

Images of God, resilience, and the imaginary:
A study among Vietnamese immigrants who have experienced loss

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Dissertation submitted to the
School of Counselling and Spirituality,
in partial fulfillment of the requirements
for the Doctorate degree in Counselling and Spirituality
Saint Paul University

Ottawa, Canada

May 2014

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UMI Number:

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Under the guidance of a Faculty Committee and approved by its members, has been submitted to
and accepted by the Graduate Faculty in partial fulfillment of the requirement of the degree of

DOCTOR OF PHILOSOPHY

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Acknowledgments

I would like to express my profound gratitude to Dr. Bellehumeur and the thesis committee members, Dr. Mallette and Dr. Guirguis -Younger, for your generous support and your challenges that called upon the best of my abilities. I really appreciate your consistent guidance that made the dissertation process feasible. You have been a remarkable influence on my professional development and personal growth. I would like to give particular thanks to my dissertation chair, Dr. Bellehumeur, who has provided ongoing support, encouragement and guidance throughout my entire PhD program. Thanks to you, my external examiners, Dr. Ives and Dr. Power, for sharing your insights, your knowledge and your experiences.

I am grateful to my religious congregation, Franciscan Missionaries of Mary, who placed great trust in me, especially the provinces of Vietnam and of Canada. Thank you, Sister Simone, for your consistent support as Provincial Superior of Canada. Please send my thanks to all the Sisters who assisted me in so many ways!

I would like to thank my parents who accompanied me in prayer, love and support. This dissertation is dedicated to my father who has been everything for me and who passed away in my first year of PhD studies and I was unable to go back to Vietnam for his funeral. I also would like to thank Father Thong and the Vietnamese community for helping me to distribute the questionnaires and also participated in my doctoral research survey. I also want to express my sincere appreciation to Professor Joelle Laplante, McGill University who helped me to check the accuracy of statistics. Thanks to the research assistants who helped me to collect data and to do the data entry. Thanks to Sr. Bernadette, Peter Minh and Peter Tran for helping me for the translation and correction. Finally thank you my colleagues, the students and friends for your support, for the question you asked and experiences that you shared.

Abstract

This study examines the relationships between God image, resilience and the imaginary category in the face of loss among Vietnamese immigrants living in Canada. In earlier literature little attention was paid to the role of spiritual components in their struggle, and in their search for resources to become resilient. Furthermore, the use of Western measurements to examine the constructs of God Image, of loss, and of resilience yielded inconsistent results because of cultural differences. The current study therefore adopted Object Relations Theory, together with Durand's Anthropological Structures of the Imaginary; these two culturally sensitive theoretical approaches suggested that higher level of Positive God Image and the synthetic category of the imaginary would be related to better health and psychological outcomes across cultures. With these two theories as ground, the central purpose of the present research is to examine the following questions: 1) Is God image associated with emotional distress? 2) Is God image related to resilience? 3) Does God image associate with the individual's imaginary category? And 4) Does the imaginary category associate with emotional distress and resilience among Vietnamese immigrants?

To answer these research questions, a mixed method using quantitative and qualitative approaches with three phases was adopted. In the first phase, 129 participants completed five questionnaires: a demographic questionnaire, a Questionnaire on God Image (QGI), the Brief Symptom Inventory (BSI), the Davidson Trauma Scale (DTS), and the Connor-Davidson Resilience Scale (CD-RISC). In the second phase, 32 willing participants out of this 129 took the AT.9 test (an archetypal test with nine elements). In this test, participants are asked to draw, using nine symbolic elements, and then write a story based on their drawing. In the last phase, a phenomenological approach was used to conduct a qualitative interview with eight persons.

Results showed that a positive perception of God negatively correlated with somatization, anxiety and hostility; a positive God image was positively associated with resilience, whereas negative God image was significantly related to high levels of emotional distress. Results also showed that the synthetic categories of the imaginary were associated with a positive perception of God; and were negatively associated with somatization, intrusion and hyper-vigilance.

The study suggested that the Vietnamese immigrants whose God Images reflected love, comfort, protection, and trust had higher scores on resilience, and lower scores on somatization, anxiety and hostility. The participants' drawings and their storytelling in the AT.9 and the qualitative interview provided a more comprehensive understanding of the relationship between God image and resilience in the face of adversity among Vietnamese immigrants living in Canada.

The discussions on the main findings with a special focus on cultural gaps will address various implications for theory, research and clinical practice along with recommendations for future research in the field of Counselling and Spirituality.

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Abbreviations

AT.9.....	Archetypal test with nine elements
BSI.....	Brief Symptom Inventory
CD-RISC.....	Connor-Davidson Resilience Scale
DTS.....	Davidson Trauma Scale
QGI.....	Questionnaire on God image
PFGL.....	Positive feelings of God Image
PPGI.....	Positive Perception of God Image
NGI.....	Negative God Image
ADA.....	Adaptation
RES.....	Resourcefulness
PUP.....	Purpose
RESI.....	Resilience
SE.....	Self-efficacy
SOM.....	Somatization
O-C	Obsessive Compulsive
I-S	Interpersonal Sensitivity
DEP	Depression
ANX.....	Anxiety
HOS.....	Hostility
PTSD.....	Post-traumatic Stress Disorder
PHOB.....	Phobia
PAR.....	Paranoia

PSY.....	Psychoticism
GSI.....	Global symptom index
INT.....	Intrusion
AD.....	Avoidance
VIG.....	Vigilance
UNST.....	Unstructured
HE.....	Heroic
MY.....	Mystical
DUEX.....	Double universal existential
SYN.....	Synthetic (more symbolically elaborated)
SVI.....	Synthetic value index

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CHAPTER I

INTRODUCTION

“The world is filled with millions of men, women, and children who, with strength and courage, grace and humor, resolve and hard work, rise above their pain and live in the face of continuous suffering. In our own lives we may know some of these special people.” (Wholey, 1992, p.1)

Pernice & Brook (1994) described immigrants as being 'pulled away' from their homelands because of better living standards or education, but retaining the option of returning to their countries of origin, while refugees as being 'pushed out' of their home country, so the reasons for migration are 'expulsion forces' (p.179). While being “pulled away or pushed out”, both Vietnamese immigrants and refugees have struggled, enduring a long period of war, of migration and of adaptations in terms of culture, language, healthcare systems, social policy and economy (Dorais, 2007). To express sensitivity to the issue of various challenges associated with political and cultural background, this thesis will use the term “immigrants” as inclusive of both first generation refugees and immigrants and their children born in North America, to whom the results of trauma and loss have been extended (Dorais, 2007; Neuburger, 2005).

Loss and stressful events are unavoidable during the period of migration that affects the life of the individual and family (Lee, 2010). Vietnamese immigrants have gone through tremendous losses: fleeing the home country, crossing the ocean by boat, witnessing loved ones dying, being imprisoned in wretched refugee camps, resettling in host countries where the culture, language, weather and food are totally strange (Nguyen, Messe, & Stollack, 1999; Steel, Silove, Phan & Bauman 2002).

All these losses generate negative consequences, such as emotional distress. Bowlby (1977, 1980 & 1986), Ainsworth (1985, 1989), Kirkpatrick (1992) have found that any separation

from sources of security and support at times of trouble can cause anxiety and distress, even trauma for some people (Tran, 1993).

Researchers also found that PTSD and depression continue to affect immigrants' lives, even after years of resettlement in the host country (Shapiro, Douglas, Radeckis, 1999; Steel et al., 2002). For instance, Tran (1993) who did research on psychological trauma and depression in a sample of Vietnamese people in the United States, reported that Vietnamese respondents in her study had been born and had grown up during war, and many of them had been directly involved in combat or had spent years in concentration camps, or in Communist prisons or in refugee camps. Others had witnessed the violent death of family members during the war, or they themselves had experienced rape, robbery, or starvation as they fled from Vietnam. Such experiences may contribute to feelings of helplessness in Vietnamese immigrants. Furthermore, several researchers have suggested that a sense of helplessness resulting from traumatizing events is extremely damaging to a person's self-image (Steel et al., 2002; Ryan, Dermot, Dooley et al., 2008).

Particularly from the point of view of Asian cultural perspectives, any movement outside of and away from the family and community structures can threaten individual's loyalty and sense of security within the family and community units (Lee, 1997). Furthermore, mental illness carries a great stigma in Asian cultures, and thus individuals will tend to somaticize their problems and report only the physical symptoms or rationalization of feelings or less significant elements (Chung & Kagawa-Singer, 1995). Though, they do share much in common with other immigrants, each individual and his/her familial, social-environmental context will express experience of loss differently (Lee, 2010). For instance, Solomon (1995) stated that the denial is

not a matter of isolated omissions or distortions, but a pattern that spreads over time, crosses national and cultural boundaries, and defies accumulated scientific knowledge.

Although they have faced challenges, changes, disruption and losses associated with hardships, Vietnamese immigrants have been recently reported resilient and well adapted in host countries (Beiser, 2009; Dorais, 2007). In this study, adaptive capacity or resilience is emphasized and it is distinguished from coping in the sense that resilience reflects what Rutter (1993) considers the ability to adapt and to grow after adversity. The concept of resilience therefore reflects a state of being, which evolves over time, the positive outcome (Kumpfer, 1999) that enhances not only the internal and external resources (i.e., protective factors) such as self-efficacy, perseverance and support systems, but also the ability to adapt, to find meaning in face of crisis (Masten, Best, & Garmezy, 1990); while coping is a state of doing, required at a specific period of time, particularly referring to a search for significance in times of stress (Pargament, 1999), “constantly changing cognitive and behavioral efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of a person (Folkman & Lazarus, 1984, p. 141) or anything people do to adjust to the challenges and demands of stress, any adjustments made to reduce the negative impact of stress (Glennie, 2010).

Furthermore, Earvolino-Ramirez, (2007) found three categories of protective factors of resilience for individuals (e.g., self-efficacy, interpersonal awareness, sense of purpose, social competence, humour etc.), family (e.g., supporting, loving and caring family environment) and social support networks. Bernard (1991) also found that social competence (e.g., cultural flexibility, a caring manner, communication skills), problem solving (e.g., seeking help, planning), autonomy (self-efficacy, sense of identity), and sense of purpose (e.g., goal direction, faith, and spirituality) are significant components of resilience.

Connor-Davidson and Lee (2003) defined resilience as a multidimensional construct that varies with context, time, age, and life circumstances; it is also considered a multi-systemic phenomenon that can occur across a life span. Connor and Davidson (2003) have developed the Connor-Davidson Resilience Scale (CD-RISC; Connor-Davidson, 2003) that treats resilience as a composite of adaptability, relationship, self-efficacy/ hardiness, goal achievement and faith. CD-RISC has been broadly used by many studies in cross-cultural research since it captures the personal, social and spiritual dimensions in the individual (Lim, Broekman, Wong et al., 2011; Singh & Yu, 2010). Connor-Davidson's resilience scale (2003) was chosen for this study since it reflects participants' lived circumstances as immigrants whose self-efficacy, adaptation and spirituality are very relevant to them. However, Yu, Lau, Mak, et al. (2011) note that this scale needs to take into consideration constructs that may require it to be modified somewhat according to Chinese culture. For instance, Chinese rarely directly use the expression "I take pride in my achievements" and yet it is acceptable to say "I am proud of my good efforts"; or "Sometimes fate and God can help" as a question about luck, chance, or things out of their control, and thus not reflecting spiritual influences (Baek, Sook, Lee et al., 2010).

To have a better understanding of the Vietnamese immigrants' resources of resilience, this study is based on the theory of God image (Rizzutto, 1979) and on the theory of the anthropological structures of the imaginary (Durand, 1960, 2005). Both theories have been applied to the human life from infancy onwards, in terms of helping people not only deal with existential fear (i.e., experience of loss), but also with finding meaning in life; the research foundation on these two theories is robust (Lawrence, 1997; Chamber, 2001; Durand, 1999; Schaap-Jonker, 2008; Loureiro, 2008). While development of God image (Rizutto, 1979) centres on personal and interpersonal experiences of God (i.e., Object relations), the

anthropological structures of the imaginary provide a larger framework for individuals to embrace personal stories, including religious and cultural differences (Durand, 1999). In fact, God image has also been seen as a way of exploring Vietnamese immigrants' spiritual resources in dealing with losses and adapting to host countries (Dorais, 2007). On one hand, Dezutter and colleagues (2010) found that one's experience of God as love and comfort could lead one to interpret illness in a constructive way. On the other hand, Francis et al. (2001) found that loving God images predict life-satisfaction and well-being. Other researchers provide support that people's experiences of God would constitute a framework of belief systems of hope in the face of negative events (Gall & Guirguis-Younger, 2013). Additionally, Schapp-Jonker, et al. (2002) suggest that a negative God image would likely link to pathological personality development and psychological distress.

The available measurements to assess losses, resilience and images of God have been developed by Western authors whose outlooks often differs culturally from the Asian mindset. For instance, Yu (2010) states that self-assertiveness and communal concern, individuation and collectiveness are common differences among East and West; therefore, a multiple and culturally sensitive approach would be more promising to examine how the person's image of God associates with resilience in the face of loss among Vietnamese immigrants. This research has adopted the AT.9 test (drawing and storytelling), based on Durand's Anthropological structures of the imaginary. The most unique characteristic of this test is not only its embracing of cultural diversity, but also its focusing on the structures of the imaginary and the field of images (Durand, 1988). For Durand (1999), the field of images and the imaginary are connected with the innate human nature that seeks pleasure or avoids pain. These innate needs are an infant's first drives and reactions to its environment.

For Børch (2013), this means the images of positive desire or negative avoidance are pre-linguistic, pre-conceptual, holistic, and animistic. Børch (2013) adds that the world of images available to, and operated by, the imagination, does have a relation to its referents; these referents are universal to humanity, and if they are expressed in texts, they should have, must have, universal appeal (Børch, 2013, p.578; Durand, 1999). The fields of images and the imaginary therefore allow one to bridge the gap regardless of cultural differences. For instance, the imaginary permits people to perceive and explore certain dimensions of human nature that are empirically immeasurable, such as the connectedness of love, Faith, tragedy, gratitude, purpose and meaning, contentment with life. These terms become quite comprehensible from the perspective of imagination through images and/or narratives (Chamber, 2001). A major source of reference in this study has been Gilbert Durand's *Les Structures Anthropologiques de l'Imaginaire* (1999) in an attempt to bridge the cultural gap and focus on universal human qualities (Børch 2013). According to Wunenburger (2013), Durand's theory represents a powerful heuristic for cultural studies.

This thesis is divided into five chapters. The first chapter presents an introduction to the study, its significance, purpose of the study, research questions, and operational constructs of the terms. The second chapter provides a review of the relevant literature with a special focus on Object Relations theory in relation to the development of God image, and on Durand's theory of the imaginary. This chapter also discusses the relationship between God image, emotional distress and resilience. The gaps in measurements due to East-West cultural differences and the need for a qualitative approach are introduced. Hypotheses are then presented. Chapter three presents the methodology with a mixed method including three phases: 1) a quantitative investigation, 2) an anthropological approach and 3) a qualitative interview; detailed information

on participants, measurements, and procedure are presented and reasons for including and excluding certain criteria are discussed. Chapter four contains data analysis and results. The final chapter focuses on discussion of the study, its implications, its strengths and limitations and recommendations for further research.

Significance of the Study

First, there is a need to clarify the cultural nuance on mental health and coping among Vietnamese immigrants. For instance, previous studies report that Vietnamese immigrants often describe psychological symptoms in the form of rationalization of feelings and somatic complaints (insomnia, pain in the heart or chest) because of the cultural stigma on mental health problems (Cheung & Lin, 1997; Luu, Leung & Nash, 2009). Furthermore, we wonder whether somatization may have its origins in war-induced post-traumatic stress disorder; participants suffered physically and psychologically because of the hardship of refugee camps, war, the Communist regime and adaptation as immigrants (Gold, 1992). Physical aches also may be interrelated with psychological symptoms because of a cultural belief system in which mind, body and spirit are seen as one (Bramadat, 2013; Marciocia, 1989).

Over two decades ago, Brief Symptom Inventory (BSI; Derogatis, 1993) and Davidson Trauma Scale (DTS; Davidson, 1997) are largely utilized to measure emotional distress including PTSD in refugees and immigrants (Davis, 2006). For instance, Iwamasa and Harold (1995) have studied the influence of the level of acculturation on the reporting of distress among Asian, Asian- American, and European college students. The BSI consists of 53 items covering nine symptom dimensions: Somatization, Obsession-Compulsion, Interpersonal Sensitivity, Depression, Anxiety, Hostility, Phobic anxiety, Paranoid ideation and Psychoticism; and three

global indices of distress: Global Severity Index, Positive Symptom Distress Index, and Positive Symptom Total. The DTS, measuring intrusive reflection-experiencing; avoidance and numbness; hyper-arousal, has been found to have both internal consistency (Cronbach's $\alpha = 0.99$) and test-retest reliability ($r = 0.86$) and validated in the Chinese version of the Davidson Trauma Scale with internal consistency (Cronbach's $\alpha = 0.97$) and test-retest reliability ($r = 0.88$) (Chen et al., 2001). Grounding on the reliability and validity of the above cross-cultural research, the present study adopts the BSI and DTS to examine immigrants' levels of emotional distress that may be associated with God image and with a certain degree of resilience.

Second, there is a need to study the meaning of resilience in collective cultures. Recent research has been increasingly concerned with human resilience (Bonnino, 2007; Rutter, 1993). However, there are very few studies of resilience in the context of Vietnamese culture where collective dimensions have been profoundly influenced by Confucianism in which harmony, community, collaboration and family reputation are more emphasized than self-assertion (Yu et al., 2011).

There has been an ongoing debate about whether resilience is an outcome or a process. Fergus and Zimmerman (2005) define that resilience in terms of outcome, that is, when positive adjustment has occurred; whereas resilience may also be considered as the process of coping with stressors, or critical changes in a way that has resulted in the strengthening and enrichment of protective factors. Researchers agree that either seen as outcome or process, resilience is particular to the context, population, risk and protective factors and outcome (Fergus and Zimmerman, 2005). For example, Shannon, Beauchaine, Brenner et al. (2007) consider resilience as the adaptive interactive processes between a person and his or her environment; the focus is on the success of individuals in navigating their environments and the resources that

they have rather than on personality traits or coping skills alone. The lack of consensus in defining of the resilience leads to variation in operationalization and measurement of related constructs (Luthar, Cicchetti & Becker, 2000).

Furthermore, resilience can also be defined as positively coping with stressful events (Smokowski et al., 1999), or adaptive coping in the face of multiple risk factors (Waller, Okamoto, Miles & Hurdle, 2003). Several elements of resilience such as self-esteem, internal locus of control, temperament highly developed cognitive skills, extended social support, positive attributional style were found to correlate positively to resilience (Gausser, 1999; Luthar & Zigler, 1991). It is to be noted that spirituality has not been one of the main factors examined by these studies. Additionally, few quantitative studies have examined the link between resilience and the person's Image of God. Very few studies address the role of spirituality plays in resilience in relation to adaptation among Vietnamese immigrants in particular.

Regarding the measurement of resilience, criticism has also been undertaken by a number of researchers to examine its operational construct and to find methods of intervention to improve a person's resilience in daily life (Wagnild & Young, 1993; Tugade & Fredrickson, 2004; Yu & Zhang, 2005). However, Connor & Zhang (2006) report that many of these instruments are limited in scope and generalizability (Oshio, Keneko, Nagamine et al., 2003). Among various measurements of resilience, Connor-Davidson Resilience Scale (CD-RISC; Connor-Davidson, 2003) is relevant to the current study since it incorporates persons, events, context, spiritual resources and positive outcomes and broadly used in different cultural setting. The scores have been proved valid and reliable, with Cronbach's alpha of .89 and test-retest correlation of .87 in American participants (Connor & Davidson, 2003); its Cronbach's alpha was of .94 in a study with Singapore youth (Lim et al., 2011); $\alpha = .89$ in the Indian sample

(Singh & Yu, 2010). The reliability of coefficient of the Chinese version of CD-RISC was 0.91(Yu &Zhang, 2007) and .89 (Yu et al., 2011). The cross- cultural research on the CD-RISC allows us to adopt this scale to measure participant's resilience in which resilience includes a spiritual component, along with other protective factors, such as social support, positive acceptance of change, a sense of personal competence, tolerance of negative affect, and an action-oriented approach to problem solving. These elements relevantly reflect participants' circumstances in the present study.

Third, there is a need to examine the influence of God image on Vietnamese immigrants in relation to the experience of loss and resilience. Many researchers have studied Vietnamese pathologies in response to their losses and have tended to focus mainly on the negative effects of losses (Fancher, Ton, Meyer et al., 2009; Fox et al., 1999; Steel et al., 2002). However, it is necessary to complement the above findings with an additional focus on elements that contribute to growth in resilience (i.e. faith in God, community support, personal strength, adaptation) (Lawrence, 1998; Davidson-Connor, 2003; Dorais, 2007). In addition, literature also shows that one's God image can have an impact on one's well-being, for instance, helping to reduce chronic pain (Schaap-Jonker, 2008) or to increase emotional distress (Exline et al., 2000).

Recent criticisms have exposed certain shortcomings in earlier presentations of God image. For instance, Sorenson (2004) and Aron (2004) criticize previous psychoanalytic views of the God image in the sense that they were too subjectively focused on the individual and they excluded or undervalued the inter-subjective components of religious experience and understanding. Therefore, it is inaccurate to confine the God image to the unconscious level (Schaap-Jonker, 2008, Aletti, 2005). Hill & Hood (1999b) measure the meaning and understanding of God; however, their theory does not fit into an Object Relations framework

which grounds the theoretical background of the God image (Schaap Jonker, 2008). Lawrence (1991, 1997) is the one who developed a God image scale that fits into Rizzuto's Object Relation approach. The same author pointed out that Rizzuto's Object Relations theory of God will only be appropriate in the Christian-Judaic context (Lawrence, 1997). However, Jonker et al. (2008) reported that Lawrence's measurement (Lawrence, 1997) has limitations on the level of psychometric properties. This present study adopts the questionnaire on God image of Schaap-Jonker (2008) since it reflects Rizzuto's theory of God image in its broad meaning of God representation (Schaap-Jonker, 2008) where God image is not only mirrored in the experiential dimension of a child's interaction on an unconscious level with his/her caregivers (Rizzuto, 1979), but also in a child's understanding about God that he/she learns in family, religion and culture. Therefore, individual thought of God contains experiences of God, while experiences of God affect cognitions about God (Aletti, 2005; Hoffman, 2005). This choice has been also supported by the pilot study (see appendix L) which demonstrated difficulties for Vietnamese participants on the level of the language employed in the God Image Scale of Lawrence (1997).

Using Western theories and measurements to assess Asian participants requires a critical evaluation. In order to better understand how Asian immigrants deal spiritually with loss, it is crucial to be more sensitive to people's cultural background (Lee, 2010). This study therefore calls upon the Theory of Anthropological Structures of the Imaginary, developed by Gilbert Durand (1999). This approach allows one to deepen our understanding of the possible connections between God image, loss, resilience and the imaginary, using a more global anthropological perspective. Three main reasons justify the interest in Durand's theory of the imaginary: firstly, it is an anthropological theory that has particular interest in symbolic language (i.e. God image), myths and cultural and religious references, pertaining to the study of religious

belief and God image (Griffith, 2010). These elements resonate with our selected measure of God image in its cognitive and affective aspects (Schaap-Jonker, 2008). The depth and breadth of knowledge that supports the original theory of the author, who is recognized worldwide, is to be found in well-documented works (Chamber, 2001; Loureiro, 2008). Secondly, an empirical instrument is available which assesses the imaginary profile of the individual (AT.9 test- Y. Durand, 2005). This measurement gives added support to the scientific validity to this theory (Loureiro, 2008). Moreover, Durand's theory has been shown to be relevant to Eastern culture, particularly in the Chinese context (Sun, 2004; 2013). Thirdly, the imaginary categories, supported by an empirical test, may be useful in the context of clinical intervention in counselling and spirituality because of their ability to deal with cultural, symbolic, and religious belief systems (Rizzuto, 1979; Laprée, 2004). For instance, through the person's drawing and story telling, we can measure the structure of his/her imaginary, and then examine it in relation to his/her image of God (Rizzuto, 1979; Schaap-Jonker, 2008; Durand, 2005). This image of God can be seen as one's internal source of support in challenging moments (Dezutter et al., 2010; Gall, 2000); or it can be considered a cause for more distress in terms of an angry God image (Exline et al., 2000). Knowing this may guide further interventions along these lines (Griffith, 2007).

Finally, there is a need to adopt a mixed method design. Thoresen, (1999) has shown that methodological pluralism in research and in response to cultural sensitivity is recommended. The advantage of using a mixed method is to simultaneously generalize results from a sample to a population and to gain a deeper understanding of the phenomenon of interest (Hanson, Creswell, Plano Clark, & Petska, 2005). In other words, both numerical and text data can help us

better understand the research problem and to investigate data more reliably and in greater depth (Creswell, 2003; Hanson et al., 2005).

Purpose of the study and research questions

The purpose of this study is to examine a) to what degree God image may be associated with emotional distress among Vietnamese immigrants; b) to what degree God image may be related to resilience; and c) to explore how Vietnamese immigrants perceive experiences of God, emotional distress, and resilience in relation to the imaginary categories. Framed in the cultural and historical contexts of the sample, the present study attempts to answer the following questions:

- 1) Is God image associated with emotional distress?
- 2) Is God image related to resilience?
- 3) Does God image associate with the individual's imaginary categories?
- 4) Is there a relationship between the imaginary categories and level of distress?

Operational constructs of the terms

God image

The God image is a psychological construct related to how a person feels toward God, e.g., trustworthy, consistent and comforting or untrustworthy, inconsistent and his/her impression of how God feels about him/her (Grimes, 2007). This process reflects one's emotional experience of God, an experience that is developed through an initially unconscious set of relations, in which parents and significant others play a crucial role (Schaap-Jonker, 2008). In this context, God image embraces both the experiential and the rational, since it relates to one's emotional experiences and cognitive understanding of God as well (Hoffman, 2005).

God concept

The "God concept" is defined as one's intellectual, theological understanding of God, for instance, Almighty, Saviour (Lawrence, 1997). In other words, the "God concept" is "the God of the philosopher" about whom the child forms an idea through cultural, religious, social teaching imparted through liturgies, sacred books, images, symbols of the divinity (Rizzutto, 1970, p.4).

Religion/spirituality

Sheridan (2004) defines spirituality as the search for meaning, purpose, and connection with self, others, the universe, and an ultimate reality such as God or a Higher Power (Rizutto, 1979; Gall, Malette, Guirguis-Younger, 2011). Sheridan (2004) distinguishes between spirituality and religion by stating that religion is "an organized structured set of beliefs and practices shared by a community" (p.10), whereas spirituality is in essence a world of meaning

beyond religious institutions. Rizzutto (1979) asserts that it is religion/spirituality that names the God concept and God image.

Vietnamese refugees/ immigrants

Dorais, (2007) reports that there were three movements when Vietnamese people fled from the country: 1) the first-wave refugees (1975); 2) the “boat people” (1978-1982); and 3) the “beneficiaries of a program of orderly departure” (p.57). One study compares those who arrived before the fall of Saigon (1975), and the “Boat People” who fled after 1978 and found that the superior educational, occupational and linguistic skills of the first wave of Vietnamese refugees helps explain on the whole their successful resettlement, compared to the “Boat People” (although there were professionals among them). This second group, on the whole, was less well-educated and had fewer occupational skills than those who had fled Vietnam earlier (Beiser, 2009).

Immigrants’ loss and psychological distress

Foster (2001), Park (2006) and Lee (2010) asserts that the migration process is significantly linked to the experience of loss. The present study focuses on the two main losses: first of all, the state of alienation during the immigration period, during which being forced to leave one’s home and community can result in a loss of the sense of rootedness and belonging (Fox, Cowell, Montgomery, Marks, 1996; Lee, 2010; Ryan 2008); secondly, the death of loved ones during the period of migration is another major loss (Davis, Wortman, Lehman et al., 2000, Steel et al., 2002). Researchers found that emotional distress, PTSD and depression continue to affect immigrants’ lives, even after years of resettlement in the host country (Shapiro, Douglas, Radeckis, et al., 1999; Steel, 2000).

The concept of coping

Coping can be defined as “constantly changing efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of a person” (Lazarus & Folkman, 1984, p. 141). Coping skills therefore are intentional responses to immediate stressors (Manciaux, Vanistendael, Lecomte et al., 2001). Although both coping and resilience encounter adversity, these concepts are distinct. Coping involves a set of skills, whereas resilience is beyond a state of coping, it indicates a successful result of the exercise of those skills (Compas, Connor-Smith, Saltzman et al., 2001). As Glennie (2010) states, not everyone who uses coping skills is resilient, since some attempts to cope are not successful. If the coping skill does not lead to a good outcome, the person is not resilient. For Lazarus (1993), effective coping strategies appear positively related to the positive outcomes of resilience. The same author proposed two main coping styles: problem-focused coping and emotion focused coping. Problem focused coping targets the situation and uses available resources they have to stop the harm or threat from occurring (Lazarus, 1993); emotion-focused coping places emphasis on interpretation of the situation or how those concerned attend to it (Lazarus, 1993). There is strong evidence in the literature highlighting the relationship between resilience and the use of task-focused coping strategies rather than the less effective emotion focused strategies (Everall, Altrows, & Paulson, 2006).

The concept of resilience

Researchers though may situate resilience in different locations in relation to what they look for, the concept of resilience in its nature carries not only the meaning of “springing/bouncing back/ leaping back” to the original and healthy form, but also a state of adaption that integrates reconstruction, existential dynamics, a new life project or a life changed

and transformed after crisis (Manciaux et al., 2001). Waller (2001) defines resilience as “positive adaptation in response to adversity” (p. 292); it is also “a dynamic process encompassing positive adaptation within the context of crisis” (Luthar et al., 2000, p. 543); it is a capacity for the process of, or an outcome of successful adaptation despite challenging situations (Connor-Davidson, 2003). This idea resonates well with the expression ‘bouncing forward’ as opposed to ‘bouncing back’, since once persons have been deeply hurt, if they overcome the adversity, they will never be the same person as he or she was prior to the adversity; they will experience some form of transformation (Bellehumeur, 2011). Originally, studies in resilience were referred to it as a personality trait, whereas over the past decade or two resilience has been redefined as a dynamic, modifiable process (Luthar, Cicchetti, & Becker, 2000). Richardson (2002) points out that the disruption/crisis allows an individual to tap into resilient qualities and achieve resilient reintegration (Richardson, 2002); the term “crisis” in Chinese represents both danger and opportunity. A crisis often disrupts life, it also represents an opportunity for growth or resilience (Fu, 2011); adversity is therefore the sole feature that separates the concept of resilience from trait of personality traits (Earvolino-Ramirez, 2007; Luthar et al., 2000). Richardson (2002) also emphasized resilience as the qualities in the individual and support systems that give rise to one’s social and personal success; resilience is to be found in a multidisciplinary identification of motivational forces within individuals and groups, and the creation of experiences, which motivated action and the use of life giving forces (Hasui, Igarashi, Shikai et al., 2009). Additionally, resilience is also defined as the result of being able to negotiate risk through protective factors in the environment and the individual, thus contributing to the enhancement of health (Mastern, 2002). A number of personal characteristics of resilience have also been identified, such as, a meaningful belief system, spirituality, a clear understanding

of reality, good cognitive and problem solving skills, and high self-esteem (Connor & Davidson, 2003).

Research on resilience in many fields has identified a number of factors resilient people have in common. For instance, family cohesion and social support (Carbonell, Reinherz, & Giaconia, 1998), effective adjustment, problem solving and coping skills, and high self-esteem (Dumont & Provost, 1999). Coutu (2002) found that resilient people, in general, use effective coping strategies, have a firm understanding of reality, a deep and meaningful belief system, and the ability to adapt (Coutu, 2002). For Caverly (2005), resilient people have a realistic understanding of life-circumstances and what they can influence, have an awareness and tolerance of feelings, both their own and that of others, and have a strong belief in the future. Interestingly, Luthans and Youssef (2007) found that values and beliefs have been linked with maintenance of resilience.

Taking the diverse studies on resilience into consideration, in the present study, we redefine resilience as an ability to walk through adversity that results in hardiness, contentment, a solid faith, adaptation and integration (Nguyen & Bellehumeur, *in press*). We choose the Connor-Davidson Resilience Scale (CD-RISC) since it treats resilience as a combination of both internal and external protective factors: 1) self-efficacy/hardiness 2) adaptation/optimism; 3) resourcefulness/spirituality; and 4) purpose (Davidson-Connor, 2003; Singh & Yu, 2010).

Imaginary/ Imagination

The terms “imaginary” and “imagination” do not have the same meaning in French and in English. The “imaginary” (“imaginaire” treated as a noun in French) is often employed to express the inner creative force which produces images and is the fruit of mental activity; it has

two overlapping meanings: firstly it gives rise to the products of the imagination, fields of images and symbol that are created by the individual and collective fantasy; secondly, it is considered as the dynamic human faculty of organizing the complex system of images and meaning attached to the images (Braga, 2007; Wunenburger, 2003). Furthermore, for Braga (2007), the imaginary is the energetic human ability to form and transform images and is profoundly influenced by cultural, religious/spiritual, social settings; it refers to a repertoire of images that defines what, for a given individual, is possible to imagine (Chamber, 2001).

Imagination, according to Sutton-Smith (1988) helps make knowledge applicable to solving problems and is fundamental to integrating experience and the learning process. Simply stated, images are products of imagination that are governed by the imaginary to make the abstract visualized socially, culturally and spiritually (Egan, 1992). For instance, the concept of love is symbolized by the image of the heart; a snake is a symbol of healing in medicine (Egan, 1992; Norman, 2000). In this research, we use the term “imaginary”, defined as the innate human capacity to form images that are influenced by inner world, culture, religion and social settings. The fields of images are organized in different structures, as elaborated in Durand’s theory of the anthropological structures of the imaginary (1999).

The next chapter presents a historical overview of the problem and the review of literature with a special focus on the context of loss among Vietnamese immigrants. The current tendencies related to this problem, the theories, the models relevant to it, and significant research data published about the problem are introduced. Then follows a consideration of the development of the God image in dealing with distress and resilience; the next section introduces the theory of the imaginary and the relevance of using Durand’ imaginary to study God image.

The gaps in the measurements due to East-West cultural differences (Yu, 2010) and the phenomenological study will be presented. Finally, the hypotheses are discussed.

CHAPTER II

REVIEW OF THE LITERATURE

Context of loss among Vietnamese immigrants

The migration process is significantly linked to the experience of loss (Foster, 2001; Park, 2006 & Lee, 2010). Loss shatters the survivor's most basic assumptions about the world: that it is predictable, controllable, secure, meaningful, benevolent, and trustworthy (Janoff-Bulman, 1992; Davis, 2000). This loss results in an existential crisis where the survivor's bond with loved ones or with a familiar cultural environment is broken (Bowlby, 1973; Malkinson, & Ellis, 2000; Parkes, 2006). In fact, attachment theory suggests that any separation from sources of security and support in times of trouble can cause anxiety and distress, and even trauma for some people (Bowlby, 1986; Ainsworth, 1989; Kirkpatrick, 1992; Tran, 1993).

While Vietnamese immigrants may share some of these losses with immigrants from other nations, the sense of loss is particularly acute in these persons whose cultural backgrounds do not permit them to openly express the suffering associated with their losses (Tran, 1993). Moreover, the social, historical and political situations (e.g., war, Communist regime, desperate poverty) made the current sample's suffering unspeakable (Gold, 1992).

In fact, Steel et al., (2002) found that trauma, post traumatic stress disorder (PTSD) and the longer-term mental health burden amongst Vietnamese refugees affected them even after a decade of resettlement in Australia, and those with a greater number of pre-migration risk factors for anxiety and depression had higher levels of psychological distress after migration that cumulative risk factors predicted future vulnerability to depression in particular. Mollica, et al., (2001) found that 90% of the refugee sample from Vietnam met criteria for PTSD. Researchers have suggested that a sense of helplessness resulting from traumatizing events is extremely

damaging to a person's self-image (Ryan et al., 2008). Particularly from the Vietnamese cultural perspectives, any movement outside of and away from the family structure can threaten the individual's loyalty and sense of security within the family unit. This reason may explain why Tummala-Narra (2001) found that immigrants in the U.S have faced considerable conflict and losses. Galati (2004) reveals that numerous other conditions can affect immigrants' mental health, including homesickness, concern for the future, loss of family members, adjustment to a new culture, language problems, and job dissatisfaction.

Additionally, mental illness carries a great stigma in the Vietnamese culture, and thus individuals will tend to somaticize their problems and report only the physical symptoms or less significant elements (Luu et al., 2009). Although, they share much in common with other immigrants each individual within his/her familial, social-environmental context will express the experience of loss differently. Researchers in Psychology and Psychiatry have reported PTSD and denial of trauma for a number of years among trauma victims (Dyregrov, Gupta, Gjestad, & Raundalen, 2002). Furthermore, Solomon (1995) asserts that the denial which occurs is not a matter of isolated omissions or distortions, but a pattern that spreads over time, crosses national and cultural boundaries, and defies accumulated scientific knowledge. In fact, Van der Kolk, Weisaeth and van der Hart (1996) found periodic denials of psychic trauma within psychiatric patients.

Despite the presence of psychological distress, some people strive to seek meaning in life. They may do it by calling upon spirituality, and depending on their religious belief, they may look for comfort or understanding according to the way they perceive God. In the next section, we adopt Rizzutto's theory of God Image to explain how people find meaning for life in the face of adversity.

God image in Rizzuto's Object Relations Theory

Rizzuto (1979) indicated that the term “God Image” in psychology was first discussed by Freud (1913) who considered the concept of a personal God to be nothing more than an illusion; he referred to it as the idea of an exalted father, a projection of the child’s helplessness and need for protection, a mere wish-fulfillment (Grimes, 2007). Klein then (1930/1964) expanded the theory by looking at the child’s interpersonal relationships, mainly those with caregivers in early childhood. She argued that inner representations or images of these caregivers are internal objects which are developed gradually by integrating diverse encounters with significant persons throughout one’s lifespan. Such objects impact the person’s thoughts, feelings, and behaviours and enable the individual to understand the self in relation to others. Grounding on Object Relations theory (Klein, 1930/1964), Rizzuto (1970, 1974 & 1979) further broadened Freud’s theory on God image. For her, God image is more than a simple illusion, it is rooted in the child’s relational bonding with caregivers (i.e., attachments) which is essentially crucial and is gradually internalized as an internal working model or attachment figure to deal not only with existential fear, but also to find meaning in adversity (Rizzuto, 1979).

This latter model shaping one’s image of God helps in dealing with anxiety and in finding meaning in unfavourable experiences (Bowlby, 1977 & 1985; Kirkpatrick, 2002). Rizzuto distinguishes the God concept (rational/ cognitive understanding of God) from God image (the emotional experience of God) (Rizzuto, 1979; Lawrence, 1997). She put the God concept and God image together, and named the new term the God representation (Rizzuto, 1979, Schaap-Jonker, 2008). However, her main work focuses on the experiential dimension of the God representation, the God image (Jonker et al., 2008). Furthermore, Rizzuto (1979) argued that the notion of God image as introduced in religion (“the human being as created in

the image of God” Gn 1, 27), may also be a lasting source of self-respect and ego fulfillment, meeting human needs at any level of development (p.90). Such objects impact the person’s thoughts, feelings, and behaviours and enable the individual to understand the self in relation to others. In line with Rizzuto, McDargh (1986) asserted that such objects also provide confirmation and affirmation that are crucial for infants if they are to stand independently of others later in life. Following Winnicott (1953 & 1971), Rizzuto (1979) grounded the God image on two well-established childhood experiences: 1) Winnicott’s transitional objects which are external objects put in the service of inner processes; 2) Imaginary playmates which are almost entirely inner, created realities projected outward (p.177).

Accepting Rizzuto’s theory of God image, modern theorists include both the emotional comprehension of God, formed by the relational, unconscious dimension in which significant others contribute their part, and a rational understanding of God which is grounded on what one learns about God in religious doctrines, from significant persons, spirituality and in the religious culture (Murken, 1998; Hoffman, 2005). The increasing literature reported various findings on Rizzuto’s above assumptions (Schaap-Jonker, 2008; Francis et al. 2010). The next section, we discuss the role that image of God plays in dealing with loss.

God image in dealing with loss among Vietnamese immigrants

Rizzuto’s God image theory (1979) finds immediate application to the present study which lays special focus on Vietnamese immigrants who have faced tremendous losses (Steel et al, 2002). In fact, Dorais (2007) has found that despite the stress of persecution, flight, and resettlement, Vietnamese immigrants often turn to religion to find hope and meaning during the period of migration and after their resettlement abroad. For Dorais (2007), religion reinforced

Vietnamese immigrants' identity and helped them to adjust to unfamiliar environments. One quote taken from Dorais' qualitative interview (Dorais, 2007) with a Vietnamese clearly illustrates this idea: "When your life is confronted with failure and problems, it is religion that helps you overcome difficulties. It does not resolve problems by itself, but it helps you mentally. It gives you the strength and hope to overcome obstacles." (Dorais, 2007, p. 65)

Furthermore, Kirkpatrick (1992, 1998, 2005) takes up the idea of God image as the ultimate secure figure, who is willing to act as comforter and protector from loss, and fosters one's capacity to trust and then to explore the environment (Ainsworth, 1967; Bowlby, 1969, 1973, 1977, 1980; Kelley, 2009). For Kirkpatrick (1998, 2005), God image can be either corresponding (i.e., one having a secure attachment will feel secure in attachment to God) or compensatory (i.e., attachment to God would compensate for what is missing in one's relationships with others). Kirkpatrick based his research on Ainsworth's five criteria of attachment relationships: 1) The infant seeks proximity to the caregiver; 2) turns to the caregiver as a haven of safety at times of distress; 3) uses the caregiver as a secure base from which to explore the environment; 4) experiences anxiety when separation from the caregiver is threatened; and 5) experiences grief when the caregiver is lost (Ainsworth, 1967, 1978, 1985). Kirkpatrick found that these same five criteria are satisfied when one considers religious beliefs and behaviors as part of the attachment behavioural system (Kirkpatrick, 1999, 2005; Kelley, 2009). He proposed that a positive God image would be connected in adult life to a secure attachment to parental figures and would help people better cope with difficulties (Kirkpatrick, 1992 & 1999). In line with this, Bennett (1997) asserts that "When God functions as the ultimate secure base; people may better negotiate separation and loss." (p.31). Furthermore, McIntosh et al (1993) found that religion/spirituality had been a support to parents coping with the loss of an

infant (e.g., the belief that the loved one is in a better place and that the survivor and loved one will someday be reunited may also mitigate an existential crisis). Many researchers agree that the connection with God, particularly strong in the case of prayer and other religious behaviors, tends to become more frequent after a significant loss of loved ones (Kelley, 2009).

On the one hand, the researchers found that a secure attachment to God tends to be associated with indicators of psychological and spiritual flourishing such as faith maturity, lowered anxiety and depression and fewer symptoms of physical illness (Sim & Loh, 2003; TenElshof & Furrow, 2000). On the other hand, an insecure attachment to God has been found to be associated with neuroticism, and increased negative affect (Rowatt & Kirkpatrick, 1999). In line with this, Exline, Yali and Sanderson (2000) have reported that a negative God image may easily trigger emotional distress. For instance, difficulty with the image of a God who is unforgiving, was found to predict an anxious and depressed mood within a large college student sample ($N = 5\,200$), and that was also found to be related to one's difficulties of forgiving self and others (Exline & Yali, 1999). Additionally, the pessimistic appraisals of self, others, and the world that accompany depressive thinking (Beck & McDonald, 2004) can extend to perceptions of God as well (Exline et al., 2000). A negative view of God could color a person's perceptions of the world, leading to greater psychological distress. In fact, Pargament et al (1998) found that religious practice also carries considerable potential for strain that may affect the level of depression, if one has a negative image of God or sees oneself as sinful. However, Titus (2002) found that affective, intellectual and spiritual trials would lead to growth and they often involve keeping in contact with our larger goals. The next section will discuss the relationship between God image and resilience.

God image and resilience

In the desperate moments, when facing life and death, some people somehow walk through them with tremendous courage and resilience (Rutter, 2003). Tedeschi and Calhoun (1995) revealed that someone experiencing intense sufferings may develop a deeper spirituality (i.e., fostering a positive God image), which may be related to resilience or post-traumatic growth. If human resilience has been considered to be processed through three interrelated facets: 1) with coping with hardship; 2) with overcoming adversity; 3) with growing regardless of the unfavorable experiences; then in this process, Connor and Davidson (2003) indicated that resilience involves resourcefulness/spirituality, self-efficacy, adaptation, and purpose, (Connor-Davidson, 2003; Singh & Yu, 2010). Prior to Connor-Davidson (2003)'s findings, Kumper (1999) already found that the spiritual or motivational components including belief systems (i.e. understanding of God and feelings about God) served to motivate individuals and create a direction for the life journey (Kumper, 1999).

On the one hand, literature has indicated that God image contributes to the maintenance of self-esteem and empathy, helping one to cope with existential anxiety and become resilient (Francis, Croft, & Pyke, 2012). On the other hand, Gall, Charbonneau and Clarke (2005) likewise associated the presence of a positive God image with a deepened sense of coherence, comprehensibility of reality and enhancement of the creation of meaning. God image has also been found to be related to different psychological aspects of well-being such as self-esteem (Benson & Spilka, 1973), self-worth (Francis, Gibson, & Robbins, 2001), self-confidence and autonomy (Aldridge & Clanton, 2001).

Examining resources of resilience among refugees, Hsu, Davies, and Hansen, (2004) reported that a stable relationship with God (i.e., faith in God) has been identified as a protective

factor for Asian refugees in adjusting to a new country. Park and Cohen (1993) also reported an association between a loving God image with positive coping and higher personal growth in the face of negative life events (e.g. death of loved ones) (quoted in Eurelings-Bontekoe et al., 2005). Yun (1997) studied 95 elderly Korean immigrants and found that these persons used religious/spiritual resources to gain psychological comfort and peace of mind; faith and belief in God can be considered as sources of strength (Burt, 1998) that enable people to face reality with courage and optimism (Tompar-Tiu & Sustento-Seneriches, 1995).

One study on immigrant women found that spirituality (i.e., as a major force in the attainment and maintenance of health and well-being) is part of their character and of their way of living, since they tend to turn to the Higher Power in each situation of daily life to find guidance and protection (Meadows, Thurston, & Melton, 2001). The researchers found that belief in God and practice of religious ritual may help protect immigrants from negative life events on the individual, familial, and community level (Bankston & Zhou, 1995; O'Mahony & Tam Truong, 2007). Another study on immigrant youth, Thompson and Gurney (2003) found that religion/ spirituality (i.e. one's relationship with God and with faith community) not only played an important part in the immigrant youths' identity and sense of self, but it also appeared to provide a strong connection to familial and cultural identity (Bankston & Zhou, 1995). These youths also reveal that religious faith among immigrants is a strong source of comfort and guidance which provides the courage necessary to overcome health problems (Thompson, Gurney, 2003; Hill & Pargament, 2003). Many studies show that Asian immigrants often count on God or a Higher Power in stressful life events to find hope and meaning and to survive and to adapt in the host countries (O'Mahony & Tam Truong, 2007; Bankston & Zhou, 1995). Furthermore, religious/spiritual beliefs also help people find meaning in trauma by offering a

ready framework of belief systems for integrating negative events (Pargament & Park, 1995; Park & Cohen, 1993).

Interestingly, the positive feeling towards, and understanding of God (Rizzutto (1979) implicit in one's religion/spirituality was found to be a major predictor of resilience and later positive life adaptation in a large national sample of working and non-working mothers (Dunn, 1994). Walker (1995) replicated these results with a national sample of adult children of alcoholics among whom spirituality were found to be highly predictive of positive life adaptation.

In sum, going from struggle to resilience is a long process for immigrants (Berry, 1987) where the imaginary possibly plays an important role in forming and transforming their vision, their faith, and their God images to find meaning in life (Rizutto, 1979). Jarvis, et al (2005) found that religious identity tends to become strengthened through the immigration experience as a way of maintaining a bond with one's home country. Religion is reported to be an important aspect of people's lives and is a salient part of their identity (Verkuyten & Yildiz, 2007); it offers a shared sense of belonging, a shared belief system and relief in the face of existential anxiety (Greenberg, Solomon, & Pyszczynski, 1997). However, Hoffman (2005) indicates that issues of ethnic, gender, and cultural differences might impact an individual's experience of God as well. The next section will explore the relevance of using Durand's anthropological theory of the imaginary, a more culturally sensitive approach to study God image among Vietnamese immigrants.

The relevance of using Durand's theory of the imaginary to study God image

Rizzuto's Theory of God image (1979) and Durand's *The Anthropological Structures of the Imaginary* (1960) are similar in the sense of elaborating and re-elaborating inner images (i.e., an Object Relation) to be able to deal not only with existential anxiety but also with change and meaning for life. Rizzuto, however, more specifically stresses the function and the development of the God image, while Durand has a more generalized approach that allows structures to consider cultural influences when dealing with anxiety over the passage of time and with the fear of death. Rizzuto (1979) also enters into the field of the imaginary in terms of forming the God image (i.e. an Object Relation) to walk with the person throughout the life journey. For her, this process is conditioned by one's culture, religion and one's own needs; she bases her argument on the study of Nagera (1969) who assesses the significance of imaginary companions for ego development in dealing with distress as follows:

1) The imaginary companion frequently plays a specific positive role in the development of the child, and once that role is fulfilled, it tends to disappear and is finally covered by the usual infantile amnesia. 2) The functions served by the imaginary companion depend upon the special needs of the child. 3) Some of the imaginary companion services to the child are (a) scapegoat for badness and negative impulses: the imaginary companion can be a projection of the child's bad behaviour; (b) confirmation and prolongation of the child's sense of omnipotent control; (c) assisting superego in the face of a weakened tendency to behave well; (d) companion for a lonely, neglected, or rejected child; (e) corrective complement of painful reality; (f) helper in moments of crisis to "avoid regression and symptom formation"; (g) impersonator of ego ideals from an earlier period (Nagera, 1969, as cited in Rizzuto, 1979, p. 191).

In this sense, Rizzuto's work and Nagera's study allow one to better appreciate the link between God image and the imaginary. As stated above, within the faculty of the imaginary, images are created to deal with anxiety and fear of time passing by (Rizzuto, 1979; Durand, 1999). On this very central point, Rizzuto and Durand's theories do converge.

In other words, the imaginary is set up to compensate for disappointment, to develop a shield against fears and provide alternative solutions (Boia, 1999). Furthermore, Durand (1999) searched through the fields of anthropology, psychology, philosophy, different cultures, and religions, and found that human activities are revealed in various fundamental structures of the imaginary. There lies the origin of human culture, namely in a wealth of images and symbols that continue to shape ways of thinking and relating. Durand (1960) found that structures of the imaginary may be identified as 1) “heroic” (symbols referring to fighting in battle, to victory, to making a stand, to separating what is good from what is bad or evil; they also refer to a heroic struggle as part of a daily life spent countering the anxiety of time and the threat of death; the heroic is commonly associated with the rigour of the rational thinking; it is also concerned with the tendency to look for elevation and liberation); 2) “intimate or mystical”(these symbols are more commonly associated with heart-felt ways of living: finding peace without turbulence; seeing everything as friendly, gentle and peaceful; life is warm when internalized, like good food that we absorb to nurture ourselves, Xiberras, 2002); 3). Third category of the imaginary, called “synthetic” refers to a harmonious integration between the above two categories. In fact, this third category of the imaginary can enable the two opposing structures (heroic and mystical) to achieve a healthy harmony while remaining in each other’s presence, instead of excluding the other. The synthetic category is revealed in one’s ability to overcome existential fear with faith in the fullness of time and in final salvation (Xiberras, 2002, p. 94-95); it is also found in several different cultural traditions and myths (monotheistic and polytheistic).

However, Durand (2005) indicates that if one of the two opposing structures (heroic or mystical) of the imaginary takes too much space at another’s expense, then an unhealthy state develops and causes discomfort (i.e. mental illness, social discomfort, conflicts). In other

words, the person's imaginary could come to light in a "defective" manner". A non- structuring category showed in one's drawing and storytelling that may be indicative of a disturbed mental state (Bellehumeur, Lavoie, Malette, Laprée, & Guindon, 2013; Durand, 2005; Loureiro, 2008). This non-structured form of the imaginary may reflect the person's emotional distress (i.e., trauma; Y, Durand, 2005) when their vision of God image fails to sustain them in stressful events (Rizutto, 1979). Durand (2005) further establishes one more category, namely DUEX ("double universal existential" containing both heroic and mystical components; this category appears less elaborated than the more symbolically synthetic).

Durand's anthropological structures of the imaginary has been adopted for this study since it has been empirically validated through the creation of an instrument, the AT9 test (Archetypal test with nine elements, Durand, 2005, p.11), which identifies the type of imaginary an individual possesses. Durand's AT.9 test not only provides the structures for assessing one's category of the imaginary (heroic, mystical and synthetic), but also offer a framework to assess and better understand one's unstructured category of the imaginary. The test consists of a set of nine items (a fall, a sword, a refuge, a monster, something cyclical, a person, water, an animal and a fire) with which participants can make a drawing and provide an accompanying explanation (i.e., telling a story). Data are mainly obtained in the form of a drawing and a story, followed by a questionnaire (Durand, 2005).

According to Durand (2005), the questionnaire allows one: a) to discover how the imagined story ends; b) to confirm participants' position in relation to the character of the imagined story; c) to comprehend what is the meaning of the nine symbolic items drawn by the participants. Durand (2005) also suggests that the above nine symbolic elements would: 1) bring forth the problem of time, death, and anguish (i.e. the fall and the devouring monster); 2) suggest

tools to resolve anxiety: the sword, the refuge and/ or something cyclical (these archetypes respectively serve as the functional starting points for the heroic, mystical, duex and/or synthetic categories); and 3) serve as complements: the person's role is to be the main actor in relation to the other eight elements.

In line with Durand (2005), it has been proposed that the imaginary expressed through the use of symbolism and images introduced by religion/ spirituality (Rizzutto, 1979) has helped persons explore their inner world and find support and meaning in life (Fowler, 1981; Assagioli, 1994; Côté, 2003; Lefebvre, 2005). Lavoie (1999) has demonstrated that the use of mental imagery by exploring clients' metaphors, images and symbols facilitated psycho-spiritual integration in counselling. Researchers revealed that the imaginary allows the person to present his/her story from the point at which she/he is, with respect to a cultural, social and religious background (Rossi, 1985).

Accordingly, the use of Durand's theory of the imaginary combined with Rizzuto's theory on God image appears relevant to the study of the sources of resilience in the face of loss among Vietnamese immigrants living in Canada. This thesis proposes that those Vietnamese immigrants whose imaginary falls in the synthetic category would most likely embrace a positive God image. In this case, both individual and communal characteristics would be incorporated in their abilities for adaptation (Berry, 2006; Dorais, 2007) and in resilience (Davidson- Connor, 2003). As mentioned above, Durand's theory on Anthropological structures of the imaginary (Durand, 1999) represents a more global approach which may help to bridge the gap between Western and Eastern cultures. According to Wunenburger (2013), it offers a valuable heuristic potential to foster relevant analytical tools for intercultural studies. Thoresen (1999) has shown that choosing a methodological pluralism in research out of respect for cultural sensitivity is to

be recommended. The next section will further discuss the qualitative approach regarding a psychological phenomenological method (Cresswell, 2009).

An in-depth understanding of participants' experiences: a phenomenological approach

Phenomenology was mainly developed by Edmund Husserl, Heidegger, and Sartre with a special emphasis on a person's point of view in relation to relevant conditions of experience (Smith, 2003). On one hand, phenomenological theory provides a framework for understanding the person's experiences that takes into account multiple contextual factors (Cresswell, 2007; Miller, 2000). On the other, it also offers the structure for analyzing and reporting detailed views of participants (Creswell, 1998, p. 15) which will be discussed in the methodology section.

Particularly, a psychological phenomenal method was chosen for this study since it not only places a special focus on discovering participants' perceptions, feelings and experiences with respect to the phenomenon being studied (Guest, Greg; MacQueen, & Namey, 2012), but also allows them to share their experiences in their own vocabularies (Cresswell, 2007). In this sense, the researcher's involvement in each step of data analysis and her experience of the phenomenon requires insight and objective interpretation (i.e. being aware of theories, biases, assumptions or knowledge of the phenomenon being studied) (Sadala & Adorno, 2001, p. 289).

Using Moustaka 's psychological phenomenon method (1994) as ground, Cresswell (2007) provides five steps for data analysis which were applied to the current research.

First of all, the analytic process refers to "personal bracketing", meaning the participant's interview transcription is read carefully in the light of the research interest and yet the researcher's own presuppositions, interpretations or theoretical concepts are not allowed to enter the unique world of the participant (Creswell, 1998, pp. 54 & 113; Moustakas, 1994, p. 90). So

the term “personal bracketing” refers to the participants’ own unique experiences that emerge from the data analysis process. In order to achieve such personal bracking, Denzin, (1989) provides the following steps: 1) locating within the personal experience or self-story, key phrases and statements that speak directly to the studied phenomenon; 2) interpreting the meanings of these phrases, as an informed reader; 3) obtaining participant's interpretations of these phrases, if possible; 4) examining the essential recurring features of the phenomenon being studied; 5) presenting a tentative statement, or definition, of the phenomenon in terms of the essential recurring features identified.

Second, from ‘significant statements,’ formulated meanings are extracted. Third, when themes emerged from clustering units of meaning together, the researcher tried to elicit the essence of the meaning of the units within a holistic context. This step calls for even more judgment and skills on the part of the researcher since central themes are to be brought to light, called “the essence of these clusters.” Fourth, a written summary that incorporates all the themes elicited from the data provides a holistic context. This reveals the participants’ underlying experiences of being, doing and relating. At this stage, a ‘validity check’ is required where the researcher contacts participants to determine if their understanding of the essence of the interview has been correctly described. This work needs to take into consideration the minority voices that are important counterpoints to bring out regarding the phenomenon researched (Creswell, 2007). The result of this ‘validity check’ will include necessary modification. Finally, the general themes and composite summary (*the invariant structure*) were discovered in which the structure underlying the experiences of the phenomenon are expressed. For instance, “grief is the same whether the loved one is a puppy, a parakeet, or a child” (Creswell, 2007, p.62).

In fact, a phenomenological interview has proved effective in several areas of research: on Images of God among Korean immigrants (Lee, 2005); on the role of spirituality in how Filipino immigrants conceptualize and cope with crises (De la Paz, 2004); on perceptions of depression among elderly Thai immigrants; on perceptions and attitudes of older Filipino Americans towards mental illness (Faustino, 2004) and on looking at frailty: a phenomenological study of elderly Canadian women living alone in the community (Meneley, 1999). Bernard (1988) found that semi-structured phenomenological interviews permit interviewers to be prepared ahead of time and that can provide reliable, comparable qualitative data in terms of its nature (David, & Sutton, 2004); these also allow participants the freedom to express their views in their own terms.

The above overview of the literature has set forth the concepts relevant to the present research among Vietnamese immigrants. The following section will present the hypotheses.

Hypotheses

In this section, we present two hypotheses that are based on empirical research and two logical hypotheses that are explorative and derived from Durand's theory. First, we briefly reiterate some important empirical findings which allow us to recap the conceptual understandings of these hypotheses.

First of all, researchers found that PTSD and depression continue to affect immigrants' lives, even after years of resettlement in the host country (Steel, 2002); also Vietnamese immigrants with a greater number of pre-migration risk factors for anxiety and depression had higher levels of psychological distress after migration. Particularly from the point of view of Vietnamese cultural perspectives, any movement outside of and away from the family structure can threaten individual's loyalty and sense of security within the family unit (Luu et al., 2009). Galati (2004) reveals that numerous other conditions can affect immigrants' mental health, including homesickness, concern for the future, loss of family members, adjustment to a new culture, language problems, and job dissatisfaction. Moreover, mental illness carries a great stigma in Asian cultures, and thus individuals will tend to somaticize their problems and report only the physical symptoms or less significant elements (Chung & Kagawa-Singer, 1995).

An important finding of Dezutter et al. (2010) that can also support the current study is that the severity of the pain endured had a significant influence on both the interpretation of disease and on the degree of happiness experienced. Dezutter and colleagues (2010) found that one's experience of God as love and kindness could look at their pain and illness in a possible way. Additionally, an important empirical finding is related to the fact that religious practice also carries considerable potential for strain that may affect the level of depression, if clients have a negative image of God or see themselves as sinful (Pargament et al., 1998). Moreover,

unforgiving God image was found to predict anxious and depressed mood within a college student sample (Exline et al., 1999). Furthermore, negative perceptions of God would also color the pessimistic appraisals of self, others, and the world that lead to greater psychological distress (Exline et al, 1999; Beck et al., 2004; Froese & Bader, 2010). Studying Vietnamese immigrants in particular, Dorais (2007) found that religion/spirituality (as expressed through God image) reinforced their identity and helped them to adjust to unfamiliar environments. Researchers also asserted that faith and belief in God can be seen as sources of strength (Burt, 1998) that enable people to face adversity with strength and optimism” (Tompar-Tiu & Sustento-Seneriches, 1995)

Second, another relevant finding that is appropriate to the current proposal is the study of Gall, Charbonneau and Clarke (2005) who found that the presence of a positive God image associated with a deepened sense of coherence, comprehensibility of reality and enhancement of the creation of meaning. Additionally, Benson & Spilka (1973) found that the person’s God image impacted his/her function of self-esteem and locus of control. Furthermore, Park and Cohen (1993) also found a link between a loving God image and positive coping and higher personal growth in the midst of negative life events (i.e., death of loved ones) (Eurelings-Bontekoe and colleagues, 2005). Particularly, Bennett (1997) reported that when God functions as the ultimate secure base, people may better negotiate separation and loss. In line with this, a loving God image has been found to be linked with a secure childhood attachment (Kirpatrick, 1999, 2005). These above findings suggest how spirituality (for instance, as expressed through God image) and resilience are interconnected (Bellehumeur, 2011). Notably, Yun’s (1997) study on 95 elderly Korean immigrants reported that religion and spirituality helped them gain psychological comfort and peace of mind. In his study of Vietnamese immigrants, Dorais (2007)

reveals that they often turn to religion/spirituality to find hope, strength and meaning during the migration and after their resettlement abroad.

Grounding on the above literature, the present study hypothesizes that

1. The higher the positive God image, the lower the levels of emotional distress, whereas the higher the scores on negative God Image, the higher the levels of emotional distress.
2. The higher the positive God image, the higher the level of resilience, whereas the higher the levels of negative God image, the lower the levels of resilience.

Additionally, the other two explorative hypotheses are:

3. The stronger the positive God image, the more likely the synthetic category of the imaginary will be observed in the participant.
4. The higher levels of emotional distress, the lower the resilience, the less likely to observe the synthetic category of the imaginary.

CHAPTER III

METHODOLOGY

Overview of the Study Design

A mixed research design with three phases (quantitative, anthropological and qualitative approach) was adopted to explore the relationships between God image, emotional distress and resilience; it also examines how God image, resilience and psychological distress relate to the imaginary among Vietnamese immigrants living in North America. The study included 129 Christian participants (both first and second generation Vietnamese immigrants). Each phase is now presented with description of participants, procedure, measurements, and analytic method.

Phase I: Quantitative investigation

Participants

Participants were recruited through an announcement during the Sunday Mass and through an advertisement of the research placed on the bulletin Board of the two Churches concerned (see Appendix B). The selection of participants with inclusion and exclusion criteria was as follows: 1) The inclusion criteria included: a) be between the ages of 17 and 83; b) experiencing loss occasioned by the immigrant flight (or experiencing fallout from this distress in familial relationships; c) be able to read English (see advertisement for participants in Appendix B), to make a simple drawing, and to complete 5 sets of questionnaires relating to participants' socio-demographics, their experience of loss, God image, and resilience; d) all were offered the possibility of participating in a one hour interview with a focus on the above theme; and e) be within the Christian tradition (self-reported). 2) Exclusion criteria included: (a) the presence of significant pathology (this information came from the demographic form –see Appendix D) and the screening interview (Appendix B and C); the screening interview supported the decision to exclude.

In total, 139 Vietnamese immigrants, aged 17 to 83, participated in total; however, 10 participants (7.1 %) were dropped due to incomplete information. Attrition resulted from general life issues (i.e., busy with two jobs, feeling uncomfortable with questions on trauma, participant's child was sick) that arose in the life of some participants, resulting in a decision to not complete the survey packages. Of the 129 willing participants who completed the survey, 32 volunteered to do the AT.9 Test and 8 participants offered to share their stories in a one hour interview. The participants for this study lived mainly in two cities, Ottawa and Montréal, N= 129, 58 males (45 %), 71 females (55 %), aged 17-83 (M = 45; SD=14.5) and identified for the majority of them as Christian Vietnamese immigrants. The average years living in Canada was 22.8 (SD = 6.7). The first generation immigrants represented 87.6 % of the sample, the second generation 12.4%. The percentage of participants' reporting good health was 93.8 %, not in good health 5.4 %, and had no idea: 0.8%. See Table 1 for further information.

Table 1. Demographic Characteristics of the Vietnamese Sample

Place of Birth	Viet Nam	87.6 %
	Canada	10.9 %
	Refugee camp	0.8 %
	Other	0.8 %
Marital Status	Single	24.8 %
	Married	66.7 %
	Divorced/Separated	3.1 %
	In a common law relationship	2.3 %
	Widow	3.1 %
Educational Level	Secondary school	25.6 %
	College diploma	22.5 %
	BA	41.9 %
	MA	6.2 %
	PhD	3.9 %

Note. N= 129. Custom Table analysis was used.

Procedure

Prior to the study, the approval of the Ethics Committee Board (see appendix A) and permission from the Parish priests were obtained for a pilot study on six participants to see how they responded to the questionnaires (see the report of the pilot study in Appendix L). Participants were recruited subsequently from Our Lady of Lavang Church, Ottawa, Ontario, and Sts. Martyrs du Vietnam, Montréal, Québec. The researcher contacted willing participants either by mail or telephone to discuss the purpose of the research, the consent form and the method of completing the research package, either at Saint Paul University, or at the researcher's convent, or at the pastoral office of the church or at home. In the event, the participants completed the survey at home, the researcher contacted them by phone to debrief their feelings upon receiving their research packages. Participants were asked to complete and return the surveys (i.e., socio-demographics, God image questionnaires, Brief Symptom Inventory, Davidson-Connor Resilience Scale and Davidson Trauma Scale) with the signed, informed statement of consent. The principal investigator returned a thank you note after receiving each participant's research package. The data collection was divided into three phases:

Measurements

After discussing the method of completing the research survey with participants, five sets of questionnaires (i.e. Demographics, Questionnaire on God image (Schaap-Jonker, 2008), Brief Symptom Inventory (BSI, Derogatis, 1993), Davidson Trauma Scale (1997), Resilience Scale (Connor-Davidson, 2003) were distributed to willing participants. The participants were assured that their answers would remain confidential; they were asked not to write their name anywhere on the questionnaires (see the consent form in Appendix C).

Socio-demographic questionnaire

Participants were asked to complete the socio-demographic questionnaire on gender, age, education, language, marital status, occupational status, annual income, cultural background, religious affiliation, maternal language, the country in which they have been living and the type of loss that most affected them (See appendix D).

The Questionnaire on God image (QGI)

The Dutch Questionnaire on God image (QGI, Jonker, 2008) with a Likert format ranging from 1 “totally disagree” to 5 “totally agree” was used in the present study since it showed high psychometric properties. This questionnaire consists of 33 items on a two dimension level: affective-cognitive. The affective dimension has three scales: 1) security/closeness: “When I think of God I experience trust”, Cronbach $\alpha = 0.93$; 2) anxiety and guilt: “When I think of God I experience fear of not being good enough”, $\alpha = 0.94$; and 3) feelings of discontent: “When I think of God I experience dissatisfaction”, $\alpha = 0.75$). The cognitive dimension also has three scales; 1) supportive actions such as “God comforts me”, $\alpha = 0.98$; 2) punishing/ ruling actions such as “God exercises power, $\alpha = 0.71$ ” and 3) passivity: “God leaves people to their own devices”, $\alpha = 0.76$ (Schaap-Jonker, Eurelings-Bontekoe, Verhagen, & Zock, 2002). To measure GI among Vietnamese immigrants, the current study refers to the two subscales: positive feelings towards God with 9 items such as loving, affection and security ($r = .86$) and negative feelings towards God with 8 items such as uncertainty, guilt, fear of not good enough ($r = .78$) since these two subscales reflect Rizutto’s theory and also have high level of internal consistency.

Connor-Davidson Resilience Scale (CD RISC)

CD-RISC is a scale to assess resilience that consists of 25 items. Participants were asked to respond on a five-point Likert scale on how true each item was for them during the last month. Scores range from 1-100 and are obtained by considering higher scores as indicating higher resilience (Connor & Davidson, 2003). For instance, the item: “Tend to bounce back after illness, injury or hardship,” which measures the person’s ability to cope with adversity. Respondents rate items on a scale ranging from “not true at all” (0) to “nearly true all the time”(4). The score obtained in this manner has been proven valid and reliable, with Cronbach alpha of 0.89 and test-retest correlation of 0.87 in American participants (Connor & Davidson, 2003); its Cronbach alpha was of 0.94 in a study with Singapore youth (Lim et al., 2011); $\alpha = 0.89$ in the Indian sample (Singh & Yu, 2010). The reliability of the coefficient of the Chinese version of CD –RISC was 0.91(Yu & Zhang, 2007) and 0.89 in Yu et al (2011).

Brief Symptom Inventory (BSI)

The BSI (Derogatis, 1993) consists of 53 items covering nine symptom dimensions: Somatization (Som), Obsession-Compulsion (O-C), Interpersonal Sensitivity (I-P), Depression(Depr), Anxiety(Anx), Hostility(Hos), Phobic anxiety(Phob), Paranoid ideation (Par) and Psychoticism (Psych); and three global indices of distress: Global Severity Index (GSI), Positive Symptom Distress Index(PSDI), and Positive Symptom Total (PST). Internal consistency and reliability for the nine dimensions ranged from 0.71 on Psychoticism to .85 on Depression. Test-retest reliability for the nine symptom dimensions ranges from 0.68 on Somatization to 0.91 on Phobic Anxiety. This inventory indicates both global levels of distress as well as nine separate indices of varying psychological distress. Derogatis (1983), however,

suggested that GSI is the single best indicator of current distress levels and should be utilized where a single measurement is required.

In fact, Thau (2007) used only GSI to measure distress with $\alpha = 0.78$ in her study is largely utilized to measure psychological distress including PTSD in refugees. The BSI has been validated by the study of Iwamasa and Harold (1995) who have examined the influence of the level of acculturation on the reporting of distress on the BSI among Asian, Asian- American, and European college students. The GSI's internal consistency was established with Cronbach alpha coefficients ranging from 0.71 to 0.85 (Derogatis, 1993). In this study, The Global Severity Index (GSI) and nine symptoms were used to assess level of psychological distress.

Davidson Trauma scale (DTS)

DTS (Davidson, 1997) is composed of 17 items corresponding to each of the 17 DSM-IV symptoms. Items 1-4, 17: intrusive reflection-experiencing (criteria B); items 5-11: avoidance and numbness (criteria C); items 12-16: hyper-arousal (criteria D). The participants rated each item with reference to both frequency and severity during the previous week on a 5-point (0–4) scale for a total possible score of 136. For instance: “Have you ever had distressing dreams of the event?” Subscale scores can be computed separately for frequency and severity (Davidson et al, 1997). The DTS has been found to have both internal consistency (Cronbach $r = 0.99$) and test–retest reliability ($r = 0.86$) and was validated in the Chinese version of the Davidson Trauma Scale with internal consistency (Cronbach $\alpha = 0.97$) and test–retest reliability ($r = 0.88$) (Chen and colleges, 2001).

Analytic methods

First of all, for quantitative analysis, the latest version of SPSS V.21 was used to analyze data. Frequency and descriptive analyses were conducted with regard to social demographic information. Cronbach alpha were examined to test the internal consistency and reliability of the scales and items related. After checking the assumptions of the distributions, correlation analyses were performed in terms of the criterion of the outcome variables. As Tabachnick and Fidell (2001) asserted that correlation is used to measure the association between variables.

Phase II: The Anthropological archetypal test with nine elements (AT.9)

Participants

In the second phase, participants were asked to make a drawing featuring nine symbolic elements (i.e. a fall, a sword, a refuge, a monster, something cyclical, a person, water, an animal and a fire; Durand, Y. 2005), to give an explanation of the drawing and to answer a set of questionnaires related to the drawing. Out of 32 participants who completed the AT9 test, one participant did not meet the test's requirement. We therefore removed this participant's information from the AT9 results. Therefore total participants doing the AT9 were 31: males: n = 14 (43%); female: n = 18 (56%); age ranged from 23 to 65 (M = 41.4, SD = 12.4); years in Canada ranged from 6 to 32 (M = 23.8, SD= 5.6); coming to Canada by boat: n = 17 (53.1%), by flight: n= 12 (37.5%), other: n = 3(9.4%).

Procedure

Using the returning form of participant recruitment as ground, the principal researcher contacted the willing participants to inform them how and where to do the AT.9 test. After arranging the convenient time with the participants to come Saint Paul University for completing the survey, the principal researcher let them know that her thesis advisor and four research assistants were available in the conducting research room at Saint Paul University to answer any questions regarding the AT.9 test. It took participants approximately 30 to 45 minutes to complete the AT.9; we then debriefed how they felt during and after doing the survey.

Measurement

Using the Anthropological Structures of the Imaginary as basis, Yves Durand (2005) developed an archetypal test comprised of a drawing that tells a story, using nine universal symbolic elements (Durand, 2005) to measure the structures of the imaginary. The AT9 uses the

drawing and narrative process, according to a strict protocol and with the following instructions: “Tell a story by drawing the following elements: a fall, a sword, a refuge, a devouring monster, something cyclical, a character, water, an animal, and fire” (Durand, 2005). Depending on how these elements are assembled to create a unified drawing and story, it indicates the category into which the individual’s imaginary falls: heroic, mystical, DUEX (double existential containing both heroic and mystical elements), synthetic (symbolically integrated), or non-structured. On a sheet of paper, the participant is asked to draw, and later, to compose a written narrative of the drawing (i.e. “what happens in the drawing?”). The interpretation of the AT9 is primarily grounded on the manner in which the “dramatic-design story” is organized, and secondly, on how the elements are structured (Durand, 2005, p.21-22). Bellehumeur et al. (2013) have developed the synthetic value index (SVI) to measure, at a quantitative level, the relationship between an imaginary category and other continuous variables. It was measured as the following: 1 = unstructured category; 2 = heroic; 3 = mystical; 4) DUEX (called double universal existential containing both heroic and mystical components); and 5) synthetic category (a more symbolically elaborated one).

Analytic method

The archetypal test with nine elements (AT9) was analyzed according to the Manual for categorizing the participant’s imaginary (Une Technique d’étude de L’imaginaire: L’AT.9. Durand, 2005) with the following steps: 1) paying attention on the character (one of nine elements) in the drawing to see the state of being (fighting or resting or playing, etc.); 2) observing how other eight elements organized themselves surrounding this personage (ie., related or isolated); 3) reading carefully the story where participants explained how the drawing

is made (i.e. coherent, creative, passive or negative); 4) finally, paying attention on the information where participants provided regarding symbols and functions of nine elements in his/her drawing.

To enhance an objective interpretation of the results, the analyzing process was carried out by the principal researcher, her thesis advisor and two research assistants in an M.A program in Counselling and Spirituality. Particularly, 12 out of 31 participants did the test in Vietnamese; then back to back translation was proceeded.

These researchers studied first the participants' AT.9 independently, then classified the participant' type of imaginary according to Durand's manual (2005). Afterwards, they met to discuss their choices (an approximate total inter-rated reliability of about 75%). The synthetic values were re-coded according to a four point Likert scale, on which the lowest scores (1) on SVI responded to un-structured categories and the highest scores (4 and 5) on SVI demonstrated higher synthetic ability (Bellehumeur et al. 2013). Then ANOVA, post hoc tests and correlation analysis were used to examine the relationships between the imaginary categories with regard to God Images, emotional distress and resilience responding to the hypotheses three to five.

Phase III: Qualitative Study

This study adopted a qualitative interview to further understand participants' in-depth experience of God, of loss, of resilience and the contexts in which they experienced it (Creswell, 2007). Among various theories proposed to conduct a qualitative study such as narrative study (focusing on the life of an individual), grounded theory (developing a model/theory for studies of phenomena), a psychological phenomenological method was used as a guideline for the current study since its main goal is not only to focus on discovering the meaning of people's experience

of a phenomenon and the context in which these experiences take place, but also to provide a space for result validation (Creswell, 2007, p.95). The next section will present briefly a description of the participants, a semi-structured interview for gathering data and a qualitative research question.

Participants for qualitative interview

After reading the consent form for the study (See appendix C) and the study advertisement (see appendix B) posted in the bulletin of Our Lady of Lavang Church, Ottawa, eight participants who voluntarily participated in the interview were first and second generation immigrants, aged 20 to 56 (5 males and 3 females); six have been living in Canada for at least 27 years, and two were born in Canada; one with a PhD degree, and the rest with a Bachelor degree (see chapter 4, table 19). By adopting a qualitative study for this mixed method research, we attempt to uncover the structure underlying the experiences of four participants with negative God image and of another four with positive God image. According to Creswell (2007, p.61), interviewing from 5 to 25 participants is appropriate for a study of a phenomenon. The information on the selection of participants for the interview was discussed in the previous section.

Semi-structured interview

A semi-structured interview with fourteen open-ended questions (see the appendix I) was used to gather data relating to the research interest. Bernard (1988) found that semi-structured phenomenological interviews permit interviewers to be prepared ahead of time and can provide reliable, comparable qualitative data in terms of their nature (David, & Sutton, 2004); they also allow participants the freedom to express their views on their own terms. In this regard, participants were asked how they would describe their experiences of loss, of God images and of

resilience. For instance, firstly what they experienced when leaving Vietnam; what they experienced upon losing their loved ones in the course of their migration journey and living in host countries. The second part explored what they experienced of God when coping with adversity. Finally, participants were asked what sorts of strength helped them find meaning and become resilient.

The qualitative research questions

1. What was it that gave you strength?
2. Who was God for you in all your troubles? What sustains you through these?
3. What gave you hope when coping with the most difficult loss?
4. How do you find comfort in your suffering? How did you experience some moments of joy despite losing your loved one? When?
5. How does life seem to you right now? Where do you find your inner strength?
6. In what way does your life matter? What is your best sense as to what your life is about and how this loss fits into it? For what are you most deeply grateful?

The interview took place in the researcher's home office which the participants had chosen for greater privacy and confidentiality. The time taken for interviews varied from one hour to two and a half hours. In order to encourage comfortable self-disclosure, the interviews were conducted in English for the second generation immigrants and in Vietnamese for the first generation. The six interviews in Vietnamese for the first generation were translated into English using back- to- back translation methods. The interview questions were composed after the pilot study by the principal researcher in consultation with an emeritus Ethics professor (see the appendix H). At the conclusion of the interview, the participant was given the opportunity to

suggest anything that had facilitated experiences of God, of loss and of resilience that had not been covered.

Analytic method

All interviews were audio-taped, translated, and transcribed directly from Vietnamese into English with the participants' consent, using the back-translation methods described by Ryan, Mui, and Cross (2003). Participants' texts were analyzed to find significant statements, clusters and emerging themes and then the essence of the phenomenon. To minimize bias, the principal researcher invited two trained research assistants in the M.A program in Counselling and Spirituality to read through the eight participants' stories (i.e. interview transcription) independently to find the significant statements, clusters of meaning (meaning units), emerging themes, and finally the essence underlying the experience of the phenomenon. This involved reading and rereading each transcript until the essences of common data were identified. These were then grouped into categories of similar data, which informed the development of themes. During this process, the principal researcher discussed developing themes with participants to ensure credibility and encourage them to give feedback (see results in chapter 4). In the meeting to finalize themes, the thesis director was also invited to participate with the two research assistants and the principal investigator; in this meeting the participants' significant statements, themes and the essence of the phenomenon were discussed (Creswell, 1998).

CHAPTER IV

RESULTS

Phase I: Quantitative findings

4.1. Characteristics of participants

A more comprehensive description of the demographic information is presented below to complete basic information provided in the section on methodology. The following information refers to religion/ spirituality (cf. God images), loss (cf. experiences of distress) and feelings related to resilience since these are closely related to the variable being studied. Table 2 reported participants' information on religious/ spiritual background.

Table 2. Frequency distribution: religion/spirituality

Religion	Catholicism	117(90.7 %)
	Protestantism	7 (5.4 %)
	Judaism	2 (1.6 %)
	Atheist	3 (2.3 %)
Spiritual/Religious Considerations	Religious	80 (62.0 %)
	Cosmic	32 (24.8 %)
	Social	7 (5.4 %)
	Self-transcendent	3 (2.3 %)
	Atheist	7 (5.4 %)
Religious Practice	Daily	68 (52.7 %)
	Once a week	51(39.5 %)
	Once a month	7 (5.4 %)
	A few times a year	3 (2.3 %)

Note. N = 129

Experience of loss was assessed through three socio-demographic questions: 1). Reasons for leaving Vietnam; 2). Types of transportation to Canada; and 3). Feelings when leaving Vietnam. See table 3 for more information.

Table 3. *Demographic information on experience of loss*

		Frequency	Percent
Reasons for Leaving VN	War	3	2.3 %
	Communist Regime	51	39.5 %
	Family Reunion	44	34.1 %
	A Better Life	22	17.1 %
	Other	9	7.0 %
Means of Coming to Canada	Boat	48	37.2 %
	Flight	65	50.4 %
	Other	16	12.4 %
Feelings When Leaving VN	Sad	40	31.0 %
	Lost	27	20.9 %
	Threaten	6	4.7 %
	Happy	34	26.4 %
	Excited	15	11.6 %
	Born in Canada	7	5.4 %

Note. $N = 129$.

Levels of resilience were also revealed partially in participants' demographic responses in terms of their feelings at present. In fact, 72 participants (56%) reported feeling pleased, 42 participants (33%) reported feeling excited, 11 participants (9%) reported feeling lonely, 3 participants (2%) reported feeling sad and 1 participant (1%) feeling threatened. However, when it came to the question on ability to make a change, 69 participants (53%) said "yes", 42 participants (33%) said "no", 18 participants (14%) were not sure.

4.2. Instrument reliabilities

First of all, reliability analysis was used to examine the internal consistency of the questionnaire: QGI's Cronbach Alpha in this study was $\alpha = .87$ for *positive feelings of God* with 9 items, i.e. love, affection, security ($\alpha = .93$ in the study of Jonker et al, 2008); and $\alpha = .79$: *negative feelings of God* with 5 items (i.e. disappointment, anger, uncertainty, fear of being punished, dissatisfaction). *Positive perception of God*: $\alpha = .94$ ($r = .94$ in the study of Schaap-Jonker, 2008) for supportive actions of God with 10 items (i.e. God gives me strength); $\alpha = .67$ ($\alpha = .79$ in the study of Schaap-Jonker, 2008) for ruling/punishing GI with 4 items (i.e., God

punishes, exerts power); and $\alpha=.64$ ($\alpha = .71$ in Schaap-Jonker, 2008) for passivity with 2 items (ie., God lets everything take its course). The above findings were then sent to Dr. Schaap-Jonker, University Groningen, the Netherlands, the author of the QGI to consult her opinion on the reliability of the questionnaire and the most reliable three subscales: 1) ***Positive Feelings of God*** ($\alpha =.87$); 2) ***Positive Perception of God*** ($\alpha =.94$); and 3) ***Negative Feelings of God*** ($\alpha = .79$) were recommended. Table 4 shows the correlation between these three sub-scales.

Table 4. Relationships between QGI Dimensions

Variables	1	2	3
Positive Perception of God	1		
Positive Feelings of God	.83**	1	
Negative Feelings of God	-.41**	-.45**	1

** $p<.01$, two-tailed.

Second, Connor-Davidson Resilience Scale (CD-RISC) was adopted to measure resilience. Total possible score on the measure ranges from 0 to 100 with greater resilience reflected in a higher score. Normative mean scores ranged from 47.8 for PTSD patients to 80.4 for individuals in the general population (Connor- Davidson, 2003). Mean scores on the CD-RISC for this study ranged from 39 to 99 indicated the Vietnamese sample has reached a significant level of resilience compared to Connor-Davidson's study (2003). The Cronbach Alpha for total four subscales in this study was $\alpha = .87$ ($\alpha = .89$ in the study of Singh and Yu). The results from Bi-variate Correlation show a strong relationship among CD-RIS's 4 subscales and total scores of CD-RES. (See Table 5).

Table 5. Correlations for the subscales of CD-RISC

	1	2	3	4	5
Self-efficacy	1				
Adaptation	.75**	1			
Resourcefulness	.56**	.66**	1		
Purpose	.61**	.57**	.59**	1	
Total scores of resilience	.88**	.89**	.82**	.80**	1

** . $p < .01$, two-tailed ; $N = 129$

Third, the Brief Symptom Inventory (BSI) was used to measure participants' level of distress. In this study, the results of T-scores ranged from 27 to 91 ($\alpha = .83$) for *Somatization*, from 26 to 81 ($\alpha = .86$) for *Obsessive Compulsive*, from 28 to 82 ($\alpha = .81$) for *interpersonal sensitivity*, from 30 to 89 ($\alpha = .73$) for *depression*, from 32 to 91 ($\alpha = .87$) for *anxiety*, from 28 to 92 ($\alpha = .77$) for *hostility*, from 31 to 95 ($\alpha = .82$) for *phobic anxiety*, from 26 to 90 ($\alpha = .86$) for *paranoia*, from 28 to 83 ($\alpha = .88$) for *psychoticism* and from 26 to 93 ($\alpha = .95$) for *GSI*. In this study, Cronbach Alpha of nine symptoms and GSI yielded a stability coefficient of .96 ($\alpha = .90$ in the study of Derogatis, 1993). Derogatis (1997) noted that once T-scores reached the point of 63, they took on clinical significance. Unusual low T-scores would be 30 or less.

Fourth, Davidson Trauma Scale (DTS) were utilized to measure participants' traumatic experiences. Reliability analysis was used to test DTS's coefficient of internal consistency. The coefficient of 17 items was $\alpha = 0.94$ ($\alpha = .99$ in the study of Davidson et al, 1997). The Cronbach alpha of frequency items was .88 ($\alpha = 0.97$ in the study of Davidson et al, 1997) and of severity items was .90 ($\alpha = .98$ in the study of Davidson et al, 1997). In this study, the findings for Intrusion Subscale $\alpha = .80$ (ranged from 0 to 27 with a mean of 6.32, SD = 6.28); Hyper-arousal Subscale $\alpha = .87$ (ranged from 0 to 27 with mean of 7.68, SD = 6.98) and Avoidance Subscale $\alpha = .89$ (ranged from 0 to 34 with mean of 7.76, SD = 7.84) which demonstrated a higher level of avoidant symptoms compared to the above Intrusive and Hyper-arousal subscales.

4.3. Descriptive statistics of the variables

The overall means, standard deviation, skewness and kurtosis for the variables measured in the study are presented in Table 7. Data were also tested to see levels of skewness (i.e. asymmetry of the distribution) and kurtosis (i.e. flatness or peakedness of distribution). According to Kline (2005), the appropriate ranges for skewness are ± 3 , and for kurtosis are < 8 . These values are reported in Table 6, and are satisfactory for each subscale of the study.

Table 6 Descriptive Statistics for All Subscales of the Study

Subscales	Mean	SD	Skewness	Kurtosis
PFG	39.0	6.3	-1.7	4.2
PPG	44.9	7.3	-2.0	4.4
NEGI	16.3	5.9	.7	.1
SE	19.4	4.3	-.2	-.2
ADA	20.2	4.0	-.5	-.1
RES	19.3	3.4	-.8	.8
PUP	14.4	3.3	-.3	-.3
SOM	1.6	.69	.8	1.6
O- C	2.0	.82	.4	.5
I-S	1.8	.84	.8	.8
DEP	1.5	.76	1.7	3.2
ANX	1.6	.70	1.1	2.2
HOS	1.6	.71	1.1	3.0
PHOB	1.5	.77	1.3	3.4
PAR	1.7	.68	.9	2.1
PSY	1.6	.73	.8	.9
GSI	1.6	.62	1.0	2.5
INT	6.3	6.3	1.1	.8
AV	7.8	7.8	1.1	.7
VIG	7.7	7.0	.7	-.4

Note. PFG= Positive feelings of God; PPG= Positive perception of God; NEGI= Negative God image; SE=Self efficacy; ADA= Adaptation; RES=Resourcefulness; PUP=Purpose; SOM= Somatization; O- C= Obsessive Compulsive; I-S= Interpersonal Sensitivity; DEP= Depression; ANX= Anxiety; HOS=Hostility; PHOB= Phobia; PAR=Paranoia; PSY=Psychoticism; GSI= Global symptom index; INT = Intrusion; AD= Avoidance; VIG= Vigilance.

Hypothesis 1a: The higher the positive God image, the lower the levels of emotional distress.

Pearson correlation was conducted to measure the relationship between Positive God Image (measured by PFG and PPG) and distress (measured by BSI with 9 subscales: Somatization, Obsessive compulsion, Interpersonal sensitivity, Depression, Anxiety, Hostility, Phobic, Anxiety Paranoia, Psychoticism, GSI; and DTS with 3 subscales: Intrusion, Avoidance,

vigilance). The results showed that there was only a significant negative relationship between PPG and three domains of health outcomes: somatization ($r = -.191$, $p < .05$), anxiety ($r = -.176$, $p < .05$), and hostility ($r = -.224$, $p < .05$). Table 7 indicated that positive perception of God is significantly negatively associated with lower score of BSI with regard to somatization, anxiety and hostility. No relationship between PFG and subscales of BSI and DTS was demonstrated.

Table 7. Correlations between Positive God Image and three subscales of BSI

	1	2	3	4	5
PPG	1				
PFG	.83**	1			
SOM	-.19*	-.12	1		
ANX	-.17*	-.12	.76**	1	
HOS	-.22*	-.13	.62**	.71**	1

** $p < 0.01$, 2-tailed; * $p < 0.05$, 2-tailed. PFG= Positive feelings of God; PPG= Positive perception of God; SOM= Somatization; ANX= Anxiety; HOS=Hostility.

Hypothesis 1b: The higher the scores on negative God Image, the higher the levels of emotional distress.

Using Pearson correlation, the results demonstrated that NGI was significantly positively correlated with 13 subscales of BSI and DTS. Yet, NGI was not significantly correlated with somatization (see Table 8).

Table 8. Bi-variate Correlations between Negative God Image and Distress

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
NGI	1													
SOM	.16	1												
O-C	.25**	.67**	1											
I-S	.290**	.52**	.83**	1										
DEP	.31**	.52**	.70**	.73**	1									
ANX	.29**	.76**	.80**	.74**	.70**	1								
HOS	.23**	.62**	.75**	.72**	.74**	.71**	1							
PHOB	.19*	.69**	.71**	.65**	.56**	.64**	.62**	1						
PAR	.22*	.53**	.77**	.80**	.68**	.69**	.76**	.66**	1					
PSY	.30**	.65**	.80**	.74**	.82**	.74**	.78**	.75**	.78**	1				
GSI	.29**	.78**	.91**	.86**	.85**	.88**	.85**	.82**	.84**	.91**	1			
INTR	.24**	.30**	.29**	.27**	.22*	.30**	.22*	.28**	.27**	.32**	.32**	1		
AV	.40**	.33**	.32**	.30**	.28**	.34**	.21*	.22*	.26**	.37**	.36**	.57**	1	
VIG	.31**	.37**	.36**	.34**	.31**	.35**	.31**	.25**	.27**	.38**	.43**	.52**	.70**	1

**** $p < 0.01$; * $p < .05$, 2-tailed. ; NEGI= Negative God image; SOM= Somatization; O- C= Obsessive Compulsive; I-S= Interpersonal Sensitivity; DEP= Depression; ANX= Anxiety; HOS=Hostility; PHOB= Phobia; PAR=Paranoia; PSY=Psychoticism; GSI= Global symptom index; INT = Intrusion; AD= Avoidance; VIG= Vigilance.**

Hypothesis 2a: The higher the positive God image, the higher the level of resilience

Pearson correlation was used to measure the relationship between PGI (PFG & PPG) and resilience. The results demonstrated a strong positive significant association between PPG, PFG and Resilience with its three subscales, except for Self-efficacy subscale. See Table 9.

Table 9. Correlation between PGI and CD-RISC

	1	2	3	4	5	6	7
PPG	1						
PFG	.83**	1					
SE	.14	.15	1				
ADA	.26**	.29**	.75**	1			
RES	.45**	.43**	.56**	.66**	1		
PUP	.26**	.27**	.61**	.57**	.59**	1	
RESI	.32**	.33**	.88**	.89**	.82**	.80**	1

** $p < 0.01$, 2-tailed); Listwise $N=128$; PPG= Positive Perception of God; PFI = Positive Feelings of God; SE=Self efficacy; ADA= Adaptation; RES=Resourcefulness; PUP=Purpose; RESI= Resilience (global score).

Additional Hypothesis 2b: The higher the level of negative God image, the lower the level of resilience

The Pearson Correlation results showed a strong negative relationships between NFGI total scores of resilience and its 4 sub-scales: total scores of resilience ($p < .01$); Sef-efficacy/ Hardiness ($p = < .01$); Adaptability/ Optimism ($p < .01$); Resourcefulness/Spirituality ($p = < .01$); and Purpose ($p < .01$). This indicates that the lower scores on NGI significantly associate with higher scores on Resilience (See Table 10).

Table 10. Bi-variate Correlations between the NGI and CD-RIS

	1	2	3	4	5	6
NEGI	1					
SE	-.29**	1				
ADA	-.30**	.75**	1			
RES	-.33**	.56**	.65**	1		
PUP	-.31**	.61**	.57**	.59**	1	
RES	-.36**	.88**	.89**	.81**	.80**	1

** $p < 0.01$, 2-tailed.

Phase II: The anthropological findings

Participants

Total participants doing the AT9 were 31: males: $n = 14$ (43%); female: $n = 18$ (56%); age ranged from 23 to 65 ($M = 41.4$, $SD = 12.4$); years in Canada ranged from 6 to 32 ($M = 23.8$, $SD = 5.6$); coming to Canada by boat: $n = 17$ (53.1%), by flight: $n = 12$ (37.5%), other: $n = 3$ (9.4%).

Frequency distribution of the category of the imaginary

Table 11 shows the frequency distribution of the participants' main categories of the imaginary in the current study: 1) heroic ($n=2$; 6.5%); 2) mystical ($n=6$; 19.4%); 3) DUEX (containing both heroic and mystical components: $n = 9$; 29%); 4) synthetic (being able to integrate diversity: $n=9$; 29%); and 5) unstructured ($n=5$; 16.1%).

Table 11. Frequency distributions of participants' main categories of the imaginary

	<i>Frequency</i>	<i>Percent</i>	<i>Valid Percent</i>
UNST	5	15.6	16.1
HE	2	6.3	6.5
MY	6	18.8	19.4
DUEX	9	28.1	29.0
SYN	9	28.1	29.0
Total	31	96.9	100.0
Missing System	1	3.1	
Total	32	100.0	

Note. N = 31; UNST = un-structured; HE = heroic; MY = mystical; DUEX = double universal existential (containing both heroic and mystical components); SYN = higher synthetic value (symbolically elaborated).

Some selected examples with explanatory drawings are provided below as illustrations for each category of the imaginary.

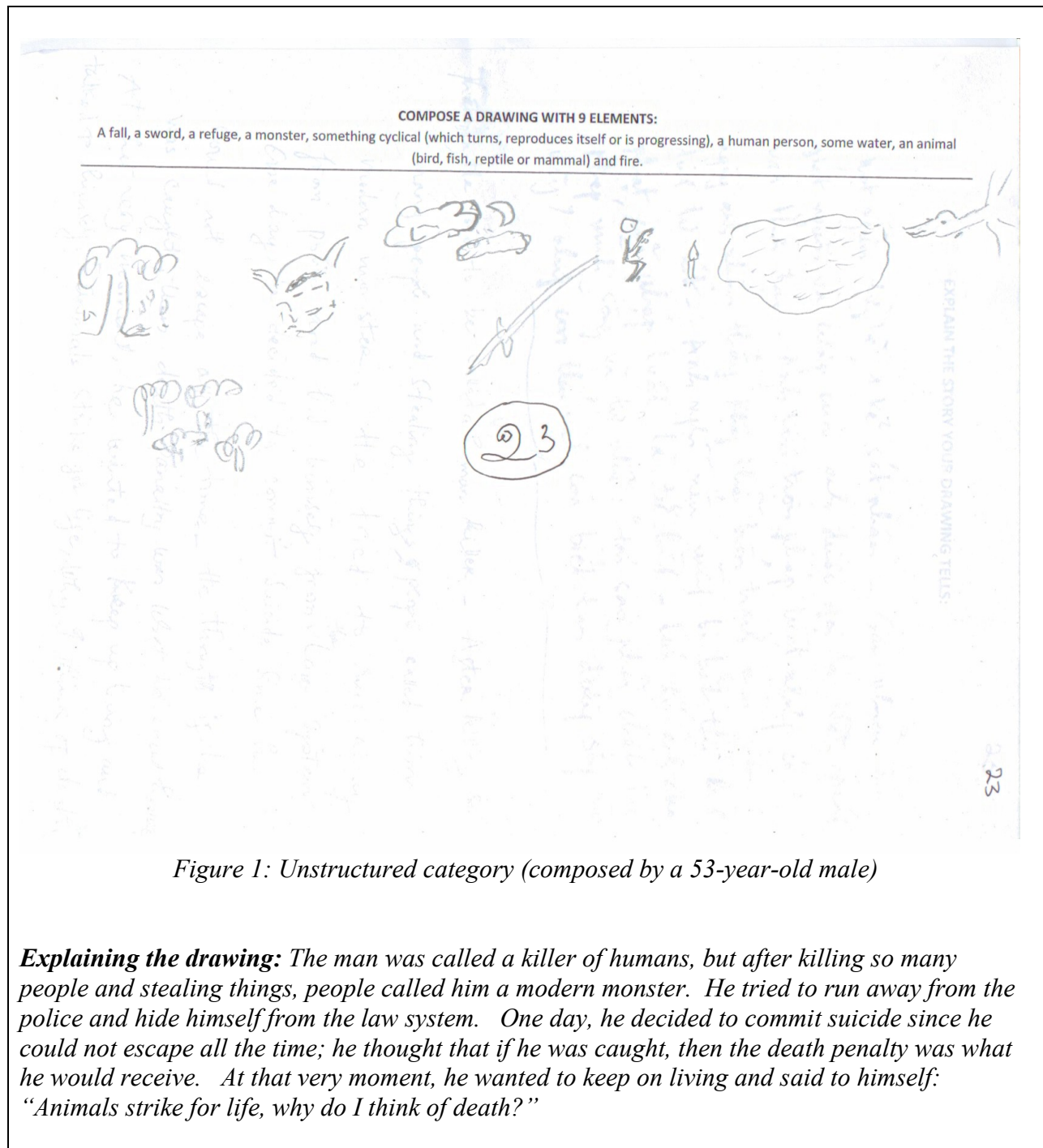


Figure 1: Unstructured category (composed by a 53-year-old male)

Explaining the drawing: The man was called a killer of humans, but after killing so many people and stealing things, people called him a modern monster. He tried to run away from the police and hide himself from the law system. One day, he decided to commit suicide since he could not escape all the time; he thought that if he was caught, then the death penalty was what he would receive. At that very moment, he wanted to keep on living and said to himself: "Animals strike for life, why do I think of death?"

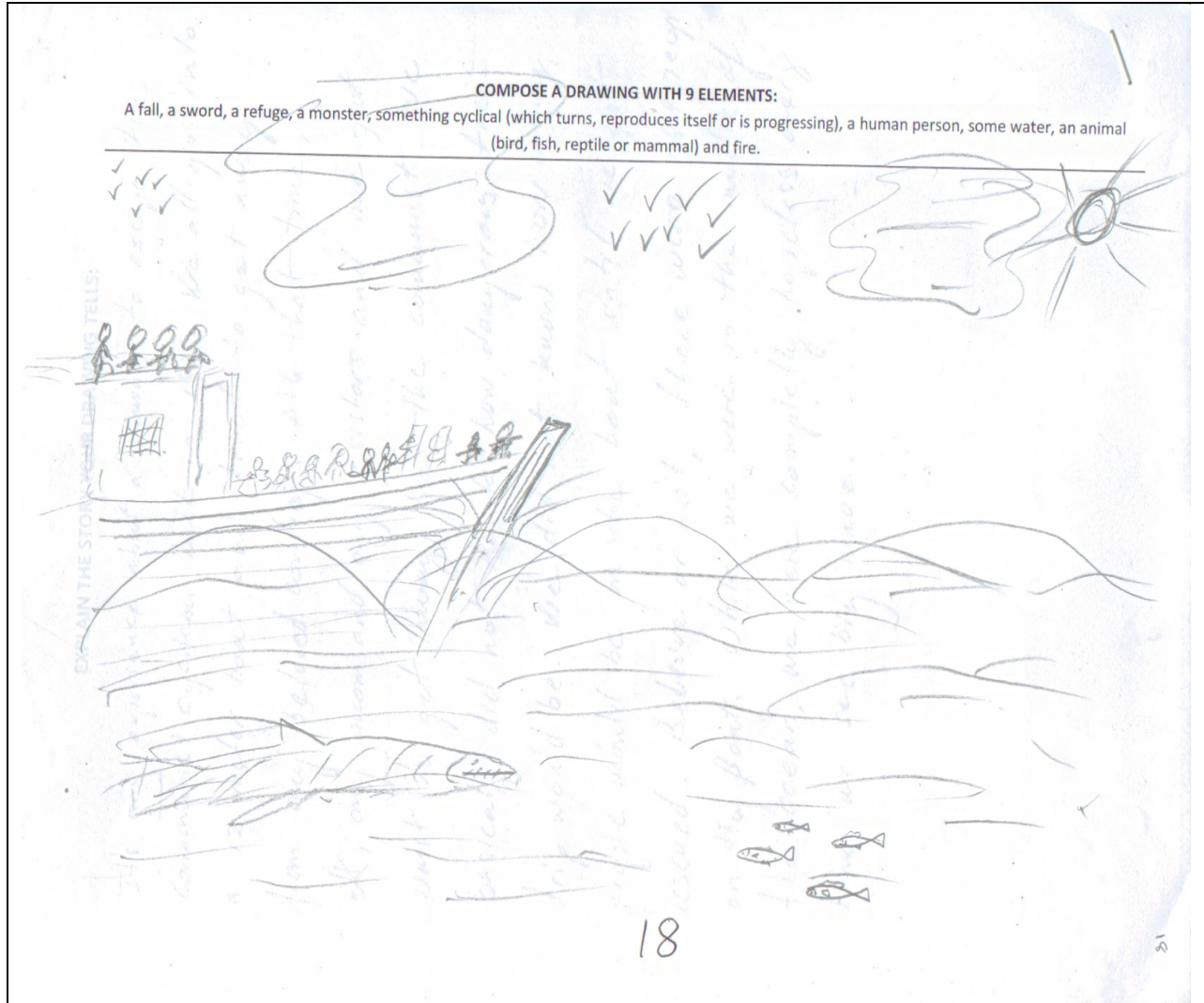


Figure 2: Heroic category (composed by a 47 year-old male)

Explaining the drawing: It is my experience about a journey to escape the communist system back in 1981. We all got into a 12- metre boat and tried to get away from my beloved country. Believe or not, there were 149 people on the boat.

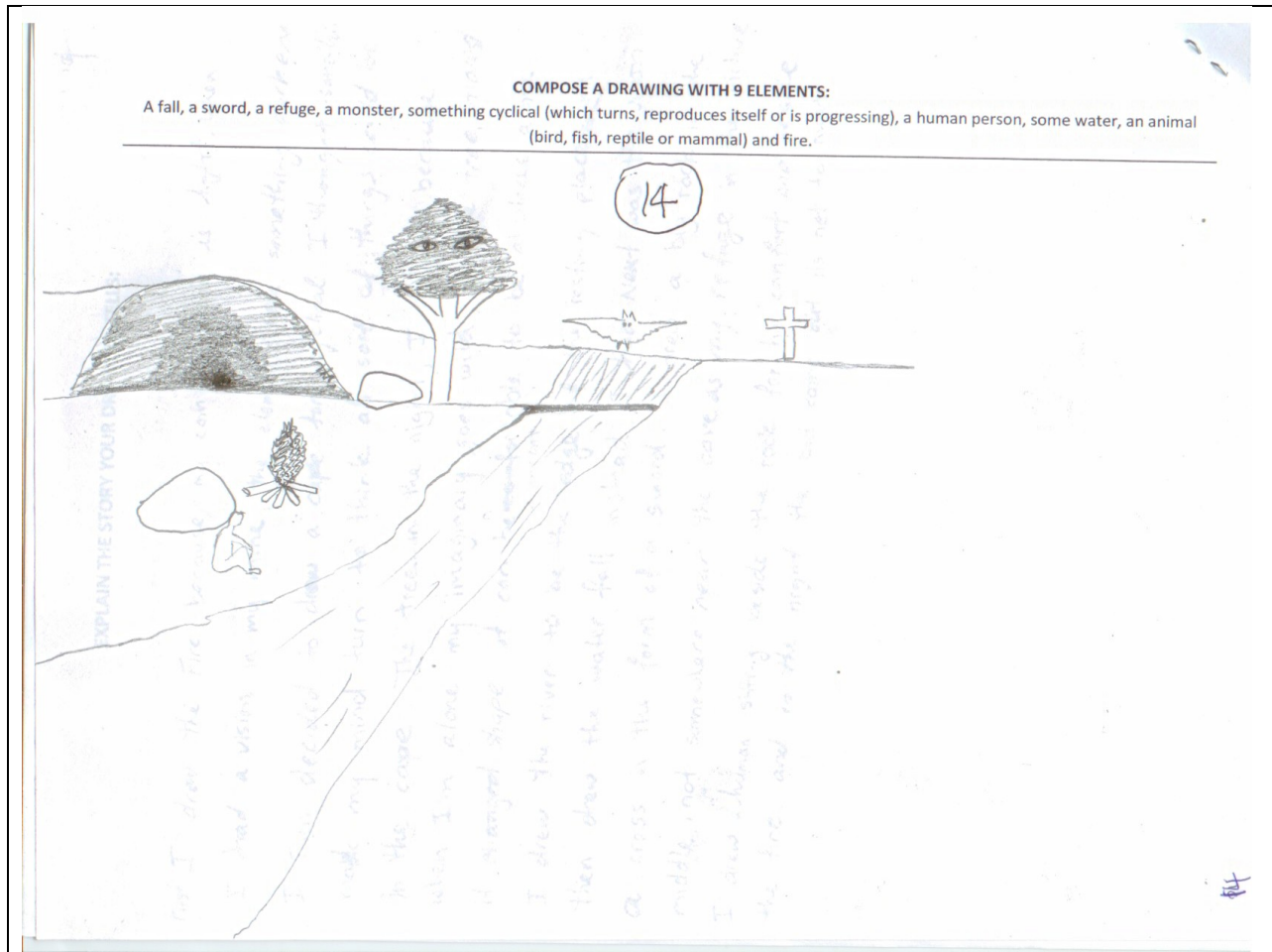


Figure3: Mystical category (composed by 24 year-old male)

Explaining the drawing: I drew the fire because my comfort zone is light; when I had a vision in my mind, the elements we something darkened. I then decided to draw a cape for cyclical since I thought something made my mind turn to think all sort of things could be in the cave. The tree in the night, I drew it because when I am alone, my imagination goes wild, so the tree moved its shape. It can be uncomfortable to be at those places alone. I drew the river to be the edge of the resting place and then the water fall instead. I had the vision of a cross in the form of a sword. I drew a big rock in the middle, not somewhere near the cave as my refuge in the picture and a human sitting beside the rock for his comfort and beside the fire and in the night the bat came out its nest to hunt.

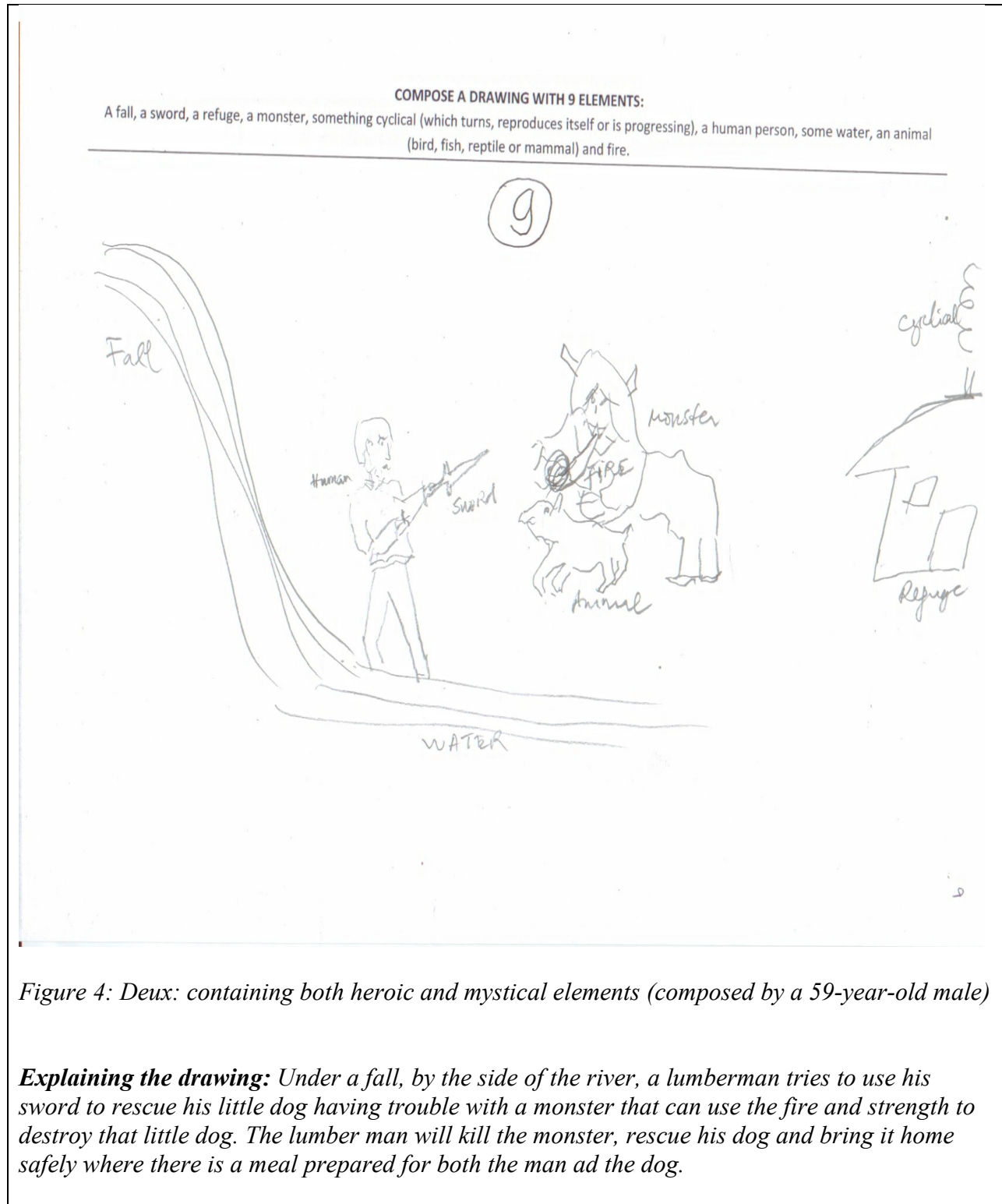
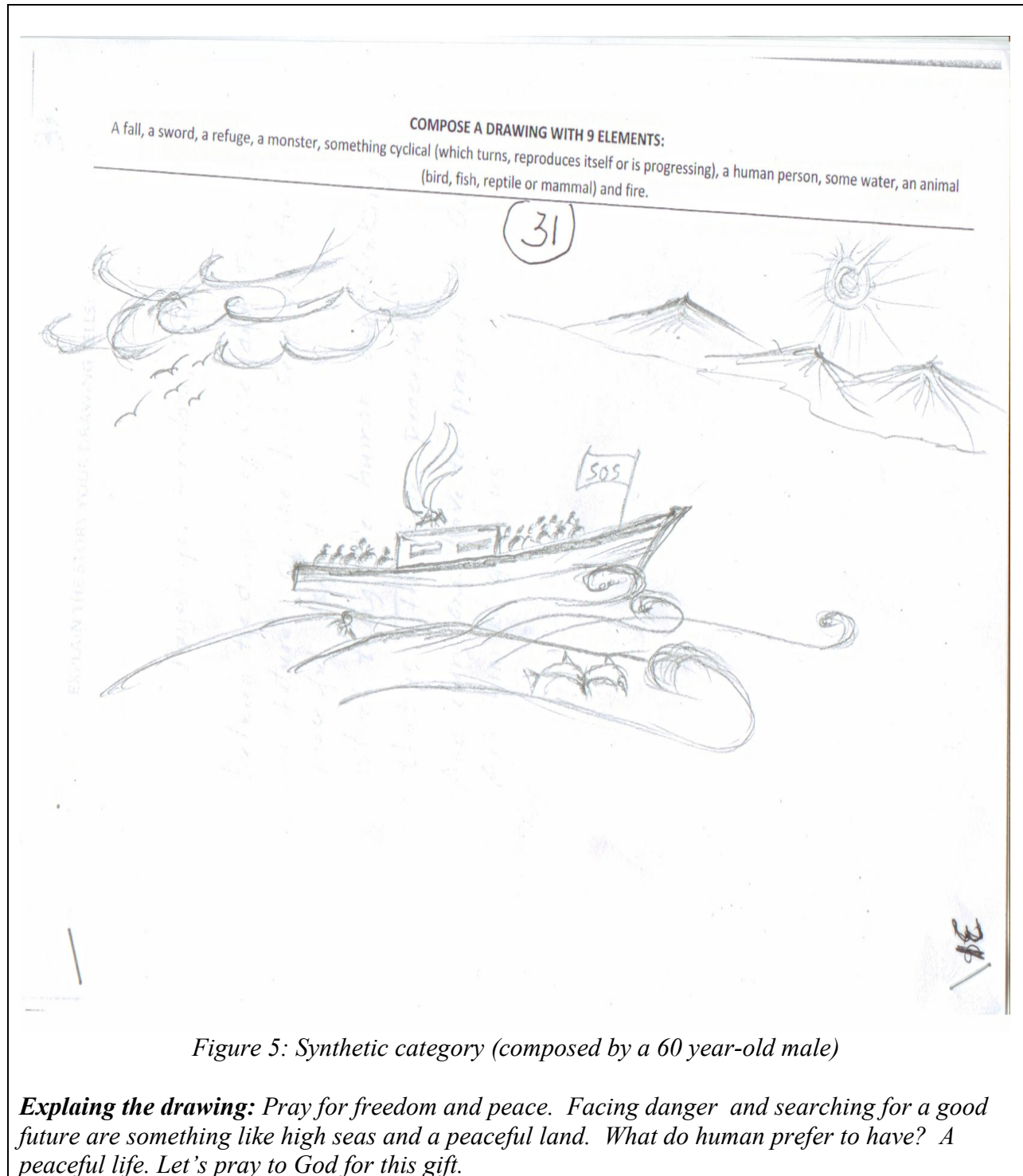


Figure 4: Deux: containing both heroic and mystical elements (composed by a 59-year-old male)

Explaining the drawing: Under a fall, by the side of the river, a lumberman tries to use his sword to rescue his little dog having trouble with a monster that can use the fire and strength to destroy that little dog. The lumber man will kill the monster, rescue his dog and bring it home safely where there is a meal prepared for both the man and the dog.



Hypothesis 3: The stronger the positive God image, the more likely to observe the synthetic category of the imaginary.

The synthetic values then were re-coded according to a four point Likert scale on which the lowest scores on SVI responded to un-structured categories and the highest scores on SVI demonstrated a more elaborated imaginary (i.e. synthetic category). Bi-variate correlation was conducted to test the relationship between SVI and QGI. 9 items of PFG and 10 items of PPG were entered into correlation analysis together with SVI. The result showed that Synthetic categories had a strong, significant relationship with PFG's three items: when thinking of God, I experience thankfulness ($r = .36, p < .05$), security ($r = .49, p < .005$) and love ($r = .39, p < .03$) and PPGI's five items: God comforts me ($r = .41, p < .02$), gives me strength ($r = .37, p < .04$), lets me grow ($r = .39, p < .03$), is trustworthy ($r = .47, p < .007$) and protects me ($r = .39, p < .03$).

We combined the three items into one subscale named PFG and five items of PPGI into one subscale named PPG. The Cronbach Alpha of PFG was $\alpha = .93$ and PPG was $\alpha = .92$. Then one-way ANOVA was conducted to compare the means difference between the four groups of imaginary category in relation to PGI. The four groups were ranged from low to high level, 1) *unstructured* ($n=5$) mythical category, 2) polarized mythical universe ($n = 8$: heroic ($n=2$) and *Mystical* ($n=6$)), 3) *DUEX* ($n = 9$), and 4) *synthetic*: more elaborated ($n = 9$). Table 12 shows that there were significant differences between groups for SVI (between the four imaginary categories) in relation to PFG ($p < .05$) and PPG ($p < .05$).

Table 12. ANOVA analysis comparing the mean differences between four groups of AT.9 in relation to PFG and PPG.

		<i>Sum of Squares</i>	<i>df</i>	<i>Mean Square</i>	<i>F</i>	<i>Sig.</i>
PFGI	Between Groups	28	3	9.4	3.0	.047
	Within Groups	84	27	3.1		
	Total	112	30			
PPGI	Between Groups	108	3	36.2	4.4	.012
	Within Groups	224	27	8.2		
	Total	332	30			

* $p < .05$

Post Hoc Tests

Once the ANOVA analysis demonstrated a statistically significant result in this sample (see Table 12), a post hoc test using the Tukey HSD was computed. This test is designed to compare the mean score between the four groups of the imaginary categories in relation to God Images (PFG and PPG). In other words, the post hoc test allows us to know where this effect exists among these groups. Using post hoc ANOVA, two results are worthy to mention. First, participants showing unstructured mythical category (group 1) have a lower level of PFG than those with DUEX categories (group 3) at a slightly marginal significant level ($p = .061$). Secondly, participants with unstructured categories also demonstrate a lower level of PPG than participants in the other mythical categories (for heroic, mystical and DUEX categories) at significant level ($p < .05$). In other words, these results suggest that the more positive the God imagery (for both PFG and PPG), the more likely to observe a more structured categories of the imaginary.

Illustration by the results of the AT.9 Test

A four- point Likert Scale was used as ground to measure synthetic values in which the highest scores corresponded to a more elaborate imaginary category (i.e. synthetic). Then using method of select cases under the condition PPG and PFG ≥ 4 (using 5 point-Likert scale) or SVI

≥ 4 , the SPSS shows 9 cases, namely group I, out of 31 participants where their drawings and storytelling corresponds to the above quantitative in hypothesis 2a. Two examples are presented below as illustrations. For example, *Figure 7* and *Figure 8* clearly illustrate the synthetic category of the imaginary. Both the drawings and the storytelling appear coherent and symbolic in a meaningful manner (i.e. the role of angel, the Holy Spirit in adversity). See the appendix M (group I) for further information.

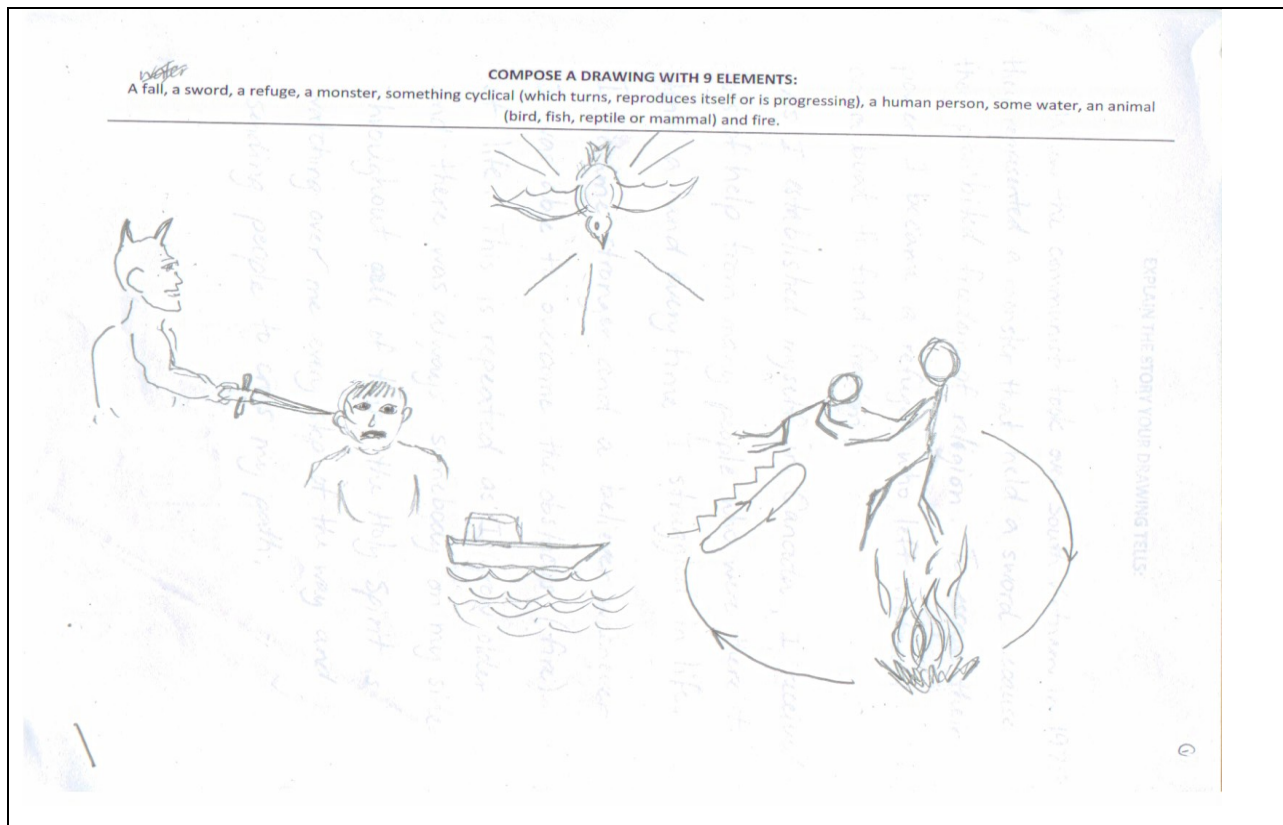


Figure 6: Composed by a 43 year-old Male (case 1)

Explain the drawing: “When the Communists took over the South of Vietnam in 1975. They represented a monster that held a sword because they prohibited freedom of religion. To escape their power I became a refugee who left Vietnam on a boat to find freedom. As I established myself in Canada, I received a lot of help from many people who were there to lend a hand every time I struggled in life. I became stronger and a believer whenever I was able to overcome the obstacles (fire) of life...there was always somebody on my side. Throughout all of this, the Holy Spirit was watching over my every step...and sending people to cross my path.”

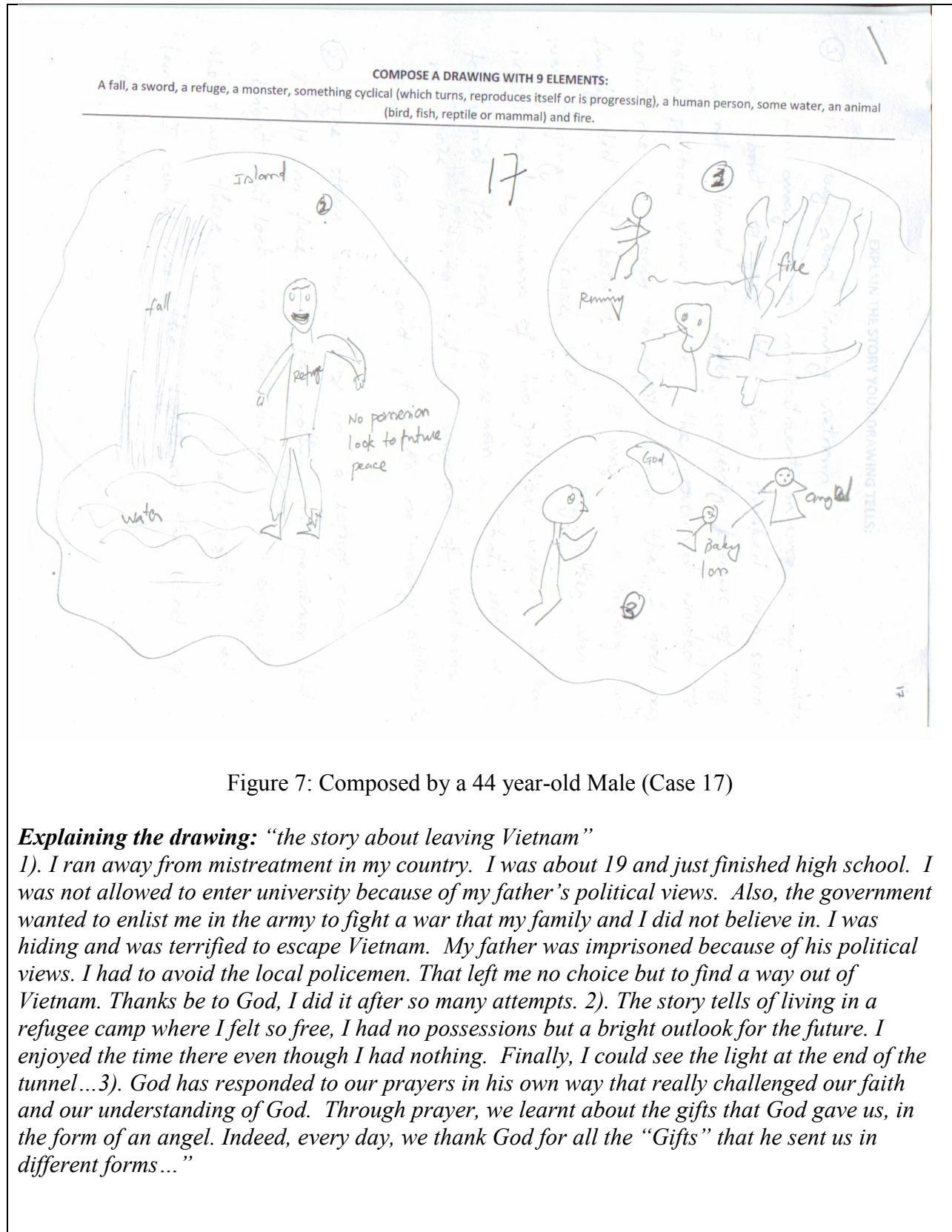


Figure 7: Composed by a 44 year-old Male (Case 17)

Explaining the drawing: “the story about leaving Vietnam”

1). I ran away from mistreatment in my country. I was about 19 and just finished high school. I was not allowed to enter university because of my father’s political views. Also, the government wanted to enlist me in the army to fight a war that my family and I did not believe in. I was hiding and was terrified to escape Vietnam. My father was imprisoned because of his political views. I had to avoid the local policemen. That left me no choice but to find a way out of Vietnam. Thanks be to God, I did it after so many attempts. 2). The story tells of living in a refugee camp where I felt so free, I had no possessions but a bright outlook for the future. I enjoyed the time there even though I had nothing. Finally, I could see the light at the end of the tunnel...3). God has responded to our prayers in his own way that really challenged our faith and our understanding of God. Through prayer, we learnt about the gifts that God gave us, in the form of an angel. Indeed, every day, we thank God for all the “Gifts” that he sent us in different forms...”

Hypothesis 4a: The higher the levels of emotional distress, the less likely to observe the synthetic category of the imaginary.

Pearson correlation was used to examine the relationships between Synthetic values and levels of distress. The results showed a strong negative correlation between Synthetic Values and Somatization ($r = -.51$, $p < .004$); GSI ($r = -.41$, $p < .03$), and vigilance ($r = -.46$, $p < .009$). (See Table 13 and a selected example of AT.9 followed).

Table 13. Bi-variate Correlations between SVI and distress

Variables	1	2	3	4
Synthetic values	1			
Somatization	-.51**	1		
GSI	-.41*	.78**	1	
Vigilance	-.46**	.37**	.43**	1

** $p < 0.01$, 2-tailed; * $p < 0.05$, 2 tailed

Illustration by the results of the AT.9 Test

A four point Likert Scale was used as grounds to measure synthetic categories of the imaginary in which the highest scores correspond to highest levels in the synthetic ability and the lowest scores associated with un-structured category. Then using method of select cases with the condition $SVI < 2$ or T-score $GSI > 65$ (associating with clinical condition, Derogatis, 1993), the SPSS shows 5 cases, out of 31 that have lowest level of SVI where drawings and story telling corresponds to the above quantitative in hypothesis 1b. A selected example is illustrated below. See the appendix M (group II) for further information.

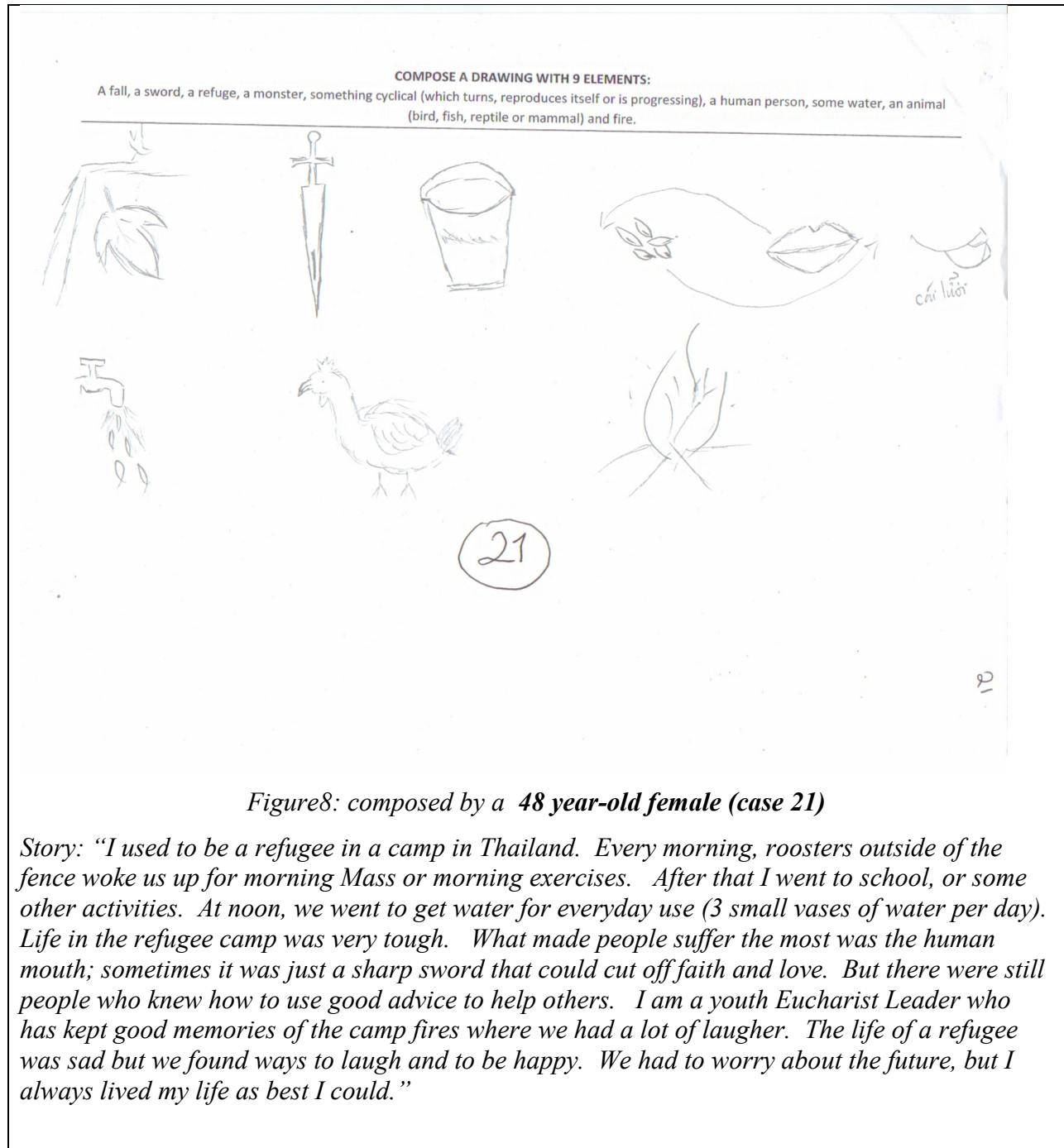


Figure8: composed by a 48 year-old female (case 21)

Story: "I used to be a refugee in a camp in Thailand. Every morning, roosters outside of the fence woke us up for morning Mass or morning exercises. After that I went to school, or some other activities. At noon, we went to get water for everyday use (3 small vases of water per day). Life in the refugee camp was very tough. What made people suffer the most was the human mouth; sometimes it was just a sharp sword that could cut off faith and love. But there were still people who knew how to use good advice to help others. I am a youth Eucharist Leader who has kept good memories of the camp fires where we had a lot of laughter. The life of a refugee was sad but we found ways to laugh and to be happy. We had to worry about the future, but I always lived my life as best I could."

An important point that needs to be taken into consideration is that the nine elements in the drawings of the second group were isolated; the stories also appear passive and disconnected compared to the first group (see appendix M, group 2).

Hypothesis 4b: The lower the resilience, the less likely to observe the synthetic category of the imaginary.

Pearson correlation was conducted to test the relationships. No significant difference was found in the relationships between SVI and total scores of resilience ($r = .32$, $p < .79$) and its 4 subscales. See Table 14.

Table 14. Correlations between SYV and CD-RIS

	1	2	3	4	5	6
SVI	1					
Self-efficacy	.33	1				
Adaptation/Optimism	.25	.74**	1			
Resourcefulness	.20	.62**	.75**	1		
Purpose	.32	.68**	.57**	.66**	1	
Resilience	.32	.89**	.88**	.85**	.83**	1

***** $p < .01$, 2-tailed.***

Further clarification will be derived from the qualitative interviews.

Phase III: Results of Qualitative Study

Table 15. Socio-demographic characteristics of eight participants' in a qualitative interview

Participants	Age	Years in Canada	Current Occupation	Religion	Level of Education
# 1	43(male)	30	Electrical Engineer	Catholic	Bachelor's Degree
# 5	41(female)	27	Child care provider	Buddhist converted to Catholicism	Bachelor's Degree
# 16	44 (male)	27	Engineer	Catholic	Bachelor's Degree
# 29	41(female)	27	Homemaker	Protestant Converted to Catholicism	College
# 33	21(male)	21	Student	Catholic	Undergraduate
# 34	56(female)	33	Professor	Catholic	Post-graduate
# 35	52(male)	31	Computer engineer	Catholic	Bachelor's Degree
# 127	20(male)	20	Student	Catholic	Undergraduate

Thirty-three significant statements were extracted from eight verbatim transcripts. Table 16 shows selected examples of significant statements with formulated meanings.

<i>Table 16 Selected examples of significant statements and related meaning formulated: A qualitative study among Vietnamese immigrants</i>	
Significant statement	Formulated meaning
I remember it was around 5 or 6:00pm, when everyone had gone to church, my dad called me to his bed and hugged me. It was the last time. Dad passed away that same night. I just cried and I did not know what to do.	1. Loss is stressful since it cuts people off from loved ones.
My first crisis was in 1975, the peak moment of the Vietnam War. I witnessed war: naked soldiers running, dead bodies along the road, burning planes, bombing, people sleeping on the seashore. I captured that scenario and have carried it throughout my life. I did not feel afraid but the adults' fear affected me.	2. Loss is traumatizing and distressful since it disturbs people emotionally and psychologically.

Arriving to the island, the terrible crisis was no contact with home; I missed home terribly. There was no way to inform them.	3. Loss is moving away from homeland
My prayer seemed abstract since I did not get what I asked for. God was distant from me. My prayer was to ask God for favours and I did not feel that close to God. I was angry at God since he just appears and disappears.	4. Loss is feeling distant from God and angry at God
In the retreat in Cornwall, I felt a God of love who was waiting for me even if I went prodigal. My God is very personal and touchable and similar to my parents: soft and tender, teaching through events. He is LOVE,	5. God image is similar to parental images which are tender and patient and loving.
Mighty God, Protector and Defender, God is everything and available through real mediators, God shows proof that He is right there. Having God, I fear nothing even in extreme difficulty. God is in my desire to give back to people. If you are close to God, death is only a transition.	6. God image is of an available Protector who gives strength and inspiration.
Faith grows and my God image changes: from God of punishment to God of personal care; God of fear to God of love; God is love and compassion.	7. Experiencing the transformation of one's images of God
Though I am not super religious, I am thankful for everything and believe there is an opportunity for everything. My joy is to sit with my children at the end of Sunday to count my blessings; seeing mountains and birds flying over the ocean...I felt grateful to God.	8. Experiencing gratitude and contentment in life
Reaching out to friends who are dedicated to the organization that helps me a lot [...] my happy moments are to meet new friends in school, church, organization	9. Finding resources in connecting with support systems.

The meaning units (formulated meanings) were grouped into clusters where six theme clusters emerged from related meanings (see Table 17).

Table 17	<i>Theme clusters that emerged from meaning units.</i>
<i>Theme cluster 1: Experiencing turmoil and adversity</i>	
Losing loved ones. Moving away from homeland Going through deadly Vietnam war. Witnessing human rudeness Facing death, extreme danger and terrible fear, Ongoing conflict among different generations of immigrants Experiencing the absence of God	
<i>Theme cluster 2: Psycho- spiritual-somatic reaction</i>	
Feeling dissociated Feeling disturbed emotionally and psychologically. Responding with frustration and emotional cut-off. Physical pains and nightmares Feeling traumatized and distressed Experiencing inner protest Feeling distant from God and angry at God.	
<i>Theme cluster3: Unknown ground</i>	
Confusion Communication problems Spiritual and identity crisis Feeling uncertain Discordance between ideology and reality Inconsistent God image, experienced through unavailable parents Impersonal God image, experienced through a father who considers the participant invisible	
<i>Theme cluster 4: Awareness and finding resources</i>	
Discovering different pathways of coping with adversity Having purpose Acceptance Perseverance and self-worthiness Faith becomes an inner resource Connection with family and friend	

Theme cluster 5: experiencing the transformation of images of God

Similar to parental images: tender and patient and loving.

An accompaniment which develops with people

Consolation and profound Peace

Peaceful Presence that chases away fear

Available Protector who provides strength, direction and inspires one's services.

Theme cluster 6: components of resilience

Courage

Authenticity

Creativity

Adaptation

Meaning in life found

Surrender when doing the best one can.

Transformation of one's images of God

Regaining insights

Connection and collaboration

Experiencing gratitude and contentment in life

Theme 1: Experiencing turmoil and adversity

Loss was described as “losing loved ones,” moving away from homeland,” “facing death, danger and uncertainty,” “witnessing hunger, human rudeness and injustice” “experiencing the absence of God and the uncaring of God.” A 52-year-old man spontaneously depicted what he went through as one of the “boat people” with the image of a “dangerous ocean,” “water is so dark,” “44 people in the 10m-long boat,” “no way to urinate during 7 days and 7 nights”; the fear increased terribly when the night fell and pirates came.” Another 56-year-old woman described what she went through as “being imprisoned, witnessing loved ones beaten, and facing heavy storm in the ocean.” She stated,

I remembered the terrible fear when witnessing Communist police beat and imprison the priest, who was my professor, then imprison my boyfriend and threaten me. I remember going home, going up to the terrace and shouting at the top of my voice. When going through extreme fear, I felt surprised that I did not become crazy [...] Seven days and nights on the ocean: heavy storm, 400 people in the boat. I witnessed death, human rudeness and loss. Seeing death coming, I saw myself as if separated from myself.

Theme 2: Psycho-spiritual-somatic reaction

Participants, in this theme, revealed how they felt in relation to adversity. Loss was seen to be related to shock, disassociation and turbulence that disturbed people emotionally and psychologically. It was also considered present in people who appeared frustrated and emotionally cut-off, and suffered physical pain and nightmares arising from the trauma and distress that they had gone through. For instance, a 53-year-old man noted that “10 years later I still had nightmares in which the Communists chased after me.” A 44-year-old man envisaged his somatic reactions during the turmoil: “After 7 days and nights on the ocean in a small boat, I saw death was coming closer. I had heavy stomach pain after 20 days in the ocean without urinating. I was so sick and could not walk.”

In the midst of chaos, feeling distant from God and angry at God caused deeper pain. A 44-year-old woman revealed: “I was angry at God since he just appears and disappears.” Another 44-year-old man stated, “My prayer seemed abstract since I did not get what I asked for. God was distant from me.” A 21 year-old man revealed, “*I used to pray a lot, not as much anymore.*” Intense strain led to spiritual crisis where a 56-year-old woman revealed “I lost my job, my sister got sick. I tried to commit suicide when I was 16. God's absence showed in my feeling stressed, attacked, that I had lost control.”

Particularly, the following qualitative interview with a 21 year-old man not only validates our quantitative result in hypothesis 1b (the higher negative GI, the higher level of emotional distress), but also reflects the relationship with his parents in terms of attachment theory.

When asked to describe his image of God, we found a parental representation influencing God

Image:

God is just God; he creates everything and lets things happen [...] I do not say he does not care as if he were a bad person. I just see him like a mother or a father sitting and just letting the children do what they want.”

When asked about his relationship with his parents, we found some inconsistency:

I don't really communicate my struggles or anything complicated to my parents. They don't understand. I tried a couple of times but as it turns out it seems like they don't listen or forget about what I said. I don't really mind. I got my basic needs from them. It was hard; it was lonely.

When asked how he experienced God, we found he faced personal and interpersonal spiritual struggles

To be honest, I don't talk about my problems to God. I don't need it. I don't think that I get any result out of that. I don't attend church weekly, nothing personal came about. Prayer is more of a burden since it is sort of like asking someone for something. For me, the most challenging thing is my fear: social issues, uncertainty about the future, I am not up to other people's level and face many disadvantages. I am not so sure if it is laziness or fear or the combination of the two: lack of social cues, or being left behind, uncertainty about the future, not sure how to make progress. I felt unmotivated to achieve anything: I don't have a concrete plan for the future; I don't know what I passionately want about it. I wish that I had someone.

It seems that the participant has formulated a concept of God by formulating the same insecure attachment to God as he had with his parents. As a result, it appears uneasy for spiritual reframing and meaning-making to take place positively to be able to overcome and conquer fear. The finding is in line with the study of Francis et al. (2001) that controlling-rejecting images of God negatively relate to various aspects of well-being.

Theme 3: Unknown ground

In this cluster, confusion was captured as a “spiritual and identity crisis,” “doubting in meaning seeking,” “discordance between ideology and reality,” inconsistent God image and unavailable parents,” “uncaring God image and parents who lack understanding, impersonal God image and the father who considers the participant invisible,” “feeling uncertain,” “feeling angry at God” and “Communication problems when living in two cultures.” A 21-year-old man described his confusion, saying “I feel like I am in the middle with no place to belong to on any side; I don’t know what I passionately want about it”. Another 44 year-old man narrated how confusion happened to him as follows: “A crisis occurred in my faith as it became separated from life. The education system based on Marxism was not coherent with my faith, giving rise to an internal protest that knowledge of faith and reality could not coexist.” Extreme adversity would question one’s belief about oneself and others with confusion and overwhelming fear. For instance, another 43 year-old woman revealed that “my problem was that I was afraid of everything.”

Theme 4: Awareness and finding resources to cope with adversity

In this theme, people started accepting and being aware of what have sustained them throughout the journey and searching for meaning and making strong efforts to regain life and to move on. First of all, data showed that “Faith, prayer, God and religion” became one of their greatest resources for Vietnamese immigrants. These allowed a 56 year-old woman to reframe fear into faith “I felt God was protecting me so I had no fear even in such extreme adversity. God is in my desire to give back to people. If you are close to God, death is only a transition.” Another 44 year-old man revealed that “in a desperate moment, I learned to trust in God. I remember hearing a woman’s prayer after bombing that consoled me a lot. Prayer supports,

sustains, and gives me strength.” A 53 year-old man noted that “Faith helps me to see things positively, to contribute and to be the best of myself together with God’s grace that made me happy. Faith is my inner resource.” The following qualitative interview with a woman aged 56, one of the ‘boat people’ who arrived in Canada in the early 1980s and holds a PhD degree illustrates the point:

I remembered my terrible fear when witnessing Communist police beat and imprison the priest who was my professor, then imprison my boyfriend and threaten me. I remember going home, going up to the terrace and shouting at the top of my voice. When going through extreme fear, I felt surprised that I did not become crazy. I always believe God’s Mighty Hand intervenes in each event of life.

I remember seven days and nights on the ocean, I saw myself as if separated from myself: heavy storm, 400 people in the boat. I witnessed death, human rudeness and loss. I felt God was protecting me so I had no fear even in such extreme adversity. I felt happy inside myself with no space for suffering since I felt God is All. My heart was like a rock. God is everything and available through real mediators, God shows proof that He is right there; don’t be afraid. He is there whenever I need Him. Having God, I fear nothing even in extreme difficulty. If you are close to God, death is a transition to Life.

The study’s qualitative findings are consistent with Dorais (2007) regarding Vietnamese refugees: “religious beliefs and practices gave a meaning to the life of many refugees and, for this reason, were an important source of hope.”(p.62)

Second, “perseverance and hardiness” were found to assist the person’s post-traumatic growth. For instance, a 53 year-old man stated, “Because I went through extreme suffering, things are bearable now. Challenges that I went through built my character. Third,” having “purpose” was crucial for 44 year-old participants: “I live not only for myself but also for people around me; this gives me meaning.” Finally, community, family and friends were described as places where the participant felt a sense of belonging. A 43 year-old woman asserted: “It was with praying, having children, and facing struggles that I felt closer to God: ups and downs made me mature in God.”

Theme 5: The transformation of images of God

In this theme, experiences of loss were related to a “positive God image” such as “an accompaniment which develops with people,” “Consolation and profound Peace,” “peaceful Presence that chases away fear,” “available Protector who provides strength, direction and inspiration” “similar to parental images: tender and patient and loving, teaching through events,” “God image is very personal and touchable, who is Love, who waits for me when I went prodigal.” “My image of God is now deeper than before; I work since I want to do something that is a way of thanking God. I am deeply thankful. “

Some considered loss as a crisis that led them to change, to grow and to be closer to God and people. A “boat man” stated,

“Experiencing crisis allowed me to learn that I would get better. My God image also changed along with my life. Now God is much closer; He is the Light for the world and I go toward this Light. God is a Consoler who has led me. God is peace, accompaniment and hope. God is my comfort to whom I surrender. God is not the bank anymore!”

However, the qualitative results also revealed that negative relationship with God reflected the negative experiences that some participants had with parents.

A 21 year-old man having communication troubles with his parents reported

I just see God like a mother or a father sitting and just watching the children do what they want. I am not familiar with his presence. To be honest, I don’t talk about my problems to God, I don’t need it. I don’t think I get any result out of that. I also don’t really communicate my struggles or anything complicated to my parents. They don’t understand. On my part, I don’t know what I passionately want about it. It was hard, lonely.

Another 44-year-old woman also noted

After my parents’ divorce, my mom forced us to leave the country since my stepfather did not love us, nor did my mom. I was ready to die. How many times I wanted to commit suicide. I wanted to die quickly because of loss, unhappiness, and threats. After adversity, I believe that God is there to help me; I am afraid that one day I may lose this God.

Theme 6: Components of resilience

After traumatic events and overwhelming shock, people somehow found resources to cope with their situations and to move on; images, feelings and the whole process of coping was gradually transformed “Up and down moments made me appreciate life.” It was a very long process which called for interpreting and re-interpreting, visiting and revisiting the events in the light of Faith (i.e. “suffering is part of life and knowing God has helped me to have direction.”) so that insight and strength was gained, bitterness was also let go. A 56 year-old woman reported that “In 2005, I went back to Ha Long Bay and saw a boat similar to the one that carried us across the ocean 30 years ago and I sobbed terribly. Something that I had buried and had now reappeared. Fortunately, after that moment, I was okay since what I felt did change.” Another 53 year-old man noted, “ten years later I still had nightmares in which the Communists chased after me, I had nightmares quite often. It stopped happening when I was able to revisit VietNam eleven years after that.”

In this theme, resilient components emerged in various forms: “awareness,” (“Being poor helped me to appreciate a full life”) “a sense of gratitude,” “an emotion of appreciation,” “creativity,” “courage,” (Brown, 2012) “hope,” “adaptation,” “meaning in life,” “surrender when doing the best one could,” “images of God transformed,” “insights regained,” “letting go and accepting reality,” “collaboration, and contentment with life.” A 43 year-old man recalled,

In 2005 when attending a renewal class for couples, I came to realize that my life is to serve God and glorify his name. After the renewal class, God is my accompaniment and prayer is sharing [...] I choose to be involved and collaborate. I made my best effort to do my job well to collaborate with God's plan.

Gradually, the bitterness and suffering of the past were replaced with understanding and empathy toward oneself and others. To integrate in the present the lessons of the past that

facilitated changes is an acknowledgement of what happened. Resilience is regaining insights when finding meaning even in chaos and Faith becomes an inner resource.

A 44 year-old man noted,

I keep going even in struggle and difficulty. Light and darkness were intertwined. I struggled to adapt and learn a new language, yet I determined to keep going, to live my life since I have purpose, confronting darkness and keeping going because of hope of what is ahead of me. Sadness does not help: I have to act ...I want to be light for the world. My joy is to sit with my children at the end of Sunday to count my blessings; seeing mountains and birds flying over the ocean. I felt grateful to God.

Results of the analysis of theme clusters were incorporated into the essence (invariant structure) underlying the experience of loss, of God image and of resilience. Loss is frightening and traumatic; Images of God are Peace, Love, Consolation, available Protector; resilience is revealed in forms of finding meaning, resources, purpose and perseverance, acceptance, gratitude, contentment of life. To validate the above essence of the finding, the principal researcher contacted participants to check with them whether the results reflected their experiences. The participants agreed with the above components of resilience; they were also pleased with the term “my images of God transformed” along the journey. Especially, they appeared grateful to the lesson of life learned out of adversity and this gave a hint that they walked through chaos. In this stage, the principal researcher found one more “minor voice” from participants was that meaning for life is very crucial and faith in God, spiritual connection and family, community bonds are inseparable from participants’ cultural identity.

The principal researcher noticed that Vietnamese immigrants went through loss and slowly processed their grief through theme one (adversity), theme two (psycho-somatic-spiritual reaction), theme three (unknown ground with confusion), theme four (awareness), theme five (transformation) and various forms of resilience are found in theme six with gratitude,

contentment of life, creativity and collaboration. The qualitative findings revealed that the participants somehow walked through chaos and found meaning for life. This showed in their acceptance, also in their discovery of *alterity*, that is, otherness where “The point of reference is no longer authority or the law or the self, but other persons. At this level (the highest level of moral development), God is seen as a person, as someone living, as the partner in dialogue, as an instigator of communion with himself and other people who calls on us to build a human world” (Durand, 1986, p. 227). Further discussion will be presented in the next chapter.

CHAPTER V

DISCUSSION

“All the bitterness and disagreements will vanish, and the only thing that lives forever is Love.”
(Kubler-Ross, 1969).

This chapter summarizes the significant findings of the study, comparing them with previous research, assessing them against four research hypotheses, which in their turn will be tested by the qualitative interview. The strengths and limitations of the research, its implications for theory, clinical practice, research and a clinical measurement in multicultural contexts will also be proposed and discussed. Suggestions for future research will be presented.

General discussions on God images and emotional distress

It has been reported that Vietnamese immigrants often describe psychological symptoms in the form of somatic complaints (insomnia, pain in the heart or chest) because of the cultural stigma on mental health problems (Cheung & Lin, 1997). In this study, participants' T-scores appeared high not only on somatization, but also on global symptom index. These results may suggest that the study sample was able to acknowledge and express their psychological symptoms after living in North America for over 22.8 years. It is also to be noted that somatization may have its origins in war-induced post-traumatic stress disorder; participants also suffered physically and psychologically because of the hardship of refugee camps, war, the Communist regime and adaptation as immigrants (Gold, 1992). Physical aches may be interrelated with psychological symptoms because of a cultural belief system in which mind, body and spirit are seen as one (Marciocia, 1989). Therefore any disturbance of these interrelationships would automatically disturb the bodily functions as well as one's emotional and mental well-being, (Tuong Phan & Silove, 1999).

Additionally, high rates on hostility (T-scores = 65) indicate that the historical context needs to be taken into consideration. For instance, going through war, witnessing injustice and dictatorship under a Communist regime led participants to flee the country bearing sadness and hostility within themselves (Gold, 1992). This study found that those whose positive understanding of God was comforting, giving them strength, exhibited low levels of somatization, anxiety and hostility. The finding is in line with Dezutter and colleagues (2010) who found that one's experience of God as love and comfort could lead one to interpret illness in a constructive way. In this respect, it is possible that despite an experience of intensive suffering, one might develop a deeper spirituality (positive God Image) and resilience (Tedeschi and Calhoun, 1995).

The result from additional hypothesis showed that those had higher negative feelings regarding God, measured by items, such as fear of being rejected, of not being good enough, of being punished, who had higher scores on DTS's subscales: intrusion, avoidance/ numbness, hyper-vigilance and higher scores in eight symptoms of BSI such as anxiety, obsessive compulsiveness, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoia and psychoticism (see Table 8). The findings are consistent with the study of Hills et al. (2005) on negative religious coping and depressive symptoms among older adults in the US and among adults in Australia (Greenway, Milne, Clarke, 2003) that a negative image of God was associated with higher levels of depressive symptoms.

Furthermore, Braam et al. (2008) reported that the negative emotional aspects of religiousness may indeed represent a crucial element in the relation between religiousness and distress. The same authors argued that negative feelings toward God and emotional distress may share the principal construct. According to this theory, the emotional facets of God image are

grounded on object relations (Rizzutto 1979), or on attachment relationships (Kirkpatrick, 1992 where relationship with God is compared to the relationship with early caregivers.) In this sense, a critical or negative God image may reflect an insecure relationship. For example, it has been shown that unpredictability in early relationships generates insecure attachment styles, which have been found to be associated with distress in adulthood (Cassibba, Granqvist, Costantini, & Gatto, 2008). The relation between fear of being punished, not good enough, or rejected by God, and emotional distress possibly originated in a basic interpersonal process (Braam et al., 2008).

The relationship between God images and resilience

The results of this study reveal a strong relationship between PGI (positive perceptions of God and positive feelings about God) and resilience. Noticing that the spiritual components of CD-RISC such as: item no.3, “sometimes fate and God can help”, item no.9, “things happen for a reason”, item 13 “in the time of distress, I know where to get help” have high loading ($\alpha = .84$). Therefore, it is not surprising to find the strongest relationship between positive God image and resourcefulness/ spirituality compared to the rest of CD-RESC’ subscales (i.e. hardiness/self-efficacy, optimism/adaptation, purpose) (see table 9). The current result confirms the significant role played by God image in resilience in the Vietnamese sample.

The findings are also further supported by the study of Francis et al. (2001) on loving God images predicting life-satisfaction and well-being; Lee (2007) also found that religious support can be a potential protective factor easing depressive symptoms and enhancing life satisfaction among elderly Korean American immigrants who face difficulties in coping with acculturation stress, bereavement, migratory grief and health problems. The current finding is consistent with the study of Kallarnpally (2005) on spirituality and life satisfaction among Indian immigrants, where spirituality was found to relate to the ability to confront challenge and

achieve greater satisfaction. This may explain why Pargament et al (2000) identified five functions of spirituality, such as finding meaning, gaining control, comfort, gaining intimacy with others, and achieving life transformation.

Unexpectedly, correlation analyses showed no relationship between positive God images and hardiness/ self-efficacy subscale, such as: item no.17 “think of oneself as strong person”, item no. 4 “one can achieve one’s goal” (see table 8). It must be noted that Vietnamese culture is collective and has been profoundly influenced by Confucianism where harmony and community are more emphasized than self-assertion. The current finding not only reveals the images of God in the sample that relate to resilience and values of the culture, but also reflects the historical context in which participants went through. The experience of overcoming suffering personally and communally may have led them to take into consideration the consistent presence of the Divine that is there to comfort them (see case 1 in hypothesis 3). Therefore constructs of hardiness/ self-efficacy/ autonomy may need to be interpreted differently; or perhaps more focus is to be placed on acceptance and collaboration; as Yu and Zhang (2007) suggest, “more emphasis needs to be placed on harmony as a component of resiliency”(p.28).

Additionally, the results also showed a strong negative relationship between negative God image and resilience. This indicates that the more negative the God image participants have, the lower their scores on resilience. The finding was not surprising, given previous research in the area that concluded that a negative God Image, such as rejecting or controlling, negatively correlated with self-esteem, image of self and well-being (Benson and Spilka, 1973; Francis, Gibson & Robbins, 2001). In addition, studying the link between attachment theory and relationship with God, Bennett (1997) proposed the idea:

Without God as our secure base, our love of others easily becomes distorted by our fear of loss: we cling to others for fear of losing them. Or we may try to

avoid the pain of loss by avoiding intimacy altogether. (p.31).

However, the findings lead us to further question whether low scores on resilience: i.e., on hardiness/ self-efficacy, optimism/adaptation, resourcefulness and purpose, may have shaped one's capacity to experience God. On the one hand, Exline et al. (2000) propose that the pessimistic appraisal of self, others and world that accompany depressed thinking can extend to perception of God. On the other, attachment theory offers a helpful framework for this reflection: someone caught up with tragic loss may find it hard to be responsive and to develop a sense of security; in these circumstances, insecurity of attachment can create additional loss (Kelley, 2009). As Bowlby (1969 & 1973) and Rizutto (1979) have proposed, insecurity in attachments and an insecure working model in childhood typically do result in insecure attachment in adulthood. This may well include insecurity of attachment to God (Kirkpatrick, 1992; Kelley, 2009). In line with this, Schapp-Jonker et al. (2002) suggest that a negative God image can promote pathological personality development and psychological distress. Therefore, it does not seem to be the case that low resilience totally shapes one's negative images of God.

Through general observation during encounters with participants, we learned that the images of God in the sample were generally positive (80% of the sample had mean scores of 4.6 on a 5-point Likert scale for positive feelings towards God). Therefore, for such persons to express feelings of anger at God or of being rejected by God (NEGI), would indicate that they now still struggle (the sample's T-scores on hostility = 66). When studying God image in patients in chronic pain, Dezutter et al. (2010) suggest that it is possible for someone who experiences disappointment in relation to adversity to project that disappointment onto an unseen person such as God. The same authors suggest that it might be safer to blame God and express their feelings of disappointment toward God instead of toward others. Therefore, the idea of

God as the all-good, benevolent, and omnipotent protector may end up being rejected once prayers are not answered or unpleasant feelings are not relieved. Carrying a negative image of God and at the same time having the severity of chronic pain may have an impact on anger towards the GI (Gaskin, Greene, Robison, Geisser, 1992). Pargament and colleagues (1990) found that having an image of a punishing or angry God resulted in poorer psychological outcomes. The findings are consistent with Exline and colleagues (1999 & 2002) that a negative view of God can affect one's understanding of oneself and the world, and lead to more distress.

The relationship between God image and the imaginary

First of all, though the ANOVA revealed a significant difference between the three groups of imaginary category in relation to both PPG and PFG, post hoc test results of this study indicates that only group 1 (unstructured category) showed mean difference, compared to one group 3 (DUEX) in relation to PFG. Post hoc test results indicate that only group 1 (unstructured category) showed mean difference, compared to the same two other groups (group 2 : heroic and mystical categories, and group 3: DUEX) in relation to PPG. In other words, these results may reflect the truth of Vietnamese culture in which people feel more comfortable to talk about what they understand rather than what they feel (emotions are often associated with weakness: “sadness does not help, I need to act.” Case # 16). Furthermore, going from fear to faith, the study sample may gradually learn that their understanding of God may have a stronger voice than the feelings of God. As Schaap-Jonker (2008) states that cultural, religious, historical settings condition people's feelings and understanding of God. The findings genuinely reflected historical and cultural conditions of the sample.

It should be noted that investigating the links between two constructs, images of God and the imaginary, and correlating the categories of the imaginary of the AT.9 test with scores on GI,

is explorative and innovative in the Vietnamese sample. Though no previous empirical research has studied this link, Bellehumeur (2012) proposed the association between the imaginary and spirituality. Furthermore, both Rizzutto (1979) and Durand (1999) have suggested that the fields of images are formed and reformed throughout one's life; they are influenced by culture, religion, sociology, life-events and so on, to help one deal, not only with existential anxiety, but also with meaning making (Boia, 1999). The finding indicates that images of God sit in the depth of the field of the imaginary (Rizutto, 1979). In fact, the first group whose images of God are positive is the one whose drawings and storytelling, a product of the AT.9 test, are the most coherent, connected and positive despite the adversity that they went through (see 9 cases illustrated in Hypothesis 3) compared to those who bear a negative God image (see group 2 in hypothesis 4). The second group with a lower level of PGI, the synthetic values would decrease, leading to the assumption that participants who experience adversity would have disconnected stories, scattered drawings and poorer health outcome (see hypothesis 4a).

This suggests that the first group with a positive God image may integrate well, in the sense of dramatic events becoming meaningful with time (Durand, 2005), and that the participants could actualize the present moment by selecting events that were meaningful in the past with regard to a hope for future (Poirel & Hillairet, 1968, Dorais 2007). This falls in line with the findings of Bellehumeur and colleagues (2011, 2012, 2013) that the positive form of the synthetic category of the imaginary (i.e., higher scores on SVI) associating with various positive dimensions (i.e. high level of spirituality, of meaning making and of integration) corresponds to a higher self-esteem (Bellehumeur & Lavoire, 2013; Lefebvre, 2005). The finding appears consistent with the study of Rizzutto (1979) on using the imaginary to draw images of God; she found that participants' images of God reflected their vision of self, of life and the world (p.91).

The imaginary and emotional distress

The results from correlation analysis indicate a strong significant negative relationship between low level of SVI and somatisation; global symptom index and hyper-vigilance. The findings are consistent with Y. Durand (2005) that certain negative profiles of AT9 propose an association with participants who suffer with emotional distress. Y. Durand (2005) found that the person's imaginary could come to light in a "defective manner", which appears as a non-structuring in one's drawing and may be indicative of a disturbed mental state (Durand, 2005; Loureiro, 2008; Bellehumeur et al., 2013). Laprée (2000) also indicates that the negative response to the AT9 test, expressed in both the individual or/and in the collective, reveals the participant's struggles (i.e. having suffered from personality challenges, cultural conflicts, history of war) (pp.314-341) and/or traumatic experiences in a refugee camp (see case 21 in hypothesis 4).

In fact, the method of selecting cases in SPSS: $SVI < 2$ or T-score of GSI > 63 (clinical condition, Derogatis, 1993) showed us five cases with the nine elements of the drawing isolated and with disconnected and passive stories (see hypothesis 4). The finding indicates that some Vietnamese immigrants somehow are still struggling to fully integrate their tragic past in their lives and to fully adapt (Berry, 1987). The process of integration requires time, healing and energy, especially when he/she has gone through persecution, war and life in a refugee camp (Gold, 1992) and also insecure attachment issues (Francis et al., 2001; Kirparktrick, 1992). Finally, the results did not show any significant relationship between resilience and SVI. Further studies on conceptualization of the same constructs to be measured will be recommended.

Implications for theory and research

The theoretical implication of the current finding refers to the fact that higher scores on positive God image are associated with higher levels of resilience. This finding is relevant to the field of Counseling and Spirituality since the field places a special focus on individual spirituality and protective factors (Cornish & Wade, 2010). Psychotherapists in a multicultural context are called to be concerned with human growth, with the development of the ability to adapt, shape, change and transform in the complexities of person-environment interaction (Long, 2011). In the context of this study, there are personal, familial and communal protective factors that help buffer against stressful circumstances. Literature on resilience, therefore, would contribute enormously to the field of human growth if it concerned not only the prevention of risk, but also the enhancement of the religious/spiritual dimensions and cultural diversity. For instance, Lee (2010) revealed that once immigrants become aware of their losses and are able grieve well over those losses, then adjustments to adopted countries will be easier. In this process, the positive role of faith is crucial.

With respect to the components of resilience, the results from the current study have an implication for psychotherapy in that harmonious interactions between the person and family, community and Grace that can transform and retransform people in each moment of life- is part of self-efficacy and this needs to be fostered when working with immigrants who come from collective cultures. Yet, harmony and acceptance are not examined in the CD-RISC. The principal researcher also came to realize that self-efficacy appeared unrelated to positive understanding of God and positive feelings of God (see Table 9) and wonder if the collective cultural setting may play a role in this matter. Since Counselling and Spirituality are concerned with human growth (spirit, mind and body as a whole) and environment interaction, so it would

be useful to take into consideration the communal dimensions of those who come from collective cultures. In this context, Zinnbauer (2013) recommends an integrative model for theory, research and practice that we thought that would be relevant. For instance, he takes into consideration multiple dimensions, multiple methods, multiple contexts, and flexibility, personal and communal backgrounds (p.73). Durand (2005) with his AT.9 test allowing people expressing themselves through drawing and storytelling is an advanced technique for bridging the cultural gap.

Furthermore, the current findings are likely to appear that synthetic categories are associated with positive God images and low level of distress, whereas, unstructured categories of the imaginary appear to relate with negative God images and higher level of distress. The theoretical implication of the present finding is that regardless of cultural differences, innate human capacity of the imaginary is universal in the sense that it seeks meaning and avoids pain (Durand, 2005). This imaginative capacity is demonstrated in ability to form and transform images of Divine and of life and is revealed in life-narrative and drawing. These are coherent with people's positive God images that would help safeguard against distress and innovate a project of new life (Borch, 2013; Rizzutto, 1979) or vice versa regarding the unstructured categories. The current anthropological findings therefore lent support to the field of Counselling and Spirituality that is concerned with human development as the whole (Greene, 2002).

The results of the current study reveal the link between Vietnamese participants' Images of God, distress and resilience; and also those between their images of God, distress and the imaginary category. Suggestions for future research are numerous in the context of the reemergence of psychological research associating with spirituality in multicultural settings. For

instance, we found the gap of cultural bias in the conceptualization of the concepts of distress (e.g., stigma, somatization, shame, emotion of inhibition), resilience (e.g., family and community are part of self-identity), Images of God (e.g., very respected). These culturally biased elements shed light on implications for further studies in the sense that we need quantitative and qualitative research to better define the concept and cultural variations in the construct, definition, and understanding of Vietnamese immigrants' Images of God, distress and resilience; and we need cultural explorations to better study protective factors, the barriers to reporting in Asian immigrants and help-seeking behaviors with respect to the specific socio-cultural contexts; we must have research to explore the issues of cultural norms and cultural expectations in relation to the perception, determinants, and impact of Asian immigrants in different racial and ethnic communities(Sue, Cheng, Saad, & Chu, 2012).

One potential future direction for research would be to replicate the study. Studying the relationship between Images of God/spirituality, distress, resilience and the imaginary among other Asian ethnicities, for example, Koreans, Chinese, or Japanese of various ages would allow researchers to compare the findings in terms of different contexts.

Another form of research implied is the identification and the qualification of what affects Asian immigrants' tendency to disclose more, to disclose less, or to disclose in a certain reporting pattern, in order to better understand the accuracy of the issues described (Sue et al., 2012).

Furthermore, the results of this study give additional support to Object Relations theory that higher scores on loving, supportive images of God, i.e., a consistent internal working model, appear to associate significantly with resilience regardless of hardships endured. Additional research needs to take harmonious components into consideration to measure resilience. There is

also a need to investigate why subscales of resilience such as hardiness/ self-efficacy were not found to be related to positive God Images and yet were found to be significantly associated with negative God images.

The current finding indicates that there is a negative relationship between positive images of God as comforting, loving and trustworthy and symptoms of anxiety, hostility and somatisation measured by BSI. Further research may follow up by doing interventions to improve the quality of the positive God image, and at the same, to evaluate the level of disclosure relating to somatisation, anxiety and hostility.

Given the possible cultural gap between Eastern and Western contexts, the use of an Anthropological tool, more culturally sensitive tool, allows us to better validate our results, by providing well identified and validated imaginary categories. Meanwhile, the AT.9 Test also fits into the framework of phenomenology (Creswell, 2007) which focuses on participants' own subjective experiences (through their storytelling). Note that we have used phenomenology as ground for our qualitative interview.

Furthermore, it is known that the goal of the imaginary is not to annul the real. On the contrary, its approach is to integrate the existing reality and give meaning to the events attached to it. Durand (1999) sees the imaginary as a way of dealing with existential anxiety and with time passing by, since one's imagination permits him/her to master the faces of time and death (Demers-Desrosiers, 1982; Loureiro, 2008). In periods of crisis and desperation, the imaginary can play a compensatory role in the face of "real" history. This strategy allows the imaginary to be used as a very sensitive indicator of personal growth and of historical evolution as well (Boia, 1944). Using the structure of the imaginary as ground, we found a strongly significant relationship between SVI and PGI, between SVI and somatisation, vigilance and anxiety. The

present findings could be used as referent for researchers who are interested in the multicultural context and an interdisciplinary approach.

Implications for clinical practice

First of all, although no causality could be established in this study, it seems logical to assume that fostering positive images of God and spirituality/ religious values would help people reduce anxiety, somatization and hyper-vigilance and improve levels of resilience (hypothesis 1a & 1b). On one hand, mental illness has not been accepted culturally, so if someone has depression, for example, the whole family reputation is also affected. In this context, a mental health problem may be considered as a manifestation of imbalance between *yin and yang*, disturbance of *qi* energy, supernatural intervention, or emotional exhaustion caused by external environmental factors (Lee, 1996). These cultural reasons explain why mental illness is under-diagnosed and under-recognized among Asian immigrants (Tuong Phan & Silove, 1999). Therefore, the current findings offer further implications in support of Vietnamese immigrants. For example, the appropriateness of fostering a sense of faith community where people feel safe to come to worship and to share; of equipping people with knowledge about mental illness; of strengthening people's faith in God who is consistent, compassion, loving and trustworthy (see the results from our qualitative interview); of encouraging people to tell their stories of despair and of hope. On the other hand, it is necessary for the clinician to encourage the client and his or her family members to openly discuss their cultural and religious viewpoints on the cause of the problem, their past coping style, their health-seeking behavior, and their treatment expectations (Lee, 2010).

In addition, the implication of the current study's findings is that positive God images, because they are related to low levels of distress, can serve as protective factors for Christian

Vietnamese immigrants in particular and for Christian Asian immigrants in general. In the context where mental illness and expression of feelings are not socially and culturally accepted that result in description of somatization or rationalization of feelings, the promotion of positive Images of God such as compassion, kindness, loving and understanding (Luke, 15) would tap into the mental issues more easily (Lee, 2010). These findings are relevant to both Object Relations and Attachment theories in the sense that these two theories can offer psycho-spiritual therapists insights such that they in turn may offer a message of hope in providing consistent support, genuine presence, spiritual strength, non-judgmental acceptance (Kirkpatrick , 1992, Kelly, 2009) when working with immigrants. This will be invaluable for those who come from collective cultures and who carry with them communal ways of being in relation to both the Divine and others (Yu & Zhang, 2007).

Psychotherapists in multicultural contexts need to be mindful of immigrants' stories of distress/loss in the healing process since loss can change one's lived direction invisibly and can go unrecognized and unarticulated (Kelley, 2009). The experience of loss may shape one's ability to experience God, either in a positive or a negative way (Tedeschi & Calhoun, 1995; Exline et al., 1995). A supportive relationship would become a "transitional object" (Winnicott, 1971) or in other words, a secure human attachment (Bowlby, 1986) that can compensate or/ and correspond to an individual relationship with a Divine Figure in the time of need (Kirkpatrick, 1999). Psychotherapists have a privileged role and enormous responsibility to establish an environment and a relationship where consistent support, compassion and availability would reflect the presence of Divine (Kelley, 2009). These would help eliminate risk factors, empower growth and enhances adaptation.

Secondly, the qualitative results also revealed that participants' trust in God had sustained them throughout their immigrant journey; this is consistent with the study of Dorais (2007). The principal researcher came to realize that people may express their beliefs in culturally different ways, yet the universal truth is that the spiritual/religious/ dimensions is part of human wholeness (Marciocia, 1989). In the context of multicultural diversities like Canada, it is critical to develop a model for pastoral services and clinical training programs in order to be better equipped to accompany immigrant clients who reveal their spiritual/religious needs. It is also useful to explore the cultural manner in which spirituality/ religion/ images of God would foster the communal dimensions of adaptation together with self-efficacy. For over two decades, researchers have been aware of the significance of examining the ways in which spirituality/ religion/images of God are incorporated into the theory and practice of meeting clients' spiritual needs (Pargament et al, 1997; Gall et al., 2013). The study of Jarvis, et al. (2005) reveals that religious identity and the person's positive image of God tend to become strengthened through the immigration experience as a way of maintaining a bond with one's home; they also offered a shared sense of belonging, a shared belief system and relief in the face of existential anxiety (Griffith, 2010; Greenberg, Solomon, & Wyszynski, 1997). The results of the current study support this notion.

At this point, the reminder of Griffith (2010) needs to be taken into consideration:

“Unlike scientific hypotheses, religious beliefs do not rest upon evidence for their validity, and absence of evidence rarely leads to their being discarded. Rather, beliefs are regarded as valid when they help people sustain moral-existential postures of hope, purpose and meaning- particularly so when life circumstances otherwise would not support such existential postures” (pp. 66-67).

Thirdly, observing participant engagement when doing the AT9 test, the principal researcher proposes that the use of the AT.9 in Counselling to work with Vietnamese immigrants

having a traumatic history is relevant. Reflecting with them on the isolated elements in their drawing could lead to awareness and a change for the better (Laprée, 2004). As in Art therapy that allows people to express unspeakable tragedy and make sense out of it through drawing (Appelton, 2011), the AT.9 test (Durand, 2005) with drawing and storytelling would be used as a therapeutic tool to access Vietnamese immigrants' mental issues which are stigmatized culturally and often described as somatization or rationalization of feelings as a common way of expression (Chung, & Kagawa-Singer, 1995). The AT9 test therefore appears relevant to therapy in collective cultures (Sun, 2004).

Finally, witnessing participants telling stories in the qualitative interview, we found that their experiences of God in the midst of adversity allowed them to keep going regardless of uncertainty. It seemed that Narrative therapy appeared the best fit for them. For instance, Case # 34 shared his story:

Faith is my inner resource; challenges that I went through built my character. Because I went through extreme suffering, things are bearable now and I am very grateful to God (case 34).

It is therefore critical for clinical practice to create a sacred space for religious clients to share their stories, to help them explore the moments of struggle with God, with self and with others (Griffith & Griffith, 2002) by playing the role of a listener, a speaker and then a reflector who will give clients a chance to dialogue with "self in relation with the Other". As Herman (1997) reports that telling stories to the practitioner is a powerful way for survivors to find meaning in their grief and loss. Moreover, according to White and Epsen (1990), telling a story allows people to re-authorize conversations about values and events, and remember conversations about influential people; these are powerful ways for people to reclaim their lives. Narrative conversations, therefore, help people make meaning and discover an alternate way of

looking at life based on a person's values, hopes, and life commitments (Nguyen & Bellehumeur, 2013).

Strengths and Limitations of the Study

Three major strengths of this study that contribute to the multicultural literature are that, first of all, Vietnamese participants' positive images of God/ spirituality/ religiosity play a critical role in resilience and adaptation in host countries and higher scores on negative Images of God appear to be associated with higher levels of distress; secondly, addressing cultural gaps regarding mental illness, resilience, cultural identity and measurements is very relevant in the context of increasing global migration; finally, the strength of this study was the use of the interdisciplinary methods, such as quantitative, anthropological (the AT9 test to bridge the cultural bias mentioned above). Sue et al. (2012) propose that multi-methods are needed to be able to examine any cultural gap.

This research provided an occasion for the Vietnamese sample to grieve over their past tragic loss which had been forgotten in the life of the participants and in their community for over twenty years in host countries. No one dares to touch this painful past, a past that affected both individuals and community seriously (Beiser. 1998). When launching the survey, we officially opened up an occasion for mourning on both personal and communal levels. Little by little participants were able to discuss their somatic and psychological symptoms with the researcher and her thesis advisor regarding the BSI and DTS; then their narratives were slowly opened up, re-constructed and given meaning. A questionnaire on God images (Schaap-Jonker, 2008) allowed participants to share their feelings and understanding of God, their faith and trust in the God that had walked with them through adversity. Resilience scales with four subscales: self-efficacy/ hardiness, optimism, resourcefulness and purpose (Connor-Davidson, 2003)

reminded participants of their tremendous efforts to be who they are today. The archetypal test, the AT9, allowed participants to make a drawing and tell the story behind that drawing; we found this test a very powerful tool for those who had trauma histories, since it gave them a space, for some of them, to recall their stories, and to make meaning again. The most satisfied work of this research was to encourage an immigrant community to retell their stories and naming their resources for resilience. The interview findings showed us that their stories mostly have been transformed from oppression to contentment. The participants reported that they felt relieved and were grateful to be able to revisit the past since then.

The most notable limitation in this study was the language bias. For instance, among those Vietnamese immigrants who came to North America before 1975, French and Vietnamese had been used for communication; the generation of Boat People speaks Vietnamese more than English; yet, their children who were born here prefer to speak only English or French. In this sense, studying God image, loss, resilience and the imaginary of these three generations on the condition of using English was difficult for many participants. Consequently, this may affect the validity of measurements (e.g., God image, emotional distress with Brief symptoms inventory and Davidson Trauma Scale, resilience) to some degree. Even those participants who have mastered English still found some items relating to self assertiveness strange (e.g. I can make difficult decisions that affect other people, if it is necessary, CD-RISC, item 1). It is very hard for those who come from a collective culture to make such an assertion; therefore, the validity of the test may be affected to some extent by difficulties such as these.

Finally, quite a number of participants did not respond to questionnaires on trauma (16 participants returned the DTS with zero value throughout the 17 items, 3 participants left the DTS empty and 3 participants wrote down “non-applicable”). This was a red flag for the principal

researcher, calling for further reflection as to whether it was the participants' issues or the nature of questionnaire itself that was at fault. This limitation was confirmed by the study of Dillman (2000) who stated that there is a potential risk of a non-response error when it comes to trauma issues. Fortunately, this limitation related to language was reduced with the use of the AT9 (which was answered in Vietnamese by 12 participants out of 31), and the interviews which were conducted in Vietnamese for N = 6 out of 8 participants.

Recommendations for further research

First of all, in the light of the limitations of the study, further research needs to be done regarding the necessity and the possibility of translating the questionnaires from English into Vietnamese so that the results will reflect more precisely the participants' feelings and understanding concerning the issues raised by the research.

Second, as Lawrence (1997) proposed, Rizzutto's theory of God image is most relevant when the research carried out in a Christian context. This present study therefore was conducted in two parishes, one in Ottawa, Ontario, Our Lady of Lavang and another in Montréal, Québec, Sts. Martyrs du Vietnam, where Vietnamese immigrants often gather for religious activities (n=800). The findings showed that those who had a high score on positive God image also had a high score on resilience and a low level of emotional distress. In addition, the qualitative findings appeared to reassure how God Image motivated the sample to keep going in adversity. In this sense, further research needs to study the role of God Image and its prediction to well-being. Furthermore, studying on Higher Power from other faith traditions (i.e., Buddhists, Ancestor worshippers) and how the Higher Power relates to loss, community support and resilience would provide different perspectives to compare with the present findings. Further research is needed to explore a Higher Power in different faith traditions.

Third, the research sample gave feedback concerning the Davidson-Trauma Scale (Davidson 1997) that needs to be taken into consideration. Participants argued that the DTS's instruction indicated that they "consider how often in the last week the symptom troubled you and how severe it was" (Davidson, 1996), but they had already processed the traumatic events which occurred over 20 years ago. As a consequence, 16 participants returned the DTS with zero value throughout the 17 items, 3 participants left the DTS empty and 3 participants wrote down "non-applicable". For them, the title "Trauma" appeared to "label" someone who did the test, especially the present sample who was very sensitive regarding mental illness issues. Furthermore, the instruction in the DTS test to "describe feelings in the last two weeks concerning the trauma event" confused the present participants. This instruction does not appear to apply to the present study since the most traumatic event that shook their lives was the experience of crossing the ocean by boat. Yet, it happened over 25 years ago and people somehow got over it. They survived a horrific event, so we suggest that the DTS instruction needs to take into consideration the general space in which people have to express themselves; for example, it could say instead, "Describe your feelings regarding the event that you find most disturbing."

Fourth, if self-efficacy (e.g., setting high and challenging goals for themselves, welcoming and thriving on this challenge, being highly self-motivated, and prepared to invest the necessary time and resources to achieve the goals they set, responding well to negative feedback and persevering through hard times, Luthans et al., 2007) is considered part of resilience, then the concept of resilience in measurements needs to take familial, communal cultural (e.g., harmony) and spiritual/religious dimensions into consideration since these are part of Vietnamese immigrants' identity. Further research needs to follow up next generations of

Vietnamese immigrants to see whether there is shift in the relationship between God image and self-efficacy/hardiness/autonomy.

Particularly, the results from the qualitative interviews show that after going from extreme adversity to resilience, Vietnamese immigrants become more aware of the presence of the Divine and of the support of the community that sustain life-journey. In the light of the qualitative findings, further research needs to study how the second generation of Vietnamese immigrants' relationship with God would impact their emotional well-being and resilience; community support considered as the protective factor needs to take into consideration as well.

Fifth, AT9 could be applied as a clinical tool for a Vietnamese sample since this measurement allows participants to construct and present their ways of being according to their situations. However, for a larger sample, one could benefit from the 23 categories of the imaginary developed by Durand (2005), instead of a four-Likert Scale to measure SVI. This latter scale may not fully take into consideration all the possibilities of such categories of the imaginary. Further studies on categorizing and on measuring categories of the imaginary in a larger sample are to be recommended.

Finally, it would be possible to use AT.9 as a clinical tool to assess the participants' traumatic loss, allow them to draw their unspeakable stories and to map their vision according to where they are regardless of cultural differences; to express themselves, and re-write their stories, perhaps moving from the victimized to freedom (see group 1 and 2 in the hypotheses 3 and 4). Drawing on the above conclusions, it is proposed that for clients going through or having gone through traumatic loss such as the current sample, exploring faith in God and using the AT.9 test in therapy would be very appropriate. Further research to follow up on the finding

and to explore the links between synthetic values and resilience to make sure that the same constructs will be measured.

In sum, Fraser et al. (1999) state that “If we can understand what helps some people to function well in the context of high adversity, we may be able to incorporate this knowledge into new practice strategies” (p. 136). The findings of this study suggest that spiritual/religious components are considered as a very important source of resilience that has sustained the sample from adversity to growth. A growth contains courage, perseverance, creativity, gratitude, contentment and ability to integrate experience of loss (Brown, 2012). Archimedes once stated that “give me a firm place to stand, and I will move the earth.” That “firm place” would be called “safe haven” (Bowlby, 1988) or an internal working model, or the Divine presence (i.e. Object Relations, God Image, Rizzutto, 1979) that was so vivid in the heart of the current sample. For instance, a 56-year-old woman in the interview states that “*when you have God, you have everything; when you have God, you fear nothing and death is only a transition to life.*”

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APPENDIX A



UNIVERSITÉ
SAINT-PAUL
UNIVERSITY

11/26/2012

Bureau de la recherche et de la déontologie
Office of Research and Ethics

Ethics Certificate Research Ethics Board

REB File Number: 1-1360.5/12

Principal Investigator / Thesis supervisor / Co-investigators / Student

Last name	Name	Affiliation	Role
Nguyen	Thanh Tu	Faculty of Human Sciences	Principal Investigator
Bellehumeur	Christian	Faculty of Human Sciences	Supervisor
Malette	Judith	Faculty of Human Sciences	Supervisor
Guirguis-Younger	Manal	Faculty of Human Sciences	Supervisor

Type of project: Thesis related research

Title

God image, resilience and the imaginary among Vietnamese immigrants who have experienced losses.

Approval date
11/14/2012

Expiry Date
11/13/2014

Decision
1 (Approved)

Approval

The REB approved the project.

The researcher is invited to use the reference number 1.1360.5/12 when recruiting participants.

In accordance with the Tri-Council Policy Statement, the Saint Paul University Research Ethics Board has examined and approved the application for an ethics certificate for this project for the period indicated and subject to the conditions listed above.

The research protocol may not be modified without prior written approval from the REB. This includes, among others, the extension of the research, additional recruitment for the inclusion of new participants, changes in location of the fieldwork, any stage where a research permit is required, such as work in schools. Minor administrative changes are allowed.

The REB must be notified of all changes or unanticipated circumstances that have a serious impact on the conduct of the research, that relate to the risk to participants and their safety. Modifications to the project, information, consent and recruitment documentation must be submitted to the Office of Research and Ethics for approval by the REB.

The investigator must submit a report four weeks prior to the expiry date of the certificate stated above requesting an extension or that the file be closed.

Documents relating to publicity, recruitment and consent of participants should bear the file number of the certificate. They must also indicate the coordinates of the investigator should participants have questions related to the research project. The documents can also provide the coordinates of the Office of Research and Ethics.

Signature:

A handwritten signature in black ink, appearing to read 'Richard Feist', written over a horizontal line.

Richard Feist
Chair
Research Ethics Board

1/1

Appendix B



Participant Recruitment

This advertisement was posted on the Bulletin of Our Lady of Lavang Church and was used to make an announcement in the Church after Sunday Mass.

**RESEARCH ON EXPLORING GOD IMAGE, LOSS, RESILIENCE AND THE
IMAGINARY AMONG VIETNAMESE IMMIGRANTS
PARTICIPANTS NEEDED! ! !**

If you are Vietnamese Canadians, aged 18-75, who have experienced loss (i.e., loss of loved ones and/or cultural loss), your voluntary participation in the study on God Image, the imaginary and resilience among Vietnamese Canadians, is requested.

Number of participants	130 Vietnamese Canadians
Age Group	18-75
Gender	Male & Female
Affiliation	Parishioners of Our Lady of Lavang Church, Ottawa
Other characteristics	Able to read English, to make a simple drawing, and to complete 5 sets of questionnaires relating to your socio-demographics, your experience of loss, your God image, and your resilience. Your participation in a thirty-minute-interview with a focus on the above theme will be invited. Nothing less than the above conditions will be accepted for participation in the present research.
Choose the place (click √) where you want to complete the survey	or Saint Paul University or Sr. Thanh Tu's convent.
Click (√) to choose your option(s) to participate in the study	Phase I: Filling in the questionnaires Phase II: Doing a drawing and explaining the drawing (AT.9 test) Phase III: Participating in a 30- minute interview

Your participation in this research will be helpful in exploring the relationship between the God Image (your experience of God), and resilience (your potential to overcome adversity) in the face of losses.

If you are interested in participating in this study, please contact the researcher (Thanh Tu) or her thesis director: Dr. Christian Bellehumeur.

APPENDIX C



Informed consent form

About the researcher

I, Thanh Tu Nguyen, a Ph.D candidate in the Doctoral Program in Counseling and Spirituality in Saint Paul University, Ottawa, am conducting a research as a part of my Doctorate degree. Dr. Bellehumeur, Faculty of Human Sciences in Saint Paul University, Ottawa, is the supervisor of my research project.

I am interested in exploring the impact of a person's God Image (faith, experience of God) on his/her resilience (capacity to overcome adversity and to find meaning in life) in the face of loss (loss of loved ones and of cultural roots within immigrant experiences). The knowledge collected will contribute to literature and to clinical practice in terms of bringing client's faith into psychotherapy since mind, body, and spirit are considered to be interconnected in the Asian cultural mindset. Additionally, the information will help Vietnamese immigrants to be aware of what has helped them function well in the context of high adversity and be able to incorporate this knowledge into new practical strategies to improve their quality of life. Finally, making drawing that may help reconstruct life stories in a meaningful way according to particular situations.

For this purpose, I am looking for participants who are Vietnamese immigrants to Canada, aged 18 to 75. Willing participants will be asked to sign this consent form and fill out demographic questionnaires and another four sets of questionnaires and make a drawing.

- 1. Invitation to participate:** I am invited to participate in the research study named God image, resilience and the imaginary among Vietnamese immigrants who have experienced losses, conducted by Sr. Thanh Tu and Christian Bellehumeur. This study is Thanh Tu's Doctoral Thesis.
- 2. Purpose of the study:** This research explores the relationship between a person's God Image, imaginary and his/her ability to overcome adversity with respect to the experience of loss (loss of loved ones and loss of cultural roots within the immigrant context).
- 3. Participation:** If I participate, I will be asked to complete six sets of questionnaires (Demographic, Brief Symptom Inventory, Trauma scale, God Image, AT.9 Test, and Resilience). These activities will take up to one hour to complete.
- 4. Benefits:** My participation in this study will help the researcher gather information about the role a God Image plays in resilience that leads to recovery from loss among Vietnamese immigrants.
- 5. Risks:** I am aware that in my participation I may volunteer some information that is personal. I understand that reflecting on the experience of loss may cause me to feel sad or overwhelmed. I have been assured by the researcher that risks will be minimized through the following:

- I may stop participating in the study at any time
- I may refuse to fill in any items that I may feel uncomfortable with
- I may ask questions about the study at any point in time.

6. Confidentiality: I have been assured by the researcher that the personal information that I will share will remain strictly confidential. I understand that the contents will be used for Thanh Tu's Doctoral Thesis. I am aware that results collected may be published in a journal or a conference. In this process, the researcher will protect my confidentiality by

- a. Not using my real name or any identifying information
- b. Respecting the Code of Ethics for Research and Publications of the Canadian Counselling Association (see [http:// www.ccacc.c/documents/ECOEAPR07.pdf](http://www.ccacc.c/documents/ECOEAPR07.pdf))

7. Anonymity: My participation and all my identifying information will be anonymous.

8. Conservation of data: All data collected will be kept in a locked cabinet in the office of thesis director, Dr. Christian Bellehumeur, Saint Paul University, Ottawa. Only Dr. Bellehumeur and Thanh Tu will have access to the data. The data will be kept for 7 years (until 2018), then all items will be destroyed.

9. Voluntary participation: I willingly participate in the study. I understand that I may be invited to take part in an interview in addition to the questionnaires and the AT.9 test. Since I choose to participate, I can withdraw from any part of the study at any time or refuse to answer any questions without worrying about negative consequences. In case I withdraw, I understand that the all data collected will be used for the analysis, unless I request the researchers to destroy my personal information.

10. Acceptance: I, _____ therefore agree to participate in the above research conducted by Thanh Tu who is in a Ph.D program in the Faculty of Human Sciences in Saint Paul University, Ottawa. The study is under the supervision of Dr. Bellehumeur, Faculty of Human Sciences, Saint Paul University.

I may contact the researcher or her supervisor if I may have any questions regarding the study.

Participant's signature: _____

Date: (dd/mm/yyyy) _____

Researcher's signature: _____

Date: (dd/mm/yyyy) _____

APPENDIX D

Please place a (✓) in the suitable places

1. Gender: _____ Male _____ Female
2. Age: _____ Years
4. Language most frequently used: _____ French _____ English _____ Others, specify: _____
5. How long have you been in Canada/US? _____ Year(s)
6. Where were you born?
 - 1: Vietnam _____ 2: Canada _____ 3: Refugee camp _____ 4: Other: _____
7. How did you come to Canada/US?
 - 1: Boat _____ 2: Flight _____ 3: Other _____
8. You left Vietnam because of:
 - 1: War _____ 2: Communist regime _____ 3: Family reunion _____
 - 4: A better life _____ 5: Other _____
9. How did you feel when you left Vietnam?
 - 1: Sad _____ 2: Lost _____ 3: Happy _____ 4: Threaten _____
 - 5: Excited _____ 6: Angry _____
10. How do you feel your life in Canada/US now?
 - 1: Pleased _____ 2: Lonely _____ 3: Lost _____
 - 4: Sad _____ 5: Satisfied _____
11. Social status: Are you.....?
 - _____ Single
 - _____ Married
 - _____ Divorced/separate
 - _____ In a common relationship
 - _____ Other, specify: _____
12. Are you in good health?
 - _____ Yes
 - _____ No
 - _____ Other, specify: _____
13. Level of education:
 - _____ Secondary School
 - _____ College diploma
 - _____ University degree – B.A
 - _____ University degree – M.A
 - _____ University degree –Postgraduate
14. Do you feel that your present work is in line with the studies you have made-
 - Yes, _____
 - No, _____
 - Other, specify:** _____
15. Are your studies in Vietnam being disregarded? (If yes, why?)
 - Yes, _____
 - No, _____
 - Other, specify: _____
16. Do you feel you can make a change in your daily situation?
 - Yes, _____
 - No, _____

- Other, _____
17. Type of family of origin you grew up in:
- _____ A family with two biological parents
 - _____ A single-parent family
 - _____ A family that adopted you
 - _____ Other, specify: _____
18. Total annual income of the person:
- | | | |
|--------------------------|---------------------------|--------------------------|
| _____ Less than \$15,000 | _____ \$15,000 to 19,999 | _____ \$20,000 to 34,999 |
| _____ \$35,000 to 44,999 | _____ \$45,000 to 54,999 | _____ \$55,000 to 74,999 |
| _____ \$75,000 to 89,999 | _____ \$ 90,000 to 99,999 | _____ \$100,000 and more |
19. Do you consider yourself mainly: ____ Asian? ____ Canadian? ____ Asian-Canadian?
_____ Other, specify: _____
20. Do you practice your religion? (e.g. attend mass, or take part in other religious ceremonies):
- _____ Very often (daily)
 - _____ Frequently (once a week)
 - _____ At least once a month
 - _____ A few times a year
 - _____ Once by year
 - _____ Rarely
21. Do you consider yourself as a spiritual/religious person?
- _____ Religious (identify the denomination) _____
 - _____ Cosmic (scientific or fictive understanding)
 - _____ Self (life experiences)
 - _____ Social (humanitarian values)
 - _____ No
22. How often are you in contact with your friends or family members?
- _____ Almost daily
 - _____ Every week (2 or 3 times a week)
 - _____ At least once a month
 - _____ A few times a year
 - _____ Once a year
 - _____ Rarely
 - _____ Does not apply to me
23. What are you favorite hobbies?
- _____ Fitness activities (e.g. sporting, walking)
 - _____ Readings
 - _____ Outdoor activities
 - _____ Social activities (e.g. bingo)
 - _____ Films
 - _____ Team games
 - _____ Manual work, handicrafts
 - _____ Other (s), specify: _____
24. Do you prefer group or solo activities?
- _____ Group
 - _____ By myself
 - _____ Both by myself and in group

Thank you for your helpful collaboration!

APPENDIX E¹



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 putting a cross, even though you would like your feelings towards God to be different.

1 = absolutely not 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	☐	☐	☐	☐	☐
closeness	☐	☐	☐	☐	☐
trust	☐	☐	☐	☐	☐
fear of being rejected	☐	☐	☐	☐	☐
respect	☐	☐	☐	☐	☐
disappointment	☐	☐	☐	☐	☐
satisfaction	☐	☐	☐	☐	☐
security	☐	☐	☐	☐	☐
love	☐	☐	☐	☐	☐
fear of being not good enough	☐	☐	☐	☐	☐
solidarity	☐	☐	☐	☐	☐
anger	☐	☐	☐	☐	☐
guilt	☐	☐	☐	☐	☐
uncertainty	☐	☐	☐	☐	☐
affection	☐	☐	☐	☐	☐
fear of being punished	☐	☐	☐	☐	☐
dissatisfaction	☐	☐	☐	☐	☐

¹ The words in Dutch mean “God Image.” This is the title of the Schaap-Jonker Questionnaire (2008)

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

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

God...	1	2	3	4	5
exerts power	☐	☐	☐	☐	☐
comforts me	☐	☐	☐	☐	☐
punishes	☐	☐	☐	☐	☐
gives me strength	☐	☐	☐	☐	☐
has patience with me	☐	☐	☐	☐	☐
lets me grow	☐	☐	☐	☐	☐
is trustworthy	☐	☐	☐	☐	☐
rules	☐	☐	☐	☐	☐
lets everything take its course	☐	☐	☐	☐	☐
leaves people to their own devices	☐	☐	☐	☐	☐
freed me from my guilt	☐	☐	☐	☐	☐
protects me	☐	☐	☐	☐	☐
sends people to hell	☐	☐	☐	☐	☐
guides me	☐	☐	☐	☐	☐
gives me security	☐	☐	☐	☐	☐
is unconditionally open to me	☐	☐	☐	☐	☐

APPENDIX F
CONNOR-DAVIDSON RESILIENCE SCALE
(Connor-Davidson, 2003)

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 last month. If a particular situation has not occurred recently, answer according to how you think you would have felt.

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

APPENDIX G

BRIEF SYMPTOM INVENTORIES (Derogatis, 1993).

Below is a list of symptoms people sometimes have. Please read each one carefully and click 'X' on the number that best describes your feelings during the last 14 days including today. Click only one number for each item and please do not skip any items.

Item		Not at all (1)	A little bit (2)	Moderately (3)	Quite a bit (4)	Extremely (5)
1	Nervousness or shakiness inside	1	2	3	4	5
2	Faintness or dizziness	1	2	3	4	5
3	The idea that someone else can control your thoughts	1	2	3	4	5
4	Feeling others are to blame for most of your troubles.	1	2	3	4	5
5	Trouble remembering things.	1	2	3	4	5
6	Feeling easily annoyed or irritated.	1	2	3	4	5
7	Pains in heart or chest	1	2	3	4	5
8	Feeling afraid in open spaces	1	2	3	4	5
9	Thoughts of ending your life	1	2	3	4	5
10	Feeling that most people cannot be trusted	1	2	3	4	5
11	Poor appetite	1	2	3	4	5
12	Suddenly scared for no reason	1	2	3	4	5
13	Temper outbursts that you could not control	1	2	3	4	5
14	Feeling lonely even when you are with people.	1	2	3	4	5
15	Feeling blocked in getting things done	1	2	3	4	5
16	Feeling lonely	1	2	3	4	5
17	Feeling blue	1	2	3	4	5
18	Feeling no interest in things	1	2	3	4	5
19	Feeling fearful	1	2	3	4	5
20	Your feelings being easily hurt.	1	2	3	4	5
21	Feeling that people are unfriendly or dislike you	1	2	3	4	5
22	Feeling inferior to others	1	2	3	4	5
23	Nausea or upset stomach	1	2	3	4	5
24	Feeling that you are watched or talked about by others	1	2	3	4	5
25	Trouble falling asleep	1	2	3	4	5
26	Having to check and double check what you do	1	2	3	4	5
27	Difficulty in making decisions	1	2	3	4	5
28	Feeling afraid to travel on buses, subways, or trains	1	2	3	4	5

Images of God, resilience and the imaginary in the face of loss

Item		Not at all (1)	A little bit (2)	Moderately (3)	Quite a bit (4)	Extremely (5)
29	Trouble getting your breath.	1	2	3	4	5
30	Hot or cold spells	1	2	3	4	5
31	Having to avoid certain things, places, or activities because they frighten you	1	2	3	4	5
32	Your mind going blank	1	2	3	4	5
33	Numbness or tingling in parts of your body	1	2	3	4	5
34	The idea that you should be punished for your sins.	1	2	3	4	5
35	Feeling hopeless about the future	1	2	3	4	5
36	Trouble concentrating.	1	2	3	4	5
37	Feeling weak in parts of your body	1	2	3	4	5
38	Feeling tense or keyed up	1	2	3	4	5
39	Thoughts of death or dying	1	2	3	4	5
40	Having urges to beat, injure, or harm someone	1	2	3	4	5
41	Having urges to break or smash things	1	2	3	4	5
42	Feeling very self-conscious with others	1	2	3	4	5
43	Feeling uneasy in crowds	1	2	3	4	5
44	Never feeling close to another person	1	2	3	4	5
45	Spells of terror or panic	1	2	3	4	5
46	Getting into frequent arguments	1	2	3	4	5
47	Feeling nervous when you are left alone	1	2	3	4	5
48	Others not giving you proper credit for your achievements.	1	2	3	4	5
49	Feeling so restless you could not sit still	1	2	3	4	5
50	Feelings of worthlessness	1	2	3	4	5
51	Feeling that people will take advantage of you if you let them	1	2	3	4	5
52	Feelings of guilt	1	2	3	4	5
53	The idea that something is wrong with your mind	1	2	3	4	5

APPENDIX H

DAVIDSON TRAUMA SCALE (Jonathan R.T. Davidson (1997))

ID: _____ Age: _____ Sex: ☐ Male ☐ Female
Date: _____ (dd/mm/yyyy)

Please identify the trauma that is most disturbing to you

Each of the following questions asks you about a specific symptom. For each question, consider how often in the last week the symptom troubled you and how severe it was. In the two boxes beside each question, write a number from 0-4 to indicate the frequency and severity of the symptom.

FREQUENCY

0 = Not At All
1 = Once Only
2 = 2-3 Times
3 = 4-6 Times

SEVERITY

0 = Not At All Distressing
1= Minimally Distressing
2= Moderately Distressing
3=Markedly Distressing

1	Have you ever had painful images, memories, or thoughts of the events?		
2	Have you ever had distressing dreams of the event?		
3	Have you felt as though the event was recurring?		
4	Have you been upset by something that reminded you of the event?		
5	Have you been physically upset by reminders of the event? (This includes sweating, trembling, racing heart, shortness of breath, nausea, or diarrhea)		
6	Have you been avoiding any thoughts or feelings about the event?		
7	Have you been avoiding doing things or going into situations that remind you of the event?		
8	Have you found yourself unable to recall important parts of the event?		
9	Have you had difficulty enjoying things?		
10	Have you felt distant or cut off from other people?		
11	Have you been unable to have sad or loving feeling?		
12	Have you found it hard to imagine having a long life span and fulfilling your goals?		
13	Have you had trouble falling asleep or staying asleep?		
14	Have you been irritable or had outburst of anger?		
15	Have you had difficulty concentrating?		
16	Have you felt on edge, been easily distracted, or had to stay "on guard"?		
17	Have you been jumpy or easily startled?		

APPENDIX I:

PROPOSED QUESTIONS FOR THE QUALITATIVE INTERVIEW

1. What did you experience when leaving Vietnam?
2. What did you experience when having lost a person dear to you?
3. How was your journey to Canada?
4. What sorts of things cause you to become distressed?
5. How do you manage your distress? What is needed to do?
6. I see that you have managed to survive all the dangers and difficulties you went through.
What was it that gave you strength?
7. Who was God for you in all your troubles?
8. What sustains you through these?
9. What gave you hope when coping with the most difficult loss?
10. Who truly understands what you are experiencing with this loss?
11. How do you find comfort in your suffering? How do you experience some moments of
joy despite losing your loved one? When?
12. For what are you most deeply grateful?
13. How does life seem to you right now? Is life worth living in spite of your pain, sorrow
and difficulty? Where do you find your inner strength?
14. How does your life matter? What is your best sense as to what your life is about and how
this loss fits in it?

Appendix K

UNIVERSITÉ SAINT-PAUL

BUREAU DE LA RECHERCHE
ET DE LA DÉONTOLOGIE



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TEL: 613-236-1393 FAX: 613-782-3005
WWW.USTPAUL.CA

SAINT PAUL UNIVERSITY

OFFICE OF RESEARCH
AND ETHICS

Ottawa, le 19 mai 2011

Monsieur Christian Bellehumeur
Faculté des sciences humaines
INTRA

Monsieur,

Je vous écris au sujet de votre demande pour le projet intitulé *Pilot Study on Vietnamese Immigrants: Exploring the Links between God Image, Imaginary resilience and Loss*.

Le comité entérine votre demande de déontologie.

Je vous prie de recevoir l'expression de ma considération distinguée.

Présidente


Hélène Tessier, Ph.D.
Comité de déontologie

Appendix L

PILOT STUDY REPORT

After receiving the approval from the Ethics Committee (see the appendix K), a pilot study to test the research method was administered to 6 immigrants (5 females, 1 male: 1 Korean; 1 Irakian; 4 Vietnamese; aged 39.5 in average- range from 27 to 52). The purpose of the pilot study was to observe participants' reaction to the study's questionnaires. Six sets of questionnaires (i.e., 2 questionnaires on God image (Lawrence, 1997 & Schaap-Jonker, 2008); Resilience, emotional distress and demographics and the AT.9) were administered to 6 participants. Five out of the six participants (83.3%) identified ambiguity in Lawrence's God image scale in the language used; they were confused to be asked "agree" or "disagree" on certain items. For instance, item 16: "God loves me regardless"; and participants asked "regardless of what?" Then they proposed to change the sentence to something like "God loves me just as I am." Participants questioned item 18 ("God keeps asking me to try harder"), item 27 ("God has never asked me to do hard things"), and item 35 ("God does not mind if I do not grow very much"). For them, the responses to these items depend on contexts and situations. With the pilot study as ground, we therefore chose the Questionnaire on God image of Schaap-Jonker (2008) which participants considered clear, concise, and comprehensible. Table 18 (group a) showed the pilot study's results

Table 18

Participants (N= 6; 1 male; 5 females)	God image- Jonker, 2008 Mean score	Emotional distress GSI: Raw score & T- score (BSI)	Resilience (Connor & Davidson, 2003)- mean score
P.1	4.64	0.79 63	2.6
P.2	4.55	0.62 64	3.3
P.3	5.00	1.05 66	2.3
P.4	4.91	0.57 63	4.0
P.5	4.88	0.54 62	3.1
P.6	5.00	0.78 63	2.8

Note: group a: the raw score and T-score of BSI and the mean of the first six participants on the 5 point-Likert Scale.

We wondered whether the issue of denial in terms of trauma experience or cultural setting that might have prevented participants from expressing emotional distress; since participants' drawings in the AT.9 test had given us clues about their trauma experiences; yet, the quantitative results did not show it at all. For instance, the drawing shows nine unrelated elements which suggest a non-structured imaginary category (see figure 10). This corresponds to the clinical profile (Durand, 2005).

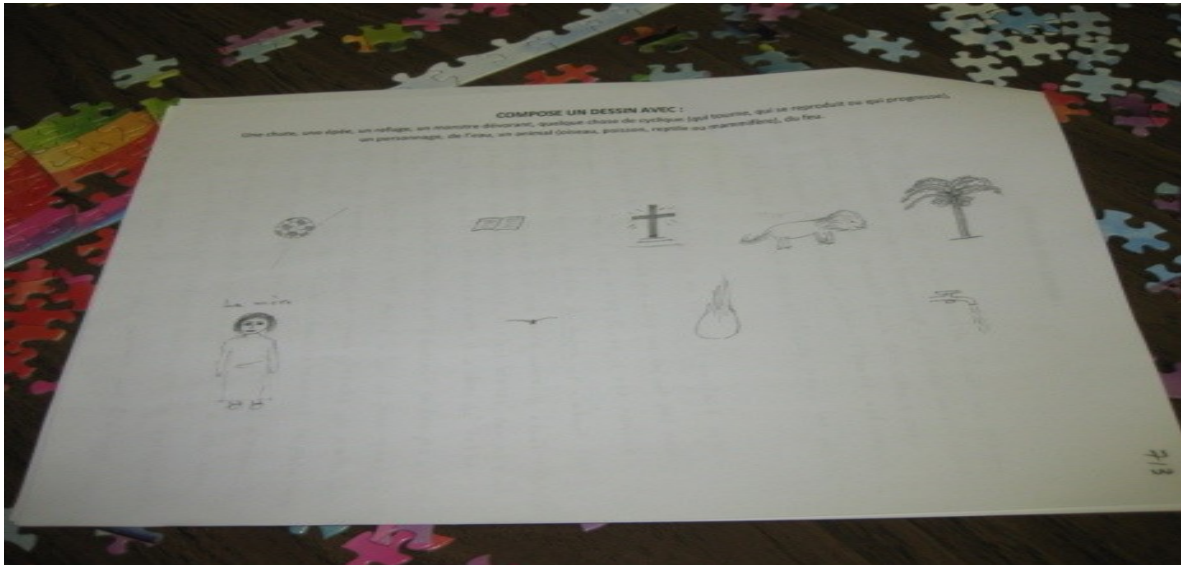


Figure 9 (unstructured category composed by a 43 year-old woman)

A participant's drawing and the mean of her quantitative result with regard to the 5 point-Likert Scale (God image = 4,88; Resilience = 3,12; Emotional distress: raw score: 0.54 and T-score 62, which appeared low. According to Derogatis, 1993, T-scores = 63 is considered clinical)

Given the fact that the AT.9 test was well understood and received by the first six participants, we then sent the research package (i.e., the consent form, socio-demographic questionnaire, the BSI, Jonker's God image Questionnaire, Connor-Davidson Questionnaire on Resilience, without the AT.9 test) to another 10 participants (6 males, 4 females; aged: 33.7 range from 18-53) to test their ability to express emotional distress and also to test the relationship among the variables (emotional distress, resilience and God image).

Table 19

Subject	BSI Raw score & T-score		CD-RESC	GI
1	1.07	67	3.32	4.21
2	0.62	64	2.48	3.75
3	0.57	63	3.2	3.6
4	1.07	67	2.28	3.48
5	0.79	63	3.24	4.6
6	0.78	63	3.84	4.84
7	0.56	64	3.4	4.27
8	1.05	66	2.8	4.66
9	0.62	64	3.76	4.18
10	1.08	68	0.88	4.18

Note: group b; N= 10(6 males and 4 females). GI, BSI and Resilience were measured according to 5 point- Likert Scale.

To understand the significance of these results, we must keep in mind that the highest point on the Likert scale is 5. The statistics data from the second group (on an average 5.2 years younger than the first group) show us that it is possible for participants to express emotional distress. Furthermore, after the pilot study, given the possible issue of denial of emotional distress among the Asian population (see table 19); we then decided to administer the Davidson Trauma Scale (Davidson, 1997) to inquire further into the participants' traumatic symptoms which may have resulted from various losses (see the measurement section).

APPENDIX M

Group 1

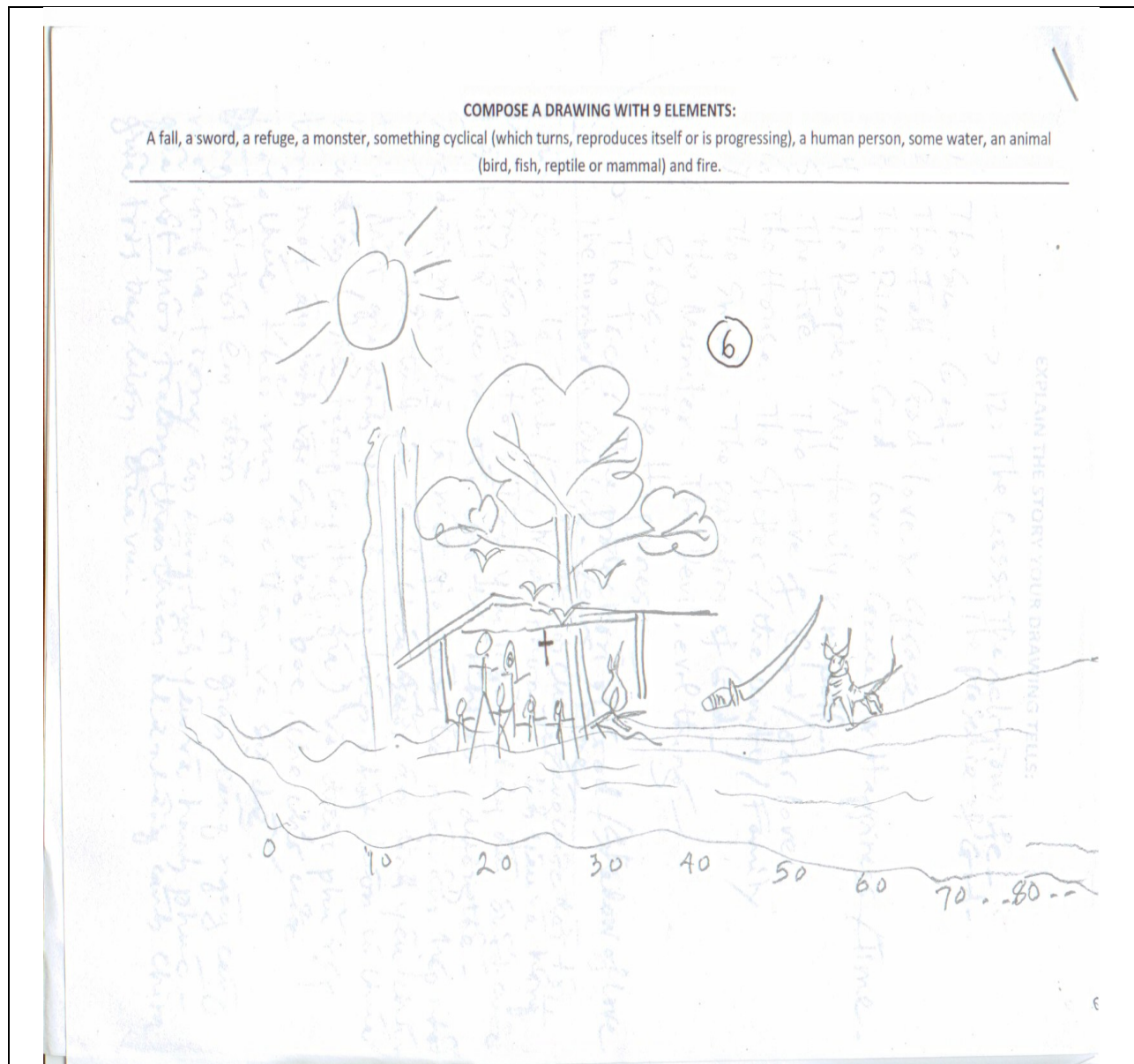


Figure 10: composed by a 55 year-old male (Case # 6)

Explain the drawing: “the Sun is God, the fall is God’s love and grace, the river is ongoing happiness, people are my family and myself, the fire is the love of God and our love, the sword is the protection of God, the monster is devil or evil things, birds are happiness, trees are shadows of love, the numbers are years ...our lives.

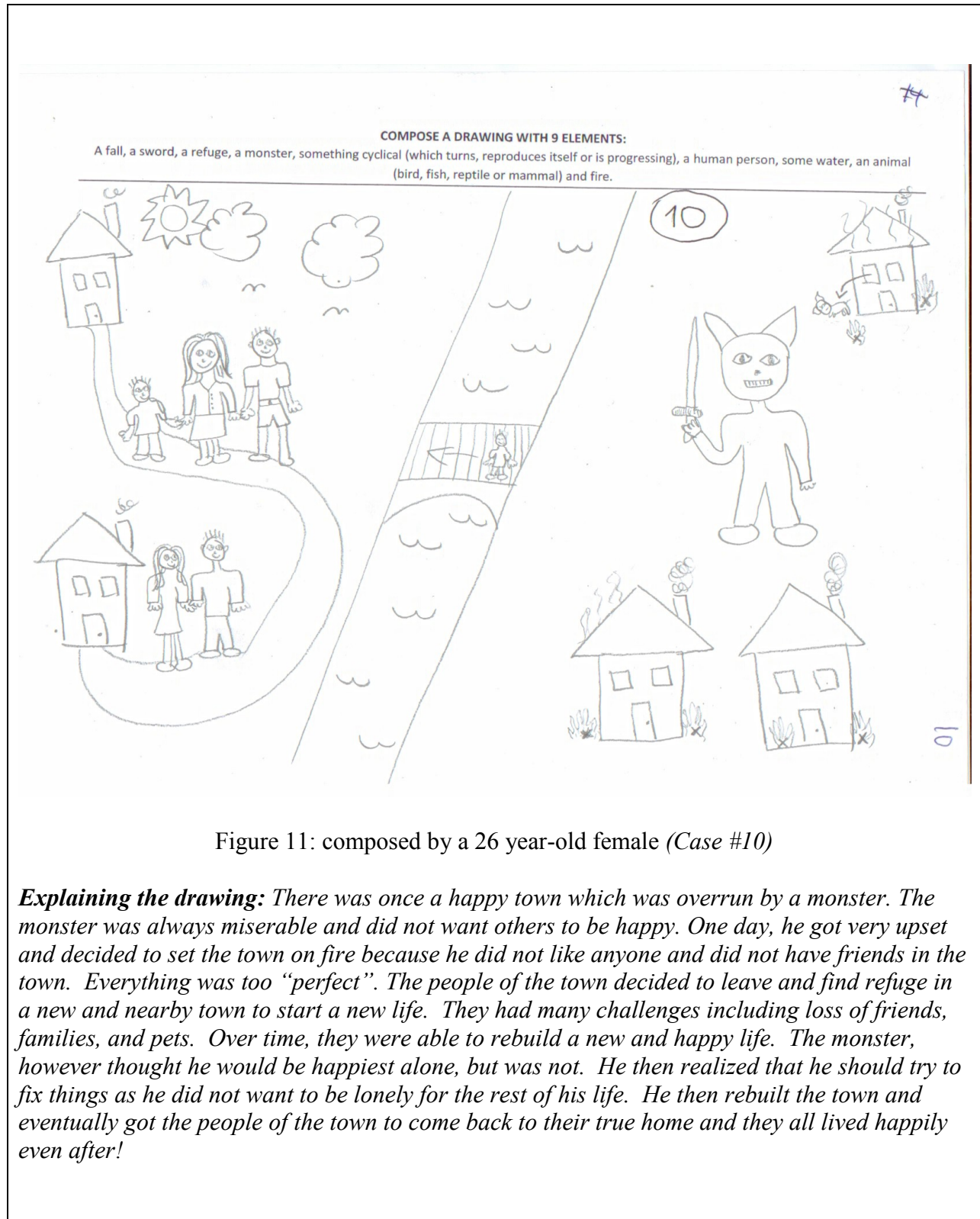


Figure 11: composed by a 26 year-old female (Case #10)

Explaining the drawing: *There was once a happy town which was overrun by a monster. The monster was always miserable and did not want others to be happy. One day, he got very upset and decided to set the town on fire because he did not like anyone and did not have friends in the town. Everything was too “perfect”. The people of the town decided to leave and find refuge in a new and nearby town to start a new life. They had many challenges including loss of friends, families, and pets. Over time, they were able to rebuild a new and happy life. The monster, however thought he would be happiest alone, but was not. He then realized that he should try to fix things as he did not want to be lonely for the rest of his life. He then rebuilt the town and eventually got the people of the town to come back to their true home and they all lived happily even after!*

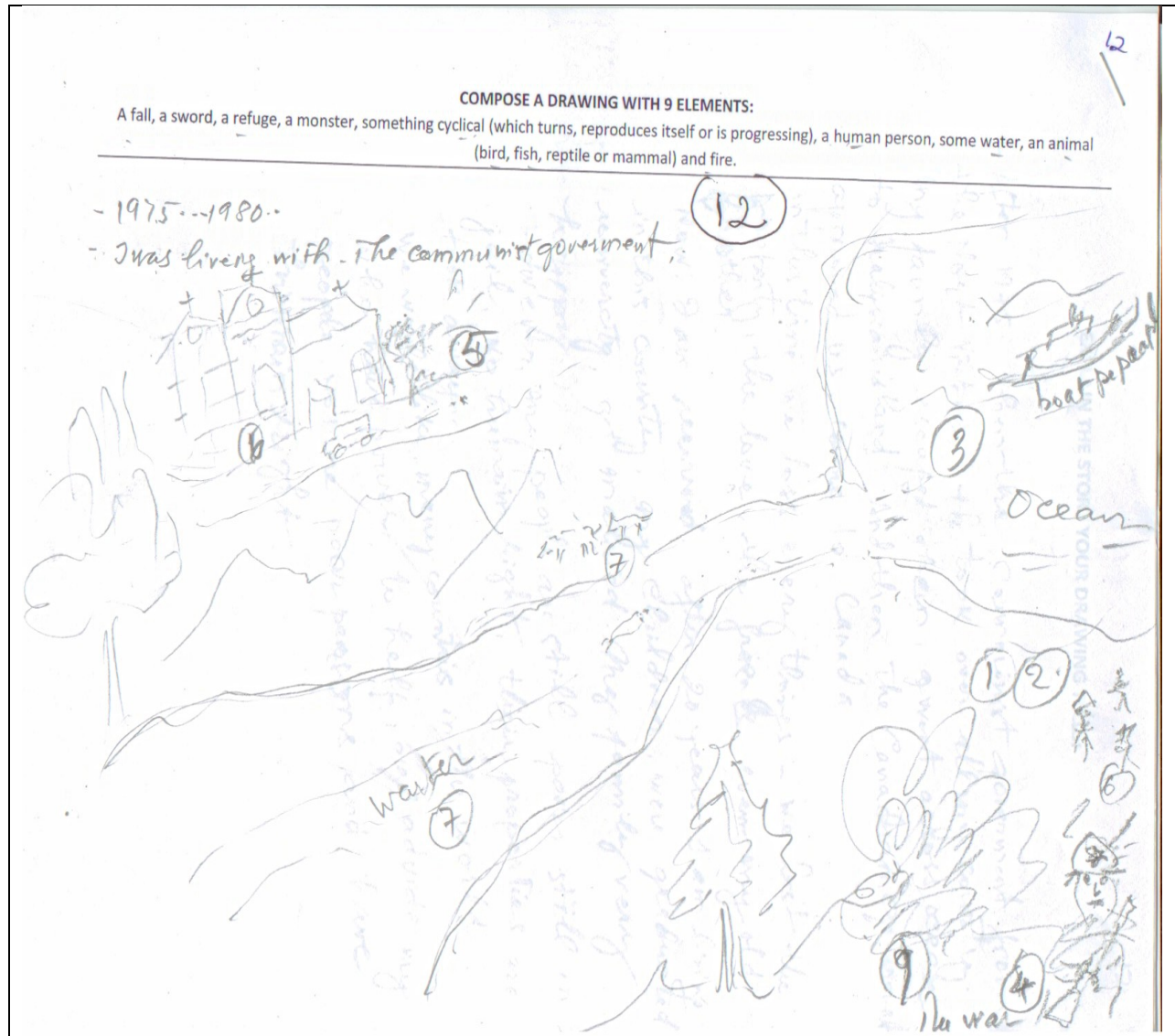


Figure 12: composed by a 65 year-old male (Case # 12)

Story of loss and hope: After 1975 when the Communist government from North Vietnam took over the country, my family escaped from them and went across the ocean to Malaysia and then to Canada. At this time, we lost everything: the property, the love, friends even my own. Now I am recovered after 20 years of living in this country; my children have graduated from university, my family is very happy. However, my people in Vietnam are still poor, still in jail; they have no human rights; their properties have been taken away. We would like many countries in the world that have power to help and advise my people...until there is no more poverty and all have human rights.

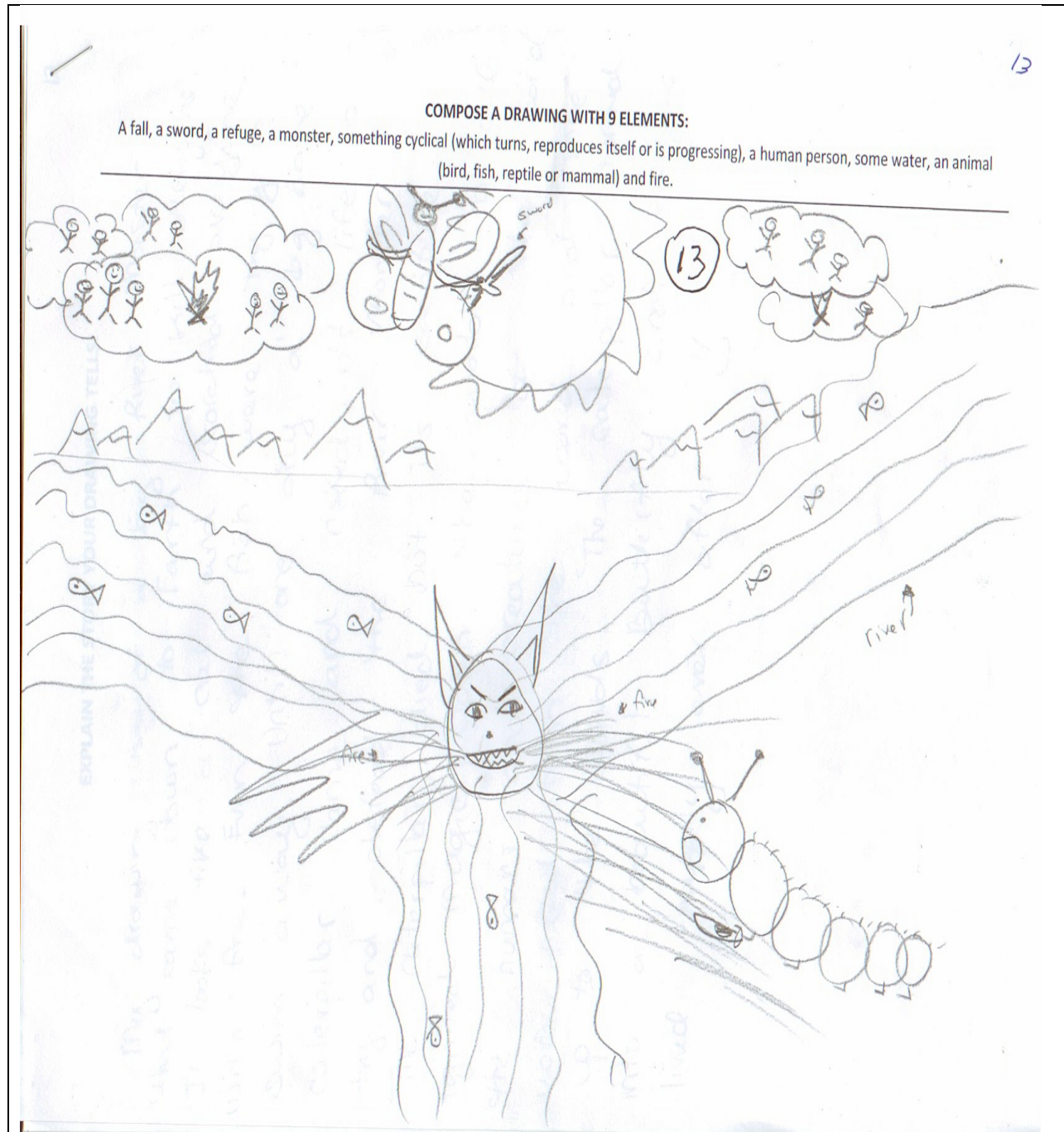


Figure 13: composed by a 24 year-old female (Case # 13)

Explaining the drawing: My drawing is of a big river monster that came down to earth to kill everyone. It looks like a cat and scorched everyone with fire-even the fish were trying to swim away. One day a big caterpillar died but its sacrifice ignited magic in the world and all the humans and creatures of the world were lifted from the world and rose up to the clouds. The caterpillar turned into a beautiful butterfly and every one lived happily ever after.

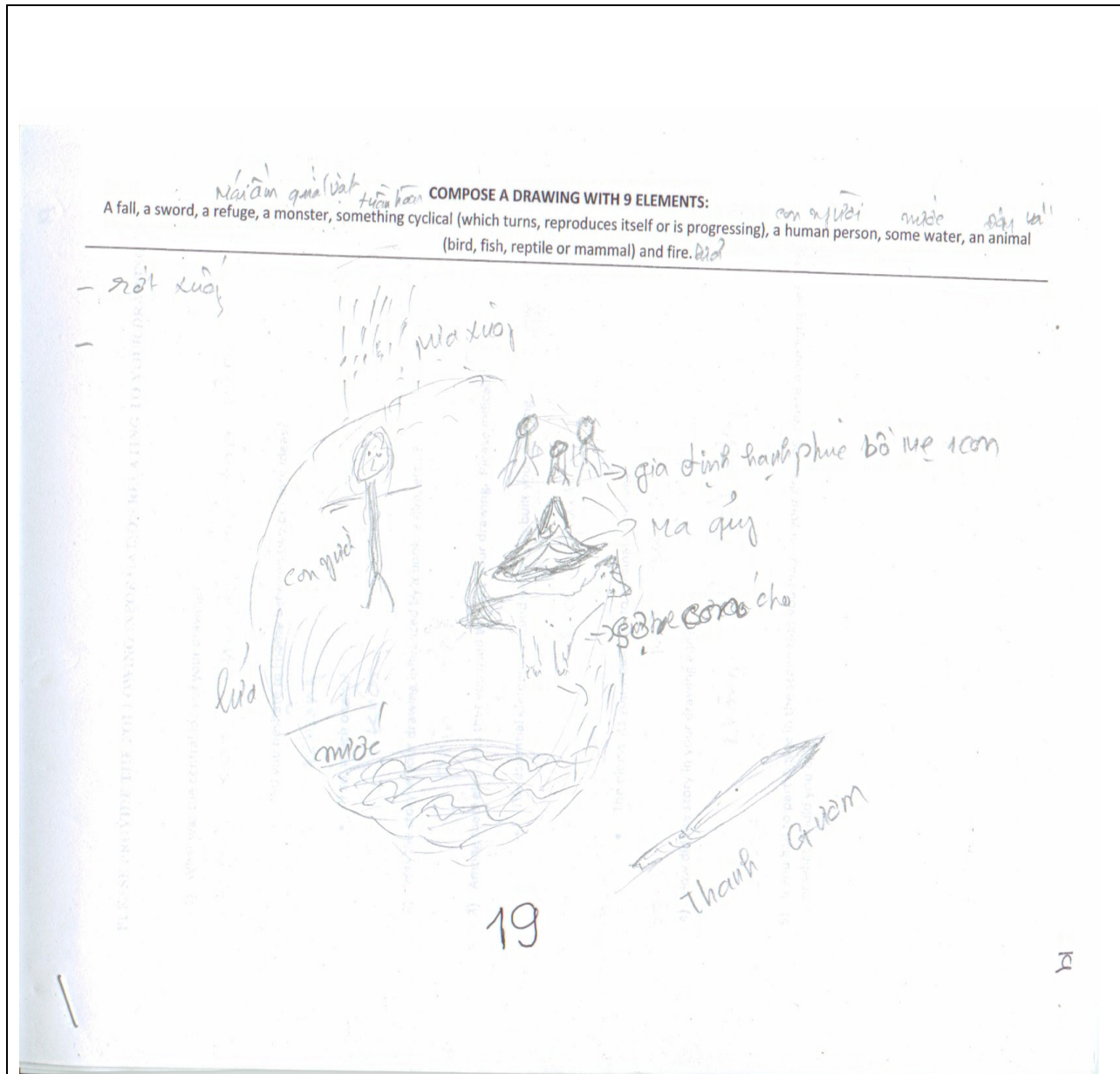


Figure 14: composed by a 58 year-old female (Case # 19)

Explaining the drawing: "The earth turning, the universe rotating. God creates humans with families that have parents and children. Humans were meant to have a peaceful life. A dog, represents the devil. While humans were having a peaceful life, the devil suddenly came and instigated humans to sin; humans got hurt because of doing wrong things. God sends rain: then water rises, and there is a great flood. After that, fire burns and destroys everything because of human sin"



Figure 15: composed by a 58 year-old Female (Case # 30)

Explaining the drawing: The monster used a sword to kill the good man and he fell down. After that, water from God woke him up and returned him to the family with animals surrounding them, in a place called heaven. The monster goes to hell and be burned.

Group 2

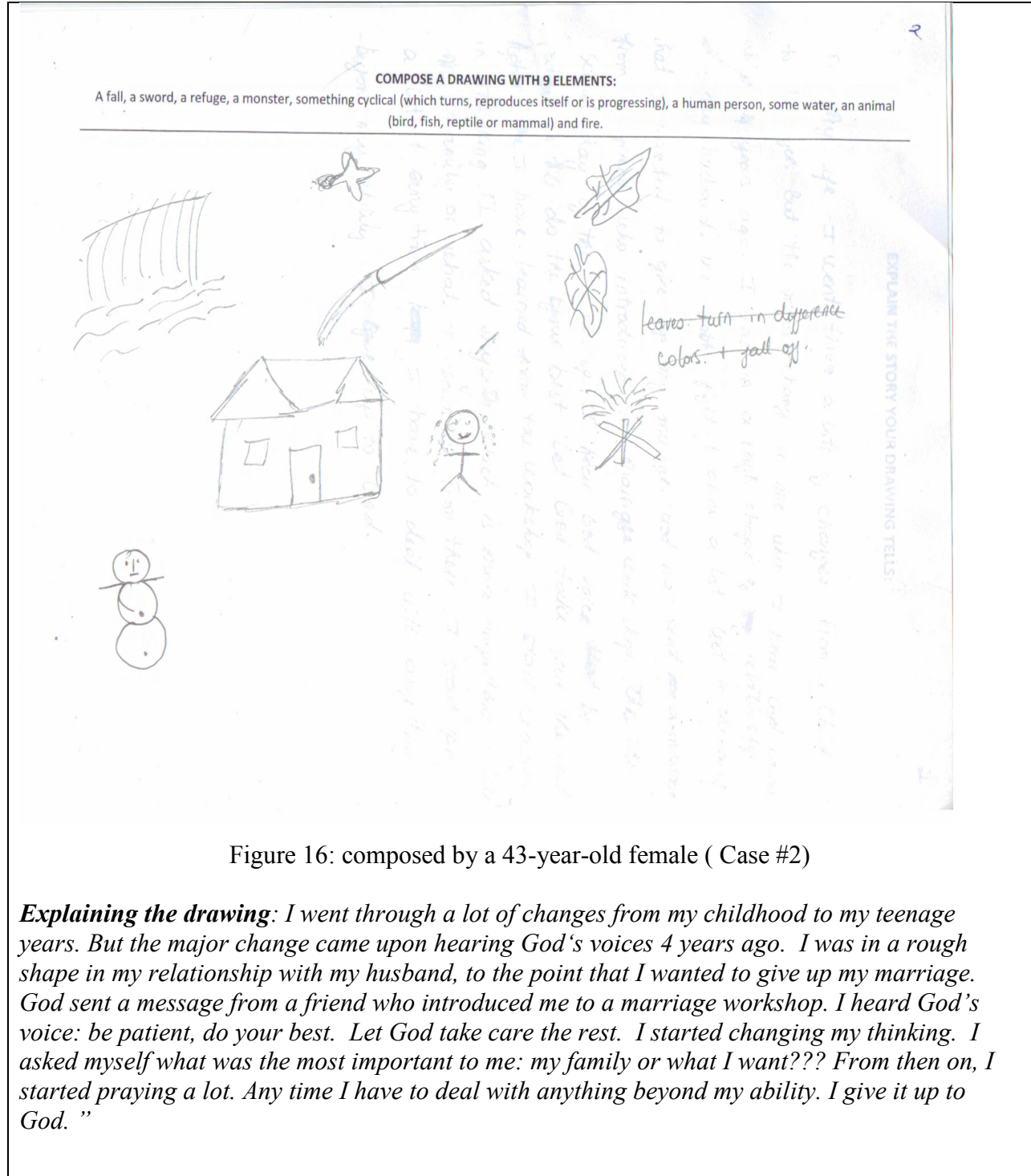


Figure 16: composed by a 43-year-old female (Case #2)

Explaining the drawing: I went through a lot of changes from my childhood to my teenage years. But the major change came upon hearing God's voices 4 years ago. I was in a rough shape in my relationship with my husband, to the point that I wanted to give up my marriage. God sent a message from a friend who introduced me to a marriage workshop. I heard God's voice: be patient, do your best. Let God take care the rest. I started changing my thinking. I asked myself what was the most important to me: my family or what I want??? From then on, I started praying a lot. Any time I have to deal with anything beyond my ability. I give it up to God. "

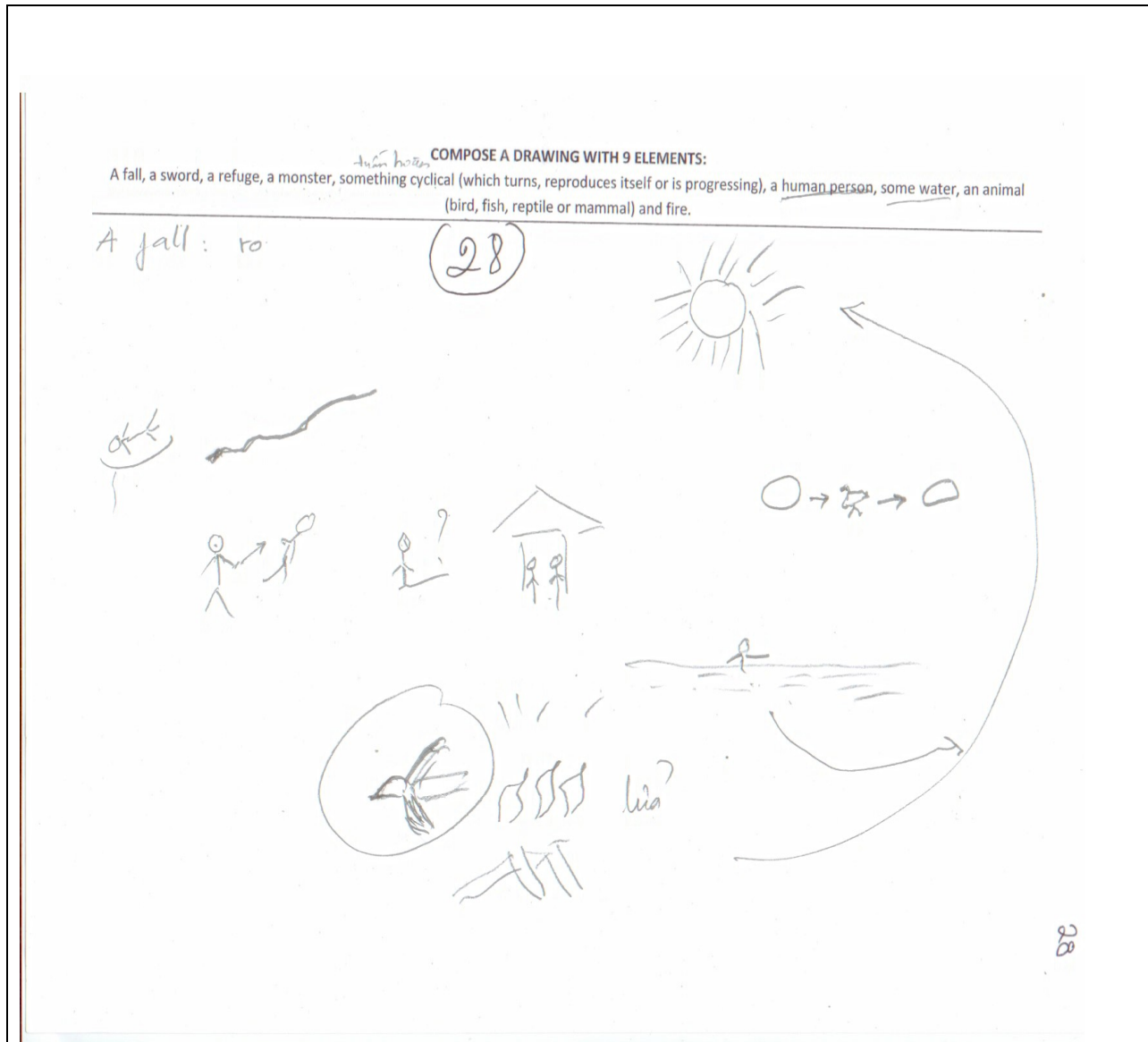
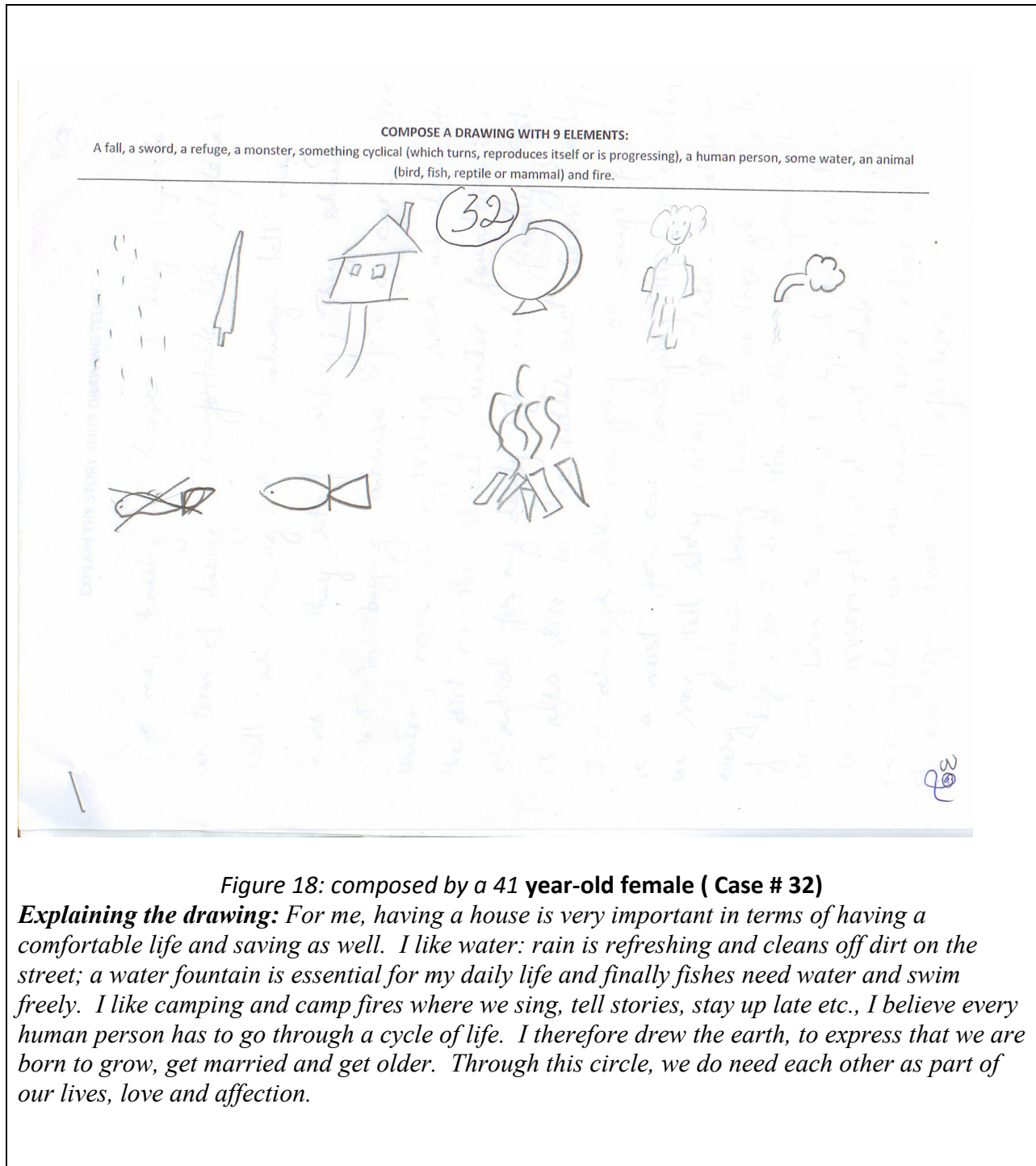


Figure 17: composed by a 55 year-old male (Case # 28)

Explaining the drawing: Ever since we were born, we have been drawn into sin. The Devil (the snake) represents uncontrollable forces which can be found in the human person: jealousy, hatred, and conflict ending in harming and killing each other. One wondered where he would go after death. Life: being born, getting sick, growing old, dying.. That is it! Would one return to ash or circulate once more: egg...chicken...egg? I want to be purified in water, to be cleansed of all dust, of all stains, to be really cleansed. I carry on my shoulders impurities and unclean things. I need to be purified by fire. I need the gifts of the Holy Spirit (the Dove) to be purified, to be wise and to become a fire in the sun...forever shining.



APPENDIX N

Copyright permissions

From: **Hanneke Schaap - Jonker** <hanneke.schaap@kpnplanet.nl>

Subject: RE: PhD research

To: "'tu nguyen'" <tufmm2000@yahoo.com>

Date: Tuesday, 21 June, 2011, 4:19 PM

Dear Thanh Tu,

A really interesting subject! I'm looking forward to your results. The questionnaire is in attachment. In my own version, I always mention that people can replace the word 'God' by 'the divine, 'a higher Power', or the word that does fit best in their opinion. Maybe a comparable remark is necessary for your sample.

All the best,

Hanneke Schaap

Dr. J. Schaap-Jonker

universitair docent godsdienstpsychologie, Rijksuniversiteit Groningen, Faculteit

Godsgeleerdheid en Godsdienstwetenschap

Oude Boteringestraat 38, 9712 GK Groningen

coördinator kenniscentrum religie en levensbeschouwing in relatie tot geestelijke gezondheid,
Dimence

Schuttevaerkade 80-88, Postbus 110, 8000 AC Zwolle

<http://religieggz.dimence.nl> | www.hannekeschaap.nl

From: **Jonathan Davidson, M.D.** jonathan.davidson@duke.edu

to: "**mnguy093@uottawa.ca**" <mnguy093@uottawa.ca>

date: Fri, Oct 5, 2012 at 3:31 PM
subject: RE: Asking for your permission, mailed-by: duke.edu
Important mainly because it was sent directly to you.

Dear Tu:

Thank you for returning the forms. I have pleasure to enclose the scale and user's manual. If there's anything else you need, please let me know.

Best wishes for a successful study.

Kind regards,

Jonathan Davidson

Appendix O



CURRICULUM VITAE: DOCTORAL PROGRAM IN COUNSELLING and SPIRITUALITY

1. PERSONAL INFORMATION

Nguyen, Thanh Tu.fmm. PhD cand.

2. LANGUAGES

Spoken: English, Vietnamese, French
Written: English, Vietnamese
Understood: French

3. EDUCATION

Master of Arts in Counselling and Spirituality	
in St. Paul University, Ottawa.	2010
Master of Arts in Theology	
in St. Paul University, Ottawa.	2008
Bachelor of Arts in Religious Education	
in St. Paul Nguyen Van Binh, Vietnam	2001

4. WORK EXPERIENCE

Fall 2008: doing internal internship in St.Paul University, Ottawa.
(Supervisors: Dalit Winberg, Claire Charbonneau, David Joubert and Wanda Dillabough)

January, 2010: doing external internship in St. Elizabeth Bruyère, 43 Bruyère Street
Ottawa, ON K1N 5C8. (Supervisor: Kirby Kranabetter)

September 2010- April 2012: Doing individual practicum (PhD practicum) under Dr.
Malette's supervision and doing couple practicum under Kathryn Guthrie's supervision,
St. Paul University, Ottawa.

5. TEACHING EXPERIENCE

August 2008: "Bridging the cultural gap between Vietnamese parents and teens".
Organized by *Vietnamese Eucharistic Youth Association, Toronto*

Summer 2009: "Understanding the psychology of teenagers". Organized by *Our Lady of
Lavang Church, Ottawa*

2010-2012: "Faith and psychology" for inter-novitiates. Organized by the Institute of
Franciscan Missionaries of Mary, Ottawa

Summer 2012: “Family system and self-awareness.” Organized by the Institute of Franciscan Missionaries of Mary, Vietnam

2012: “Family systems in two cultures through the lens of Catholic Teachings.” Organized by Our Lady of Lavang Church, Ottawa for married couples.

Fall, 2013: Teaching assistant: APA 5144: Counselling and Spirituality, St. Paul University, Ottawa

Winter, 2014: Teaching assistant: APA 5161: Understanding sexual abuse and trauma, St. Paul University, Ottawa

Summer 2014: Teaching IPA 5163: Human trafficking, trauma and spirituality, St. Paul University, Ottawa

6. RESEARCH EXPERIENCE

The Consecrated life: A journey into freedom. (2001). B.A thesis in Religious Education. Supervisor: Chan Hung Nguyen, St. Paul Nguyen Van Binh, Vietnam.

Spiritual Direction for Vietnamese Youth: A journey into transformation.(2007). M.A thesis in Theology. Supervisor: Dr. Achiel Peelman. St. Paul University,

Effects of family and social expectations on depressive sensitivity among Asian youth. (2008). M.A Research Proposal for Methodology of Empirical Research Course. Dr. Manal Guirguis-Younger. Ph.D, St. Paul University, Ottawa

Exploring the Relationship between spirituality and depression among Vietnamese Immigrants. (2009). M.A Research Memoire, Supervisor: Dr. Soti Grafanaki. Ph.D. St. Paul University,

Sex trafficking survivors and stage-specific model for recovery including spirituality. (2012). A comprehensive paper. Supervisor: Dr. Bellehumeur Christian.

God image, loss and resilience in relation to the imaginary among Vietnamese immigrants living in North America. PhD thesis since 2010. Supervisor: Dr. Bellehumeur.

7. RESEARCH ASSISTANTSHIP:

2012-2013: Research assistant for the project: «Une étude sur l’imaginaire des jeunes canadiens français par l’AT.9.». Key researchers: Dr. Bellehumeur, and Dr. Malette, J., Saint Paul University.

Summer, 2013: Research assistant of Dr. Marian Martin on her project for the international conference “An identity to build, an intimacy to live: a challenge for families” at Saint Paul University, Ottawa, Oct 3-5. 2013.

Summer, 2013: Documenting and synthesizing raw data for Religious Centre under supervision of Dr Martin Miriam. St. Paul University, Ottawa

8. INTERNSHIPS:

2008: doing internal internship in St. Paul University, Ottawa. (Supervisors: Dalit Winberg, Claire Charbonneau, David Joubert and Wanda Dillabough)

2010: doing external internship in St. Elizabeth Bruyère, 43 Bruyère Street Ottawa. (Supervisor: Kirby Kranabetter)

2010- 2012: Doing internal internship (PhD practicum) under Dr. Malette's supervision and doing Couple Practicum under Kathryn Guthrie's supervision.

9. PUBLICATIONS:

Thanh Tu. (2003). On forming spiritual/religious life. *Journal of Pastoral Theology and Spirituality* 40, 55-62. (Vietnam)

Thanh Tu. (2004). Witness of the Faith Community: A secure base for Evangelization. *Journal of Pastoral Theology and Spirituality* 43, 50-57. (Vietnam)

Nguyen, T. T., Bellehumeur, C. (2013). Grieving the Loss Linked to Childhood Sexual Abuse Survivor: A Narrative Therapy in Search of Forgiveness. *Counselling & Spirituality* 32(1), 37-58

Nguyen, T.T., Bellehumeur, C., Malette, J. (*in press*). Women survivors of sex trafficking: a trauma and recovery model integrating spirituality. *Journal of Counselling and Spirituality*.

Nguyen, T.T., Bellehumeur, C. (*in press*). The images of God and resilience among Vietnamese immigrants: implications for theory, practice and research. *Journal of Psychology and Theology*.

Nguyen, T.T., Bellehumeur, C. & Malette, J. (*manuscript*). The images of God, experience of loss and the imaginary: a study among Vietnamese immigrants. *Journal of Counselling and Spirituality*.

Nguyen, T.T., Bellehumeur, C., (*in press*). *Faith and post-traumatic growth among Vietnamese immigrants: a qualitative research report*. *Journal of Counselling and Spirituality*.

10. RESEARCH REPORT

February 14: 2013: Image of God, resilience, and the imaginary: a study among Vietnamese immigrants who have experienced losses." (*The 18th Annual Graduate Interdisciplinary Conference, Concordia University, Montreal*)

October 4, 2013: "Images of God, resilience, and the imaginary: a study among Vietnamese immigrants who have experienced loss." *2013 International Conference: An Identity To Build, An Intimacy To Live: A Challenge For Families*. St. Paul University, Ottawa

March 27th, 2014: Growth after Trauma: a qualitative research report. *The International colloquium on "From Psychology to Spirituality"*, St. Paul University, Ottawa

11. PUBLIC LECTURES

December 5, 2012, "Survivors of sex trafficking: a stage-specific model for trauma recovery integrating spirituality" at *Saint Paul University, Ottawa*.

March 20- March 23, 2013: "Courage To Be." The Lenten Retreat at *Our Lady of Lavang Church, Ottawa*

12. SCHOLARSHIPS

2006-2012: Porticus Asian Limited, HonKong.

2010: PhD admission Scholarship -Saint Paul University, Ottawa, Canada

2011: PhD admission Scholarship- Saint Paul University, Ottawa, Canada

2012 : Marie-Léonie Paradis- Saint Paul Université, Ottawa, Canada

2013: Belleau Fund- Saint Paul University, Ottawa, Canada

