

March 2020

Location: Chicago, IL

**89<sup>th</sup> International Neuropsychological Society Meeting**

July 2019

Location: Rio de Janeiro, Brazil

Selected topics: Cross-Cultural Neuropsychological Tests, Culture and Neuropsychology, Cognitive Reserve In Aging and Mild Dementia: Executive Functions, Episodic Memory, and Neural Correlates

**Annual Play Therapy Conference: Taming the Trauma: Using Flexibly Sequential Play Therapy with Traumatized Children**

Fall 2016

Location: Northwest Center for Play Therapy Studies

Presenter: Paris Goodyear-Brown, LCSW, RPT-S

### Externship

**Emotion-Focused Therapy Externship**

July 2018

Location: Vancouver, BC

Trainers: Veronica Kallos-Lilly, PhD, Yolanda von Hockauf, M. Ed.

### Workshops

**Introduction to Contemporary Gestalt Therapy**

March 2018

Location: Tabor Space

Facilitators: Brad Larsen-Sanchez, PsyD, Adam Kincel, PhD

### Elective Courses

**Neuropsychological Assessment**

Fall 2018

Faculty: Glenna Andrews, PhD, MSCP, ABPP

**Neuropsychological Interpretation**

Spring 2019

Faculty: Glenna Andrews, PhD, MSCP, ABPP

**Neuroanatomy through Clinical Cases**  
Faculty: Glena Andrews, PhD, MSCP, ABPP

Summer 2019

**Psychopharmacology**  
Faculty: Glena Andrews, PhD, MSCP, ABPP

Spring 2020

**Certificate Courses**

**Trauma Work in Clinical Practice**  
Faculty: Kenneth Logan, PsyD

Spring 2020

**Gender and Sexuality in Clinical Practice**  
Faculty: Brooke Kuhnhausen, PhD

Fall 2018

**Attachment in Psychotherapy**  
Faculty: Brooke Kuhnhausen, PhD

Spring 2018

**Trainings**

**Interpersonal Neurobiology in Trauma Therapy**  
Dan Siegel, M.D.

October 23, 2020

**Introduction to the Neurosequential Model of Therapeutics**  
Bruce Perry, M.D., Ph.D.

September 11, 2020

**PROFESSIONAL MEMBERSHIP**

**American Psychological Association**

2016-2021

**REFERENCES**

Marie-Christine Goodworth, Ph.D.  
Dissertation Chair  
Email: [mgoodworth@georgefox.edu](mailto:mgoodworth@georgefox.edu)  
Phone: (503) 554-2382

Glena Andrews, Ph.D.  
Practicum Supervisor, Professor  
Email: [gandrews@georgefox.edu](mailto:gandrews@georgefox.edu)  
Phone: (503) 554-2386