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# Mothers' Religious Influence on Children Experiencing Trauma: Haiti Community Clinic Focus Groups

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The full text of the dissertation is under embargo; the abstract is reprinted below:

Mothers' Religious Influence on Children Experiencing Trauma: Haiti Community Clinic Focus Groups  
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An earthquake measuring 7.0 on the Richter scale hit Haiti on January 10th, 2010. The earthquake, an urgent crisis, occurred in the context of persistent social dysfunctions, amplifying both the chronic poor living conditions and adversities for children and families. The purpose of the study was to enquire into the possible ways children in Haiti are socialized by the religiousness and other coping ways of their mothers and caretakers in the childhood contexts of societal and continuous trauma. Participants were Haitian mothers (N = 27) who participated in three focus groups that were conducted in their location of residence: Canaan-Damien (n=10), the Providence Orphanage (n=8), and Blanchard (n=9). Participants were also the children of these mothers (N=42). Religious and non-religious qualitative themes emerged from the focus group discussions. For example, some of the themes were: *You talk to God to help you; God will not leave you; Parenting Factors, and Shame and Embarrassment*. The themes and their frequencies formed five thematic clusters: (a) Positive Religious Cluster, (b) Negative Religious Cluster, (c) Positive Secular Cluster, (d) Negative Secular Cluster, and (e) Shame and Embarrassment Cluster. The correlations among the thematic clusters, as well as their relationships with the Resilience and Vulnerability scores of the children were studied. The Resilience and Vulnerability scores were derived from ratings of the children's House-Tree-Person (HTP) drawings reported in a previous study (Roysircar, Colvin, Afolayan, Thompson, & Robertson, 2017). Data-based similarities and differences between and among thematic clusters, as well as in the thematic clusters by the children's different locations, were investigated. There was a significant negative relationship between the Positive Religious Cluster and HTP Vulnerability. There was a significant positive relationship between the Shame and Embarrassment Cluster and HTP Resilience. All locations had a significantly higher incidence of the Positive Secular Cluster than the Positive Religious Cluster. There was a nonsignificant effect of location on the Positive Religious Cluster. However, some themes differed by location. The study's results, limitations, and implications for future research are discussed.