Exploring the feasibility of employing externalization as a methodological modification to traditional autoethnographic approaches

Darlene Wooten

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EXPLORING THE FEASIBILITY OF EMPLOYING EXTERNALIZATION AS A
METHODOLOGICAL MODIFICATION TO TRADITIONAL
AUTOETHNOGRAPHIC APPROACHES

A dissertation submitted in partial satisfaction of
the requirements for the degree of
Doctor of Education in Organizational Leadership

by

Darlene Wooten

March, 2016

Daphne DePorres, Ed.D. - Dissertation Chairperson
This dissertation, written by

Darlene Knight Wooten

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 requirements for the degree of

DOCTOR OF EDUCATION

Doctoral Committee:

Daphne Deporres, Ed. D., Chairperson

Kay Davis, Ed. D.

Julie Armstrong, Psy. D.
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DEDICATION

I lovingly dedicate this dissertation to my family, Karen, Darryl, Savaughna, Darrlynn and the family dog, “Scottie” for their love and being my mainstay during this learning adventure. I would be remiss if I did not mention my parents, Pastor Henry and First Lady Carrie Knight who are deceased. I would not be the person I am today if it had not been for their abundant love, discipline, and spiritual guidance. Much gratitude to my spiritual leaders, Bishop Charles E. Blake and Lady Mae Blake. A special thanks to “Aunt Barbara” for being a role model and the first in our family to obtain a doctoral degree. In addition, to my church family, Greater True Light Tabernacle COGIC; to my friends Erika, Ardette, Byroena, Debbie, Lorna, Dr.B, Tommie, Rodney, Lottie, Vincent (Mentor), and Mary for your support through this process. Thank you to my colleagues (past and present) for the challenges and encouragement that has made me a better person.
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EXPLORING THE FEASIBILITY OF EMPLOYING EXTERNALIZATION

VITA
DARLENE KNIGHT WOOTEN

EDUCATION
M.A. Counseling Psychology
Loyola Marymount University, Los Angeles, CA.

B.A. Psychology
University of Southern California, Los Angeles, CA.

TRAINING
2008- Graduate, Association of California Community College Administrators (ACCCA) Mentor program
2007-Graduate, Association of California Community College Administrators (ACCCA) Administration 101 Program
2006-DSP&S Director’s Training, California Community Colleges Chancellor’s Office

TEACHING EXPERIENCE
08/13  Adjunct Faculty, Coastline Community College: Le Jao Center, Westminster, CA., Garden Grove Center; Military and Contracts Program: Pacific Clinics, Tustin, CA.; Fountain Valley: Distance Learning; Costa Mesa: Early College High School  Teach Psychology 100; Psychology 118 (STAR program and Telecourse); and Counseling 105 courses at aforementioned campuses.

08/12  Adjunct Faculty, Westwood College, (Upland, Anaheim and Torrance Campuses) Teach psychology, sociology, humanities, and criminal justice courses. Los Angeles Community College District

04/14  PACE Faculty, Pierce College, Woodland Hills, CA Teach General Psychology to 100 college students in PACE (Program for Accelerated College Education) which is a two-year program, designed to provide students the ability to graduate in approximately two years.

02/12  Adjunct Faculty, West Los Angeles College, Culver City, CA. Taught personal development course in college survival to college and high school students.

01/12, 08/07  Adjunct Faculty, Los Angeles Trade Technical College, Los Angeles, CA. Taught personal development courses in career planning and general psychology to college and high school students.
EXPLORING THE FEASIBILITY OF EMPLOYING EXTERNALIZATION

ADMINISTRATIVE EXPERIENCE

06/10  **DSP&S Coordinator/Counselor**, Los Angeles Southwest College, Los Angeles, CA. Oversaw program for students with disabilities.

06/06  **Bridge Coordinator**, Los Angeles Unified School District, Carver Middle School, Los Angeles, CA. Coordinated and administrated all Individual Education Plans (IEPs) for students identified in the Special Education program.

COUNSELING EXPERIENCE

01/15, 12/10, 09/02  **Counselor**, Los Angeles Trade Technical College, Los Angeles, CA. Provided counseling to students pursuing a certificate in a vocation; students needing academic counseling to receive an Associates degree or to transfer to the University.

CERTIFICATION/LICENSURE

Marriage and Family Therapist Licensure, State of Tennessee  
Pupil Personnel Services Credential, State of California  
National Coalition Building Institute –Diversity Trainer Certification

ACHIEVEMENTS-HONORS

2010-Presenter, Staff Development and the Sheriff’s Department Workshop, *Strategies For Working With Students With Disabilities*  
2009- Presenter, The Hawaii International Conference on Education, *The ‘Go Pro’ Principles for Student Athletes*  
2008 –Author, *We Are Winners, Not Whiners!* February *ACCCA Reports*

PAST LEADERSHIP POSITIONS

2000-2001, **Member**- Board of Directors, the Wesley Center, United Methodist Church, Woodworth, LA. The Wesley Center is a peaceful gathering place set amidst 632 acres of native woodland.

2000-2001, **Lay Leader**- Immanuel United Methodist Church, Lafayette, LA. The Lay Leader is a member of the church council. The council provides the administrative role as the local church envisions, plans, implements, and annually evaluates the church's mission and ministry.

1997-1998, **President**- Say No to Adolescent Pregnancy (SNAP), Jackson-Madison County Health Department, Jackson, TN. A state funded program to provide education to adolescents in the prevention of pregnancy.

1996-1997, **Chairman**-Tennessee Nutrition and Consumer Education Program (TNCEP), Jackson, TN. TNCEP is a nutrition education program for Tennessee families who received Food Stamps. Families were taught how to choose and prepare nutritionally adequate diets and empowered them toward self-sufficiency.
The number of Americans reporting extreme stress has increased over the past six years. Prolonged exposure to stress has the potential of producing severe damage to the health of individuals. Pennebaker and Graybeal (2001) stated, “When people write about their deepest thoughts and feelings about an emotionally significant event, there are numerous benefits in many domains (e.g., health, achievement, and well-being) result” (p. 1). Writing about extremely stressful situations has health and wellness benefits. In this study autoethnography and externalization were combined as a method to examine how feasible it might be for persons to employ the combined methods to process stressful life events. The externalization involved creating a persona (White & Epston, 1990). The personas represented the lived experiences of work and family. In addition, the externalization application was the backdrop for the theoretical concepts of hardiness, thriving, resilience, and posttraumatic growth. The feasibility of this method was explored through an analysis of the autoethnographer’s lived experiences of the externalization, where the researcher was also the autoethnographer-externalizer. As a result of the externalization, relevant themes emerged in the areas of Memory of Work and Family Events, Challenge Indicators, Management Indicators, Activity Persistence Indicators, Growth Indicators, and Positive Change Indicators. The researcher’s experience, and the themes that emerged from the data, provided evidence that applying the externalization to the autoethnographic process was feasible and suggests a methodological combination that might help others, including leaders, cope with the stress associated with traumatic events.
Chapter One: Introduction

This study explored the feasibility of a method intended to provide participants with a method of facilitating deep reflection on significant life events and to process the resulting information in a positive fashion. The outcomes of employing this method include meaning making, and ideally liberation from the stranglehold that some life experiences have on an individual. The method employed in this research was a combination of traditional auto-ethnographic approaches (Ellis & Bochner 2006) and externalization (White & Epston 1990). The feasibility of this method was examined through an analysis of the author’s lived experiences from the externalization. The study was organized by setting the contextual framework with a discussion about resilience, hardiness, thriving, and posttraumatic growth. Subsequently, there was a discussion about autoethnography and externalization. An in-depth discussion of the aforementioned theoretical constructs will take place in chapter two of the literature review.

The proposal was organized by providing the background of the research, a statement of the problem, statement of the purpose, research question, the significance of the topic, key definitions, key assumptions, limitations of the study, and a summary.

Background

The lessons of the past five years have increased my self-knowledge as well as what it means to be a leader. One of the lessons that I learned was in spite one’s striving for goals and dreams, there will be challenges to face in life. My response to the challenges is determined by my character, Helen Keller stated, “Character cannot be developed in ease and quiet. Only through experience of trial and suffering can the soul be strengthened, ambition inspired, and success achieved” (Keller, n.d., para 1.). Blake (2000) stated, “Courage and character are
revealed under stress. Pressure builds character. A person’s strength and ability are manifested and developed when the burden is heavy and the conditions are complicated and adverse” (p. 25). I explored life’s challenges and what can be learned from these lived experiences as a leader through a combined method of traditional autoethnography and externalization.

Autoethnography and externalization both involve writing. According to the following study, writing is a strategy that can assist leaders in getting through tough times.

Almost 30 years ago, Pennebaker and Graybeal (2001) designed a study to explore what would happen when participants wrote about events that were distressing for 15 to 20 minutes per day for 3-4 consecutive days. Individuals in a control group wrote about trivial events for the same amount of time. Pennebaker and Graybeal (2001) reported, “When people write about their deepest thoughts and feelings about an emotionally significant event, numerous benefits in many domains (e.g., health, achievement, and well-being) results” (p. 1).

Pennebaker discovered the individuals who recorded their innermost reflections about their distress went to the doctor less in subsequent months. The data were consistent for individuals who had severe illnesses as well as individuals who were not ill at all. There was a reduction of stress and significant improvement in the individual’s immune system. The study was performed across cultures over the world. After interviewing participants one month later, Pennebaker ascertained the reason writing about emotional topics improved health was, “the experiment changed the way they "thought about" the event (or events) or "made me realize why I felt the way I did" (p. 2). Pennebaker’s study revealed there was a connection between cognitive change and writing. One method that demonstrates this process is by writing personal stories or autoethnography.
Autoethnography

Denzin and Lincoln (2000), defined Ellis and Bochner’s autoethnography as personal stories that delve into the deep thoughts of a one’s connection with their social environment, communication, with times past; described in qualitative research that provides meaning to the researcher and readers. Reed-Danahay (1997) reported, autoethnography is “a form of self-narrative that places the self within a social context” (p. 9). “The researcher comes out of the shadows and into the study” (Smith-Sullivan, 2008, p. 26).

Ellis (2004) discovered autoethnography was “therapeutic” (p. 135), especially when working with topics of emotion. It was an Ellis’ belief that autoethnographic writing had therapeutic value for her, as well as other participants and readers because the dialogue left a process of mutual exploration. The purpose of the inquiry is to investigate that which we do not know. The writing is about self and self is the power of the story.

Externalization

According to Epston and White (1992), the hidden stories become illuminated through the externalizing process. Externalizing conversations begin with a historical account. It begins with a historical account of the impact the problem has had on the person’s life. The person becomes separated from the story which provides the entrance to author a new story. Ultimately, the re-authored story developed as the externalization conversation occurs, essentially dissolving the problem. What has been binding for the individual is liberated for the individual. Interestingly, creating a different story frees and develops meaning and growth in the person (Keeling & Bermudez, 2006).

The person is the source of all meaning (Epston & White 1992). When the person is the consultant for him or herself, the person becomes the authority of everything: their problems as
well as the solutions. When significant events have been identified, it is the person who has the
power to unravel the mysteries. This begins the process of storytelling and meaning-making
(Epston & White 1992).

White and Epston (1990) discovered, “in a storied therapy, letters are used primarily for the
purpose of rendering lived experience into a narrative or ‘story,’ one that makes sense
according to the criteria of coherence and lifelikeness” (p. 125). Using letters as a kind of case
record, the letters change the power dynamic typical between a therapist and consulting person.

Problem Statement

The 2013 findings of a study entitled Stress In America by The American Psychological
Association (APA) revealed, “The number of Americans reporting extreme stress continues to be
high — 20 percent say their stress is an 8, 9 or 10 on a 10-point scale, which is comparable to the
numbers reporting extreme stress in 2011 (22 percent), 2010 (24 percent), and 2009 (23
percent)” (p. 14). In the 2015 report by the APA entitled, Stress in America: Paying With Our
Health, “nearly one-quarter say that they experience extreme stress about money (22 percent rate
their stress about money during the past month as an 8, 9 or 10 on a 10-point scale)” (p. 2). In
some cases, individuals are foregoing medical care because of lack of finances. The Center For
Disease Control (CDC) concluded in a 2015 report, “adults who experienced extreme stress more
frequently had chronic obstructive pulmonary disease, heart disease, and diabetes compared to
adults without extreme stress” (Weller, 2015, para 5). This research posited that perhaps a study
exploring the feasibility of an autoethnographic-externalization exercise, which is the
combination of autoethnography and externalization, might serve as a conduit for processing and
alleviating the effects of stressful life events.
Purpose Statement

The purpose of this study was to explore the feasibility of a combination of autoethnography and externalization, for the purpose of helping individuals process and alleviate the effects of stressful life events.

Research Question

What is the feasibility of employing externalization as a methodological modification to traditional autoethnographic approaches?

Theoretical Perspectives

This is an overview of the theoretical perspectives on resilience, hardiness, thriving, and posttraumatic growth. The brief discussion of each theory establishes the framework of the study and introduces what is to come in the literature review.

Resilience

Maddi and Khoshaba (2005) contended that resilience is based on three attitudes that allow a person to create a mentality of bravery. Resilience is the backbone and catalyst of two abilities that produces transformational coping and social support. Transformational coping is the individual’s way of reframing the hardship by affirming life’s challenges happens to everyone, which diffuses the intensity of the hardship. Social support is how the individual remains connected to the interactions of people no matter how contentious the surrounding environment.

Hardiness

One researcher in the stress hardiness field is a clinical psychologist at the City University, New York, Dr. Susan Kobasa. In 1979, she carried out a study on a group of executives who were under extreme stress from their company; the Illinois Bell Telephone Company (IBT) was undergoing radical restructuring. Responsibilities included adjustments in
performance evaluations, implementing federal government imposed affirmative action and instituting more demotions. These sudden changes combined with the challenges experienced in one's personal life strongly implicated that the management executives’ scores on the surveys would be elevated.

After the culmination of the study, Kobasa discovered that the there were character traits or attitudes that emerged in shielding the middle and upper management executives from destroying their health due to stress. The character traits (3Cs) or attitudes are commitment, control, and challenge. If a person is strong in commitment, he or she stays focused on the activities and people surrounding them; whether it is related to work or life in general (Maddi & Khoshaba, 2005. The person’s involvement remains concentrated regardless of how stressful the hardships become. One who has an attitude strong in control takes charge of the hardship and has no doubt that a resolution can be found. One who has an attitude, strong challenge accepts change as part of a normal part of development, and it is the catalyst for growth and discovering meaning in life. Maddi and Khoshaba (2005), stated, individuals who possess an attitude high in commitment are connected to the individuals and activities in their environment, rather than disconnecting when experiencing hardship because there is a sense of purpose associated with it. Individuals who possess high control feel that weakness and dormancy are counterproductive. Individuals who possess high challenge look at challenges as an opportunity to improve and renew.

Maddi (2006) ascertained to have endurance and drive are key components in dealing with stress. As endurance and drive, hardiness allows one to confront hardships. Hardiness activates one's ability to continue and achieve under distress.
Thriving

Thriving is the person's capability to go beyond their physical or mental development (Norlander, Von Schedvin, & Archer, 2005). O'Leary and Ickovics, (1995) indicated a ranking system from lowest to highest when an individual experiences hardship in life: (a) when the individual collapses under extreme stress; (b) the individual pulls through, but is wounded as a result; (c) the individual is retracting to the state of persistence; and (d) the individual is growing or thriving.

Posttraumatic Growth

Posttraumatic growth is “positive change experienced as a result of the struggle with a major life crisis or a traumatic event” (Posttraumatic Growth, 2011, para. 1). Posttraumatic growth is not about maintaining emotional stability in the midst of a crisis; (Bonanno, 2004) but about making adjustments, flourishing, and succeeding during very arduous times in one's life (Linley & Joseph, 2004).

Researcher’s Assumptions/Biases

In reference to interpretive researchers, Daley and Lumley (2007) reported, “Like any other researchers, they are concerned with the extent to which their research is valid and representative of the area being investigated” (p. 1). So, the term bias is not often used with this type of research. However, in this study, I was the sole researcher-participant which could have influenced and posed an issue of bias. According to Denzin (1989), "Interpretive research begins and ends with the biography and self of the researcher" (p. 12). The method of autoethnography is introspective and the researcher-participant is the focus of the inquiry. Because autoethnography triggers emotions when a person is researching his or her own life, and the autoethnographer is also the investigator, the juxtaposition of roles could cloud the judgment of
the investigator, indicating bias, when the data is examined in order to address the research question. The research question: What is the feasibility of employing externalization as a methodological modification to traditional autoethnographic approaches?

Significance of the study

The APA and CDC stress reports revealed, there are a significant number of individuals dealing with extreme stress. Individuals need a strategy to help them cope. This feasibility study is important because it may assist individuals in dealing with stressful life events when they occur. The autoethnographic-externalization method may empower the individual to take control of the stress that is impacting their lives. It provides a positive lens for the individual to view the problem. It allows the individual to continue with their daily activities. There is a significant gap in the literature using this method. The academia, business, and medical fields with society as a whole could improve their lives by employing this method. This study was done where the researcher was the participant which makes it unique. Another difference is the combination of two separate methods to create the one method.

Delimitations

Based on the experiences in the categories of work and family, as the researcher, delimited this study to myself a middle-aged African-American female. The experiences were based on my life as told from my cultural experiences and worldview. The time frame of the study was delimited from the period of January 2009-August 2011.

Limitations

In this study, I was the sole researcher-participant in which introspection and personal information were illuminated based on memory, therefore, the limitation of this study began with my own bias. According to Denzin (1989), research begins and ends with the autoethnographer.
In the data analysis, the method of coding and the possible bias and subjectivity may have been present. A third objective person to triangulate the data would have strengthened the results. A detailed discussion of the limitations is in Chapter five.

**Definition of Terms**

*Thriving:* The person's capability to go beyond their physical or mental development (Norlander, Von Schedvin, & Archer, 2005)

*Hardiness:* Character traits or attitudes which are: committing, control, and challenge. (Maddi & Khoshaba, 2005).

*Posttraumatic growth:* It is positive change experienced as a result of the struggle with a major life crisis or a traumatic event (Posttraumatic Growth, 2011, para. 1).

*Lived Experiences:* Life-world; meaning-making; work and family events

*Traumatic Events:* Not Post Traumatic Stress Disorder (PTSD); Extreme stress; life crisis or situations that are negative, severe, and far beyond our normal expectations for everyday life or life events (Robinson & Larson, 2010).

**General Overview of the Research Design**

In chapter three an introduction created the foundation for the methodology of the study, which began with a brief discussion on utilizing autoethnography and externalization as a combined method. The theoretical foundation of autoethnography and externalization was examined. In the category of research design and the role of the researcher was discussed. The central guiding research question was explained along with the data collection strategy and the externalizing categories of Work and Family. The instrumentation used were six structured interview questions. The data analysis was explained which were manually organized, coded, and analyzed. The Protection of Human Subjects was indicated. There were discussions on the
study validity, reliability of data gathered from the aspect of the interpretive research and autoethnography. Lastly, there was a brief discussion about intra rater reliability, the summary of Chapter Three, and a preview of Chapter Four, The Research Findings.

**Summary of Chapter One**

In chapter one, there was a consideration of traditional autoethnographic exercise using externalization as a combined method with lived experiences. The background of the study covered my participation in the EDOL program at Pepperdine University and the lessons learned from the experience. A brief discussion on how recording one’s innermost reflections are important to the autoethnographic method. Externalization was examined and the problem statement revealed the need for this study. The purpose statement and research question were established. Theoretical perspectives on resilience, hardiness, thriving, and posttraumatic growth sets up the context which was examined in Chapter Two. Researcher bias and the significance of the study were presented. Delimitations and limitations were disclosed and a definition of terms was explained. A general overview of the research design was introduced. Next, a summary of Chapter Two was considered.

**Summary of Chapter Two**

This study sets the contextual framework with a discussion about resilience, hardiness, thriving, and posttraumatic growth which is how individuals maintain emotional stability. The theorists behind each are examined. The review of the literature reviewed subjectivity, ethnography, autoethnography, narrative therapy, and externalization. Different genres of autoethnography are indicated which are pertinent to this study. The theorists and origins of externalization are revealed. The various applications of externalization, narrative therapy and autoethnography were described in detail. The literature provided implications that
autoethnography and externalization could be used together. Finally, the literature review discussed the need for a study to explore traditional autoethnography utilizing externalization as a combined method with lived experiences.
Chapter Two: Literature Review

This chapter sets the contextual framework for the study with a discussion about resilience, hardiness, thriving, and posttraumatic growth which is how individuals maintained emotional stability. The review of the literature also examined subjectivity, ethnography, autoethnography, narrative therapy, and externalization. Storytelling was an important element of the modalities, especially incorporated in the areas of multiple lived experiences where storytelling can be a catalyst for individuals to find a sense of meaning and have the ability to thrive. The literature defined the term autoethnography, explored the inception of autoethnography and how it evolved over the last two decades. This literature review highlighted the works of Carolyn Ellis and Arthur Bochner, who have been the trailblazers of this qualitative method. A brief discussion of researchers who opposed the Ellis-Bochner approach was considered. The focus of autoethnography provides a cross section of studies that utilized autoethnography were discussed.

In the second major segment of this chapter, the contributions of Michael White and Daniel Epston were examined as they pertain to narrative therapy and those who have influenced it. Moreover, a review regarding the processes of narrative therapy, specifically the use of the externalization, including examples of how externalization was employed.

Thirdly, various applications of externalization, narrative therapy and autoethnography were discussed, including: studies that utilized externalization but did not include the narrative therapy process; a study that explored how the client as a consultant is the expert of their problems which illustrated the power dynamics within narrative approaches; a lupus patient, teacher, and therapist who used writing as externalization to disengage lupus; and a how a
narrative therapist and ethnographer combined the techniques of autoethnography and narrative therapy in working with families.

Finally, the literature review argued the need for an exploratory study combining traditional autoethnography with externalization applied to the lived experiences of individuals who have experienced stressful life events.

Resilience

Resilience is “the absolute transformation of an individual, regardless of life's challenges, that is, the ability to persevere and significant progress during life's storms" (Luthar, 2003 p. 29). The root for the English word “resilience” is the word “resile,” which means “to bounce or spring back” (Farlex, 2011, para 1). Resilience denotes that one is able to provide stability in their lives (Bonanno, 2004). Carver (1998) stated, resilience is like the buoyancy of a buoy in the ocean with all of its fluidity and staying power. It remains afloat in the water no matter how turbulent the waves become. Resilience represents something crushed, pulled, twisted with agility that bounces back to its original state (Strumpfer, 2003). Strumpfer indicated, in human resilience is the recovery of the individual with positive and successful outcomes from the setbacks experienced in life. Carver (1998) asserted, some individuals who have experienced hardships in their lives are able to make a comeback, that is more powerful because they are less likely to deteriorate, conceivably when faced with new challenges. Bonanno (2008) stated, protective factors such as: an individual’s personality, temperament, and support systems contribute to the possibility of the individual being resilient in the face of adversity.
On the other hand, Carver (1998) argued, initially when hardships occur, they are presented as a sign of danger in our lives. Individuals do not realize until later that it is only a test.

Cicchetti (2010) reported, there are two essential components in understanding resilience: (a) encountering ongoing trauma and (b) making effective adjustments by moving forward regardless of personal challenges experienced. Bonanno (2008) asserted individuals who experience trauma tends to protect themselves and remain strong through catastrophic situations.

According to Maddi and Khoshaba (2005), by reframing the circumstance as a means of character building, individuals will have improved in the development process. Maddi and Khoshaba (2005) contended that resilience is based on three attitudes that allow a person to create a mentality of bravery. Resilience is the backbone and catalyst of two abilities that produces transformational coping and social support. Transformational coping is the individual’s way of reframing the hardship by affirming life’s challenges happens to everyone, which diffuses the intensity of the hardship. Social support is how the individual remains connected to the interactions of people no matter how contentious the surrounding environment. Early resilience literature has been equated with children and youth. Resilience studies for adults are burgeoning.

**Hardiness**

A twelve year study was done at the Illinois Bell Telephone (IBT) company in 1975 that examined 450 male and female supervisors, managers, and authoritative personnel through psychological assessments, medical examinations, and performance evaluations. The study was conducted by Salvadore R. Maddi and his research team. It was paid for by the IBT Company and the National Institute of Mental Health (NIMH). By 1981, government
regulatory controls were removed, which destroyed the company. The action created extreme stress and turmoil in the workplace. IBT reduced their personnel from 26,000 to 14,000 workers. The employee reduction had an impact on the IBT study. About 50 percent of the workers began experiencing severe health issues such as: heart attacks, depression, and anxiety disorders. Others had marriages break up, became alcoholics or exhibited dangerous, uncontrollable behavior. However, approximately 33 percent of the personnel that somehow persevered and grown from the experience. (Maddi & Khoshaba, 2005)

One researcher in the stress hardiness field was a clinical psychologist, Susan Kobasa at the City University, New York. Kobasa (1979), carried out a study on a group of executives who were under extreme stress from their company; the Illinois Bell Telephone Company (IBT) underwent radical restructuring. Kobasa contacted 837 middle and upper management executives from the (IBT). Six hundred and thirty-seven responded to stress and illness surveys. Because the company experienced dismantling through deregulation one year prior, there were workshops conducted, communications disseminated by the company, and appointments with medical personnel regarding the surge of taxing responsibilities the management executives were now confronted with. The responsibilities included adjustments in performance evaluations, implementing federal government imposed affirmative action, and instituting more demotions. The sudden changes combined with the challenges experienced in one's personal life strongly implicated that the management executives’ scores on the surveys would be elevated.

After the culmination of the study, Kobasa discovered the data determined there were certain attitudes that emerged in shielding the management executives from destroying their health due to stress. The attitudes called the (3Cs) which represented: committing, control,
and challenge. If a person has a strong attitude in commitment, he or she stays focused on the
activities and people surrounding them; whether it is related to work or life in general (Maddi
& Khoshaba, 2005). A person’s involvement remains concentrated regardless of how stressful
the hardships become. One who has a strong attitude in control takes charge of the hardship
and has no doubt that a resolution can be found. One who has a strong attitude in challenge
accepts change as part of a normal part of development. The attitude of challenge is the
catalyst for growth and defining meaning in life.

According to Maddi and Khoshaba (2005) individuals who possess a high
commitment are connected to the individuals and activities in their environment, rather than
disconnecting when experiencing hardship because there is a sense of purpose associated with
it. Individuals who possess high control feel that weakness and dormancy are
counterproductive. Individuals who possess high challenge look at challenges as an
opportunity to improve and renew. Maddi and Khoshaba (2005) believed that, if a person
possessed the (3Cs) he or she could contend with life’s difficulties challenges and handle
them successfully. These are the characteristics that Maddi and Khoshaba (2005) found to be
the root of resilience and that were consistent in certain employees who handled the
deregulation of the IBT. Life is about breaking through the protective barriers and growing
through our experiences, whether they are good or bad. (Maddi et al., 2006)

Maddi (2006) believed endurance and drive are key components in dealing with
stress. Similar to endurance and drive, hardiness allows one to confront hardships.
Hardiness activates one's ability to continue and achieve under distress.

Bartone (2006) stated, hardiness is an attribute that gives the human discernment
about his/her existence when making choices during transitional times in one's life. Woodard
reported, hardiness is birthed from the concepts of a person taking responsibility for his or her own actions. No matter how cruel the world is to you hardiness helps the body and mind to acclimate to the adversities of the world. Maddi (2006) reported, hardiness helps a person to grow from stressful life events. Maddi (2005) stated, hardiness improves a person’s ability to bounce back from confrontations with death and adjusting to new living environments. Woodard (2004) reported, it does not matter how educated a person may be, it is the mindset that determines how a person will thrive in hardships. A person must change negative thoughts into positive thoughts in order to alleviate the negative feelings associated with the stressor. Maddi (2008) stated, that unexpected and ordinary stressful life events will occur in a person’s life. The way to cope with the stressful events is through embracing and reframing the events. The notion of the hardiness personality is, there is no fear, despite how intimidating the adversity appears to be for the individual (Hystad, 2009).

**Thriving**

Thriving is the person's capability to go beyond their physical or mental development (Norlander, Von Schedvin, & Archer, 2005). O'Leary and Ickovics (1995) indicated a ranking system from lowest to highest when an individual experiences hardship in life: (a) when the individual collapses under extreme stress, (b) the individual pulls through, but is wounded as a result, (c) the individual is retracting to the state of persistence, and (d) the individual is growing or thriving. Carver (1998) believes thriving is an individual's ability to progress to a higher rank of performing after a hardship. The meaning of thriving for Carver (1998) represents growth rather than recession when responding to a stressor. Carver (1998) asserted, when a human demonstrates thriving it brings out the good will of man; and a bad experience is turning into something good. The individual’s environment has grown progressively based on exchanges
with one another which indicated thriving (Bundick, Yeager, King & Damon, 2010). Bundick, Yeager, King and Damon (2010) suggested, thriving encompasses aiming for endeavors that are compatible with one's aptitude and competencies. Carver (1998) indicated, thriving is defined as our ability to endure the test and grow rather than wither (p. 248). According to Maddi and Khoshaba (2005), individuals will thrive; their level of functioning, behavior, and well-being will remain intact while dealing with adversity. Thriving and resilience was often used in the literature interchangeably.

**Posttraumatic Growth**

Posttraumatic growth is “positive change experienced as a result of the struggle with a major life crisis or a traumatic event” (Posttraumatic Growth, 2011, para. 1). According to The Posttraumatic Growth (PTG) Research Group, posttraumatic growth tends to occur in five general areas:

- Sometimes people who must face major life crises develop a sense that new opportunities have emerged from the struggle, opening up possibilities that were not present before. A second area is a change in relationships with others. Some people experience closer relationships with some specific people, and they can also experience an increased sense of connection to others who suffer. A third area of possible change is an increased sense of one’s own strength – “if I lived through that, I can face anything”. A fourth aspect of posttraumatic growth experienced by some people is a greater appreciation for life in general. The fifth area involves the spiritual or religious domain. Some individuals experience a deepening of their spiritual lives, however, thus deepening can also involve a significant change in one’s belief system. (para. 2)
An individual's ability to be able to flourish through distress is known as posttraumatic growth or adversarial growth (Linley & Joseph, 2004). Posttraumatic growth is not about maintaining emotional stability in the midst of a crisis (Bonanno, 2004) but about making adjustments, flourishing, and succeeding during very arduous times in one's life (Linley & Joseph, 2004). Bonnano (2004) indicated that certain individuals who have experienced trauma or loss maintained a state of equilibrium over time and were not as stressed. Bonanno's theory has one of three possible results when a person experiences loss and extreme trauma. They are: mental illness, adaptability, and positive change following trauma.

Consequently, Tedeschi and Calhoun (2004) reported, posttraumatic growth is the result of a person's endurance dealing with extreme trauma in their lives. It is evidenced by the person's gratefulness for living, cultivating deeper relationships with friends and family. There is a renewed inner power and courage, a different perspective on life, and an extensive spiritual life with meaning.

Linley and Joseph (2004) and the positive psychology movement contended, there are a substantial number of individuals who experienced favorable transformations as a result of loss and trauma. Loss, especially unexpected loss, disrupts an individual's beliefs about the world and initiates a process of rebuilding an understanding. During the process, many people come to realize their own strengths, appreciate the impact of their relationships, and have new spiritual insights (Calhoun, Tedeschi, Cann, & Hanks, 2010). The purpose and significance of our existence and how one is connected to his or her environment while achieving one's goals and aspirations in life are significantly related to posttraumatic growth (Cann, Calhoun, Tedeschi, & Solomon, 2010). Posttraumatic growth will be important to this study along with the notion of subjectivity.
Subjectivity

Ellis and Flaherty (1992) in the book, *Investigating Subjectivity* defined subjectivity as “human lived experience and the physical, political, and historical context of that experience” (p. 1). A personal awareness of who we are is essential in the lived experience (p. 9). When analyzing subjectivity, it can be hazardous and hurtful because feelings, thoughts, and realistic experiences are intense and the outcome is unpredictable. Ellis and Flaherty explained traditional research methods tend to extract the emotional experiences of participants, thereby leaving unanswered questions in the research process. Because there was a gap in the literature, the notion of autoethnography was created.

Subjectivity, empathy, observation, and action are the focal points of this discussion. Ellis (2004) began research in the field of sociology and was influenced by the assertions made by Max Weber. Weber (1947) stated, that “action” (p. 88) is all human behavior when the individual attaches “subjective” (p. 88) meaning to it. Action can be overt, covert, or purely inward in nature. The inward component involves empathy, which is the psychological understanding of the behavior that has taken place. In order to understand the overt actions, Weber contended, direct observation helped to understand what the person’s emotions may be communicating. Weber’s concepts are the premise of Ellis’ work regarding subjectivity.

Origins of Autoethnography

The origins of autoethnography are found in the field of anthropology. Heider (1975), the anthropologist who inspired Ellis, used the term “auto-ethnography” (p. 3) to demonstrate how the sixty Grand Valley Dani school children of West New Guinea described themselves and their activities through inquiry that was filmed. The outcomes of the research supported subsequent images of a disengaged and there no visual evidence of positive interaction or sense of
community with the children of West New Guinea culture. Ellis (2004) expanded and reshaped the notion of autoethnography although credited Heider’s work as its origin. From the Heider perspective, Ellis believed autoethnography involved researching the “self” (p. 38) as a participant as well as an observer.

Arthur Bochner is a prominent researcher in the field of communications who was influenced by Michel Foucault’s philosophy. Foucault believed there was a connection between the author, text, and its readers. Bochner had published many articles and books over the 30 years before his encounters with Foucault’s work and became disenchanted with the experimental approach of hypothesis testing, surveys, experiments. Bochner (2012) chronicled his disenchantment in an autoethnography entitled, *Between Obligation and Inspiration: Choosing Qualitative Inquiry*. Together and individually, Bochner and Ellis have pioneered the quest to transform the direction of social science research. Their journey began by embracing the notion of ethnography (Ellis & Bochner, 1996).

**Ethnographic Writing**

Ethnography derived from the perspective of anthropology (Ellis & Bochner, 1996). The term ethnography was used to describe how writing and culture are combined. Ethnography is the written blueprint of an individual’s heritage and experiences. Under the direction of Ellis and Bochner, ethnography became “ethnographic alternatives” (p. 18) outlined in the book, *Composing Ethnography Alternative Forms of Qualitative Writing*. According to Ellis and Bochner (1996), there are several styles of writing used in autoethnography for an individual to express their views about society. The book is divided into three parts autoethnography, sociopoetic, and reflexivity, which describe the various styles of writing. Ellis and Bochner
(1996) described ethnographic writings such as sociopoetic and reflexive which are descriptive writing styles.

Sociopoetics refers to “a lumpen-category that includes ethnography expressed as poetry or poetic narrative, performance of ethnography, and a discussion of life as a theatrical act” (Hermer, 2001, p. 384). Reflexive ethnography is concerned with how the individual responds within the culture and how the culture responds to the individual. Both sociopoetic and reflexive must be written in first person writing (Ellis & Bochner, 1996). Ellis and Bochner further explained:

The essays and studies that fall under these headings explore the first-person voice, the appropriation of literary modes of writing for utilitarian ends, and the complications of being positioned within what one is studying. (p. 30)

Ethnographic writing bridges thoughts and emotions by creating a nexus to civil, sociocultural, and historical experiences of the person (Ellis & Flaherty, 1992). Thoughts and feelings are enmeshed as humans understand the significance and meaning in their lived experiences (Ellis & Flaherty, 1992). A lived experience was discussed in (Ellis and Flaherty, 1992) written by Ellis and Bochner about abortion. Bochner provided the male perspective and Ellis was the female perspective. Other researchers who had the same experiences were included to reveal multiple stories on the subject through one voice. The narrative was written as a theatrical production. The body of research purposely induced true feelings and thoughts experienced when an individual has an abortion. In addition, there was a discussion about cultural artifacts and how they can be used in representing a person’s lived experience such as: film, diaries, biographies, letters, and calendars (Ellis & Flaherty, 1992).
According to Ellis and Bochner (1996) the “I” (p. 15) should be pronounced in writing ethnographies. Alternate ethnography, essays termed by Ellis and Bochner should reach out to the areas of sociology, anthropology, communication, culture studies, race, and gender. Ellis and Bochner preferred to use the term storytelling rather than data collecting. However, it was more important to tell the truth through stories and language no matter how difficult or awkward.

Ellis and Bochner (1996) believed the outcome of reading ethnographic writings resulted in unpredictable experiences. Depending upon the reader’s emotional state, the writings can be shocking and unpleasant. Ellis and Bochner featured Carolyn Ronai’s essay in their book, Composing Ethnography: Alternative Forms of Qualitative Writing Ethnographic Alternatives. I experienced shock and the feeling of horror when I read Carolyn Ronai’s essay. I felt the magnitude of Ronai’s physical, sexual, and psychological abuse encountered while reading My Mother is Mentally Retarded. As the reader, experienced, the sensitive emotions and unresolved issues the author discussed. Ellis and Bochner (1996) stated, ethnographic writings provide a voice to atrocities experienced by individuals and removes the silence that held it hostage. The author used the narrative as an open invitation for the reader to explore the person’s inner self which included-suffering, confusion, coping, and ultimate significance. Eventually, ethnographic writings transitioned into autoethnography which became an alternate form of qualitative writing. It became a method of qualitative research that examined human behavior and the non-numerical factors that shaped it (Ellis & Bochner, 1996).

Autoethnography Defined

Denzin and Lincoln (2000), as reported by Ellis and Bochner, defined autoethnography as personal stories that delve into the deep thoughts of a one’s connection with their social environment, communication, with times past. It described qualitative research provided
meaning to the researcher and readers. Initially, Ellis used the term autoethnography in her book, *Final Negotiations* which is about her experience with her partner’s emphysema. The term was a section included in *Composing Ethnography* published the following year (Ellis, 2004).

Ellis and Bochner (2000) stated, “[a]utoethnographers vary in their emphasis on the research process (graphy), on culture (ethno), and on self (auto)” (p. 740) and that “[d]ifferent exemplars of autoethnography fell different places along the continuum of each of these three axes” (Denzin & Lincoln, 2000, p. 740). Either a self (auto) ethnography or an autobiographical (auto) ethnography can be signalled by “autoethnography” (Reed-Danahay, 1997, p. 2). Reed-Danahay (1997) reported, autoethnography is a story about a person’s lived experience and how it impacts society. The researcher is no longer a hidden entity, but becomes part of the research (Smith-Sullivan, 2008). Ellis and Bochner created the framework for several classifications.

**Autoethnographic Classifications**

According to Ellis (2004), there are three different methodological approaches to autoethnography such as narrative inquiry, systematic sociological introspection, and biological method. Consequently, Ellis identified various autoethnographic classifications:

1. **Personal Narratives- The social scientist's view**
   
   themselves as phenomenon and write evocative stories specifically focused on their academic and personal lives;

2. ** Reflexive or Narrative Ethnography-The focus in on a**
   
   culture or subculture and the authors use their life story in that culture to look more deeply at self-other interactions;
3. Native Ethnographies- Written by researchers who share a history of colonialism or economic subordination, including subjugation by ethnographers who have made them subjects of their work;

4. Ethnographic Memoirs-Rooted historically in diaries and personal journals;

5. The Contingent Autoethnography - Author writes about others, not planning to study anything about self;

6. Restitution Narrative-Simple plot in which a person writes about their survival of some trauma; and

7. Co-constructed Narrative-A way to study the relationships that mirror the images of our daily lives.
   a. Mediated Co-constructed Narrative Autoethnographer works with each relational partner separately to create some feature of their relationship. They trade stories and comment on them through an audiotape conversation. The conversation produces a joint story. Best to use with unresolved epiphanies.
   b. Unmediated Co-constructed Narrative

The two researchers/writers separately generate stories about any shared relational experience and come together and converse with those stories. Sometimes outsiders who have witnessed the story can be brought in to jointly scribe a new story.
Keys To Autoethnographic Writing

Bochner and Ellis (2002) argued, when one a person goes beyond the pain inside and shares the story with others, a fire is ignited within the reader to express how they are feeling. If a story is told correctly, it will liberate the writer and the reader.

Ellis (2004) further explained, the writer is as closely examined as the work. Writing can be very therapeutic and can put traumatic events in their proper prospective. It was Ellis’ personal experience with a loved one who had a terminal illness that provoked her to do a journal, which is a form of autoethnographic writing. It is the lived experience that becomes the focus of research. The goal is to understand the changes in your life as the writer and to change the lives of others-the readers.

All and all, Ellis (2004) found authoethnography to be liberating, especially when working with topics of emotion. It was an Ellis’ belief that autoethnographic writing had therapeutic value for her, as well as other participants and readers because the dialogue left a process of mutual exploration. Ellis (2004) asserted, the key to a good story is its “wow” (p. 138) factor. It should make a person feel like they are going through with the writer. Autoethnography can be very descriptive with graphic details.

According to Ellis (2004), the purpose of inquiry is to investigate that which we do not know. The writing is about self and self is the power of the story. Ellis stated, when a story is written, it should be in the author’s voice and not modified. The story is strong enough to stand on its own. Autoethnographic writing must crush the reader’s heart while providing the possibilities to create a new one. It is the writing that unleashes the innermost thoughts that create the story. The aim of autoethnography is to recall a situation the writer has experienced.
According to Ellis (2008) autoethnography must have inspiration, and openness as its core it is a collaboration of logic and intuition, thinking and understanding, as well as individual and others. Ellis’ requirement for Autoethnography is the following: (a) to stay wild and untamed, full of life, pain, spirited while creating meaning, (b) the researcher to be open and closed, emotional and guarded, factual and possess dramatical accounts when necessary, and (c) to be connected, share the journey, and experience the narrative where the reader resolves to self-exploration.

Bochner (2012) stated, autoethnography has five components: (a) written in the first person, (b) the narrative text breaks the traditional focus on generalization within a single case extending over time rather than generalization across cases, (c) the narrative is full of life with a setting, characters, plot, ending; (d) the heart of the narrative is filled with personal information and psychological experiences, and (e) the narrative climaxes into meaning and relationships (Bochner, 2012).

Narratives

Autoethnographic writing is also known as narratives. Ellis (2000) in the article, *Creating criteria: An ethnographic short story* contended the narrative should make a person stop, think, and call forth deliberation by stimulating conversation with the reader. Ellis stated the narrative should be engaging and not disruptive or confusing. Otherwise, the narrative could be interpreted as lacking substance. Ellis continued, the narrative should have a social conscience. The reader should be able to feel and experience every word spewed on the page. It should be authentic and tell the truth. Ellis described how a narrative should have a climax and something to take away from the reading experience. The reader should be able to experience the tender feelings portrayed by its characters. All of Ellis’ work is portrayed in this format.
Narrative writing should be creative, expressive and communicates with the readers and should illustrate every aspect of a personal story (Ellis, 2008). Moreover, the narratives are at the heart of a person’s existence which becomes animated and spirited through story telling (Ellis & Bochner, 2006). Ellis suggested, that the researcher be creative and expressive in the personal and social recordings of their lives (Ellis, 2008). Bochner and Ellis (2002) discovered, narrative writing was not just for the individual. It was to also help society as a whole. Narratives cross various cultures and link them together through stories. It elicited scholars to contemplate and realize their existence (Ellis, 2008).

Bochner and Ellis (2002) stated narratives are represented in different written styles and formats: "short stories, poems, performance texts, fiction, memoirs, autobiographies, narrative ethnographies, conversations, tales, novel's satire, theater, dance, music, documentaries, art, and multimedia presentations" (p. 403).

Narratives also represent the data in qualitative research. Ellis and Bochner (2006) contended narratives performed investigating and hypothesizing of the scientific method by themselves. Narratives are interpretations of scenes in a person's life (Bochner, 2012). The narrative is an individualized inquiry where the drama unfolds and the lead character and writer are the same (Ellis, Adams, & Bochner 2011). The elaborate narratives produce trustworthy information by evoking feelings and thoughts which help the writer and those reading it (Ellis, Adams, & Bochner 2011).

Pearce (2010) agreed with Ellis and Bochner on how feelings become part of the research process and cannot be separated. However, the emphasis is on the results that are thought provoking by reflecting one’s own experience. It is similar to the lens of a camera providing rich insight to its writer and the world. The goal is a journey of self-exploration and self-analysis.
Narratives are interpretations of scenes of a person's life (Bochner, 2012). The writers of narratives are not interested in the explanation of data, but choose stories and their truth (Ngunjiri, Hernandez, & Chang, 2010). The focus is on the self and its relationship to a circumstance or theme. However, some researchers focus on the expressive and others on the logical. This varies according to the goals of the researcher and the type of project.

The goal of Bochner and Ellis in producing authoethnography was to fill the gap by using narratives as the catalyst-investigator (Bochner, 2012). Bochner argued, research needed to signify something better for its readers—it needs to draw, excite, and move people; enticing them into a dialogue of events, sensations, adventures, recollections, and passion that research narratives characterize. Bochner described authoethnography as if it was spoken by a mother who spoke with emotion. He contended, the narrative be articulated with affection and reflective disclosure which is revealed through a force that connected the writer and interpreter.

According to Bochner (2012), autoethnographers are interactive, share information, and are respected. Bochner (2012) believed, no matter what a person faced in life, a story can be derived from the challenge which will develop meaning for the teller as well as the reader. He argued:

The verisimilitude of autoethnography lies between the author and listener who become interconnected through the author's catastrophes, the disappointments, the shame of feeling insignificant, the battle of trying to stay positive and confront hardships in order to understand; to combat insanity of the mind while searching for the hidden messages behind it; the yearning to proclaim and lift others who may also be struggling (p. 161). The narrative flows like a river. It is constantly changing, especially as we grow older and face challenges in life. A narrative's focus can be on the self, but it can focus on other subject areas as
well. It is the allegory of a person's life representing the past and the present and the narrative provides the linkage (Bochner, 2000).

According to Kahneman and Riis (2005), the narrative created the marriage of our "two selves", (p. 286) the conceptualizing self and the experiencing self. The conceptualizing self relies on memories and personal stories. The experiencing self is the wholeness of a person through experience and unconditional love. The narrative provided the framework to express unconditional love and the two selves. After the marriage, then the conception and the goal of the narrative were to induce the birthing to that which has become pregnant in the individual, so that the delivery process provides the powerful interpretation of one's travail. Sense-making is then revealed. Time is needed to search for meaning. However, narrative writers should not allow too much distance in time to write about their experiences (Pearce 2010).

According to Ellis (2008) with narratives the writer becomes an open book for scrutiny of confidences that have been hidden. Sometimes the writer invites the reader into intimate relationships with others and provoke a conversation within the reader to examine the contrast of their own story. Ellis claimed, there can be no trade off between keeping secrets and narrative writing. Sharing the secret helps one to be free from unresolved issues. The narrative is about a person's individuality, character, and existence.

Bochner (2010) asserted, there is a distinct difference between researchers who analyze narratives and those who write narratives. He described the analyst is someone who is methodological, sterile and determined to remain stagnant or traditional minded in the social science field. However, researchers who write narratives are emotional and need to portray a true collection of data by communicating in the first-person. Bochner (2010) affirmed researchers
who write narratives intend to uncover deeply rooted truths within the individual exposing the pain and hurt hidden behind defense mechanisms.

Frank supported Bochner’s view by acknowledging that narratives are different than traditional research. Frank (2010) argued the narrative is necessary for humans to flourish through lived experiences. One way an individual makes the connection with his or her environment is through the story, even if you are miles away or worlds apart. People come together through this process.

Meichenbaum (2006) discovered in order to grow positively after a trauma or lived experience, recommended looking at how people are creating their stories:

Whether the form of trauma exposure is due to intentional human design or due to exposure to natural disasters the need to communicate “stories” (p. 355) to others, as well as to oneself, about what happened and the implications are rather pervasive. As a result, an individual’s (or groups’) sense of self and the world are established through the “stories” (p. 355) they tell others and themselves. Basically, it is important “Be aware of the stories you tell yourself and others for you will be lived by them” (p. 355).

Frank (2010) agreed with Meichenbaum that the narrative just as posttraumatic growth resulted in meaning and purpose in life for the individual. It helped the individual to appreciate family, community, and reframed perceptions of their adversary.

**Opposing Views of Autoethnography**

Bochner (2012) stated, autoethnographies continue the discussion of the social science area. Bochner and Ellis had the strong desire to create change in the way research was reported. Ellis and Bochner (2006) have been change agents in the social science area from a system that was sterile to one that is now animated. First person writing over the years has received
acclaimed attention from social science researchers to the point of its classification as autoethnography. (Bochner, 2012).

On the other hand, some researchers preferred to focus on the cultural aspect as an observer rather than a participant. More value is placed on the “ethnography” (p. 99) (the study of culture). Wolcott (2004) was one who was not in favor of the Ellis-Bochner format of autoethnography. He stated:

The articles were serious in their intent and often painfully personal, but they seemed to follow no particular form nor own allegiance to any particular discipline. I found the new format distracting. It was not because the stories did not read well; they often did. But I was distressed to see the term ‘ethnography’ bandied about by researchers who assigned the label to their work only because their accounts were personal (p. 99).

Wolcott’s viewpoint stemmed from the tenets of anthropology whereby field work brought the people’s culture that was studied to life. Chang (2008) agreed with Wolcott and stated, “Autoethnography utilizes the ethnographic research methods and is concerned about the cultural connection between self and others representing the society” (p. 2). Chang stressed cultural understanding as the major theme in autoethnography. According to Chang, “Autoethnography utilized the ethnographic research methods and is concerned about the cultural connection between self and others representing the society” (p. 43). The next section reviews how the term autoethnography has developed over the years.

**Etiology of Autoethnography**

It is very interesting to review how the term autoethnography has evolved in two decades. Below, are words that represent the origins of autoethnography. They were consolidated from three sources: Ellis and Bochner (2000, pp. 739-740), Reed-Danahay (1997, pp. 3-9) and Smith-
Sullivan (2008, p. 5). The following words represent the influences on Ellis and Bochner’s work:

- Autoethnography (Hayano, 1979)
- Ethnographic autobiography (Brandes, 1982)
- Autoethnography (Lionnet, 1989)
- Personal experience narratives/ Self-stories (Denzin, 1989)
- Lived experience (VanMaanen, 1990)
- Narrative ethnography (AbuLughod, 1993)
- Autopathography, (Hawkins, 1993)
- Auto-observation (Adler and Adler, 1994)
- Self-ethnography (Van Maanen, 1995)
- Ethnographic short stories / Autoethnography (Ellis, 1995)
- Reflexive ethnography / Experimental Ethnography (Ellis and Bochner, 1996)
- Personal ethnography (Crawford, 1996)
- Autobiographical ethnography (Reed-Danahay, 1997)
- Evocative narratives (Bochner, Ellis, and Tillmann-Healy, 1997)
- First-person accounts (Ellis, 1998)

A Review of Autoethnographies

Lattuca (2013) stated autoethnography filled the gap between theory and practice relative to a public school administrator. The school administrator served as an assistant principal. It is a personal journey of the Lattuca’s transition with emphasis placed how she socialized into the role.

Trinh (2013) recorded autoethnography provided clarification on how a person’s individuality can be comprised within the educational arena. Being a minority, immigrant, and woman of Asian descent, in educational leadership has challenges. Trinh described her struggle with assimilation while working in an urban school setting. There were stereotypes, the question
of being an American citizen, gender-related issues, that she faced which provoked her to chronicle these encounters in an autoethnography.

Pong (2012) discussed how the autoethnography is like viewing into a person’s past by spanning the hurts, losses, ambitions, and milestones through the eyes of a Chinese American immigrant. Pong denoted autoethnography is a personal story of one’s life experience placed in the context of research, with a specific time period. It helped the writers delve into aspects of their history while acknowledging new discoveries about themselves and others.

Wagner (2012) reported autoethnography was the mechanism to demonstrate an individual’s climb up the leadership ladder— from teacher to superintendent in the public school sector by exposing self-awareness, values and stress management techniques used in the profession.

Hamilton (2012) discussed how readers were invited to relive the experiences of the writer through self-examination and self-exploration. The researcher as the writer compelled the reader to look back and explore spiritual areas that created a sense of meaning and new discovery. Autoethnography was the vehicle for others to uncover their spirituality and self-awareness while defining their purpose in life.

Means (2012) demonstrated how a dark-skinned Black woman’s voice screamed the ongoing brutality demonstrated by her race and society caused an identity conflict. Through autoethnographic narratives a dark-skinned Black woman was liberated through education and the atrocities against her and are now in the spotlight.

Goodreau (2012) stated autoethnography expressed a woman’s lived experience as a student to high school teacher and to advocate for education. The narrative oscillated between the student - teacher voice as she revealed deeply seeded thought and emotions in the inquiry.
According to Harris (2008) the story of a person with the terminal diagnosis of cancer unveiled the misery and anxiety of coping with the tragedy, but overcomes through spirituality and faith; the outcome is post-traumatic growth and a deeper trust in God and miracles.

Prince (2006) reported autoethnographic writing allowed an educator to survey the influence educational leadership had by looking at two different elementary school principals over a one year time period. The inquiry concluded by revealing acute qualities needed as an educational leader, thereby forcing self-discovery in the researcher.

As education has evolved, so has the roles of teachers and learners. Modesti (2012) used autoethnography to explain wherein the teacher-learner roles have become companions through the change process. Through scenarios Modesti synthesized teaching and learning by evaluating the similarities between the two while viewing distinctive educational, community, and personal transitions.

Ford (2011) analyzed the lives of two adults from different cultures and comparative abilities in each to thrive through the lens of autoethnography. The outcomes of the research assisted youth and school officials in developing strategies to foster youth resiliency. The narrative stated even with negative life trajectory, individuals remained tenacious and focused on tasks and ultimately thrive.

Skipp (2011) used autoethnography to unravel and expound on a participant’s life as a leader through the avenue of scenarios and conversations. Deep probes uncovered a values-attitude system which reframed a new leadership style for the participant.

Newman (2010) discussed autoethnography as a utilizing personal cognition through a transformational learning experience while attending Pepperdine University.
Autoethnography helped the researcher make connections with the components of transformational learning which became liberating.

Alwin, (2010) discovered autoethnography revealed issues in one school administrator that were profound, such as having a detached self within. A personal transformation was created from one who was controlling, demonstrated entitlement, and loved isolation; to becoming more empathic, more sociable, and understanding Alwin, (2010).

Larson (2011) revealed how autoethnographic writing helped a senior health care executive explore professional development and metamorphosis through the use of journals, personal observations, and communications.

According to Outram (2012) storytelling and introspection used by a high school teacher assisted in developing the ability to bounce back and thrive after a period of burn-out.

Coral (2011) stated, autoethnographic research analyzes the thriving experiences of the individual in the natural, spiritual, civil, and historical aspects; especially when confronted with unprofessional behaviors in the system. Frankl, Hollender, and Knight understood what it meant to be tested and tried, but thrived while finding a sense of meaning.

**Stories of Thriving**

Frankl (1992) was a testament of resilience and courage. Frankl discussed an account of his lived experience of being in a Nazi death camp. He told the story of captive Jews arriving by train to a small town designated for human extermination called Auschwitz. Its name has since represented the annihilation of many Jews and the never ending cries of those victims. The prisoners were stripped of their dignity and all of their personal possessions upon arrival. Frankl explained how the prisoner’s were whipped naked and how the hair was removed from their entire bodies. Frankl described how he and others looked at the painful images which were rows
of individuals hanging from scaffolds and how he and the prisoners became desensitized to this process because torture was the norm. Frankl agreed with Nietzsche, the philosopher: “He who has a why to live for, can bear with almost any how” (p. 104). Frankl found purpose and a sense of meaning after his lived experience. Just as Frankl thrived through his experience, so did Hollender.

Hollender (2004) was a woman who had experienced two traumatic events back-to-back. First, she lost her husband from a succession of strokes and brain trauma which occurred during a two week period. Three weeks later her mother died after years of suffering from multiple sclerosis. Hollender (2004) dealt with family members and friends who were concerned about her well-being after these tragedies. More importantly, Hollender was coping with her grief in her own way. The weight of her world did not seem to measure up to others’ perceptions of how she should be coping. She found herself responding to the question, “Am I all right?” (p. 201). What the individuals told Hollender was, she was not all right. So, Hollender went to a doctor. The doctor asked Hollender if she wanted medication for her emotional pain and she refused it.

Hollender (2004) wanted to experience the grief and work through it in a normal way. In the dialogue, Hollender expressed how much she thought about her husband and mother each day; but continued to move on in her own way. Hollender clearly recognized that life was no longer what it used to be. Everything had changed and it would never go back to the way it was. Hollender stated her desire as, “Not to get back to normal, not to return to what I once was, for I can never do that, but to grow past it, get beyond it” (p. 202).

When Hollender's mother passed, people thought she would automatically leave and be with her father. Instead, Hollender’s father came to visit her. Together they distributed the mother’s ashes in a park near her residence. As the ashes were released, Hollender cried. When
the tears strolled down her face, Hollender's father made a statement that caused her to stop crying. The statement consisted of, how great the mother was, and how hard the mother worked. These were things Hollender already knew about her mother and felt that her father was uncomfortable with Hollender’s crying. Hollender felt her father was being overprotective and uneasy with her weeping. This is why Hollender continued to ask herself, “Am I All Right?” (p. 203)

Approximately 60 days after Hollender's husband passed a neighbor suggested she needed to move on with her life. Initially, Hollender was taken back regarding the statement because she felt it was very insensitive of the person to say something like that to her. She struggled, having a conversation in her mind about an appropriate response that would fuel words of anger toward the neighbor. However, Hollender struggled even more and denied herself the expression of anger. The neighbor's comment suggested that maybe 60 days was long enough to grieve and that she needed to move on with her life.

Soon afterward another neighbor asked the same question," Are you all right?" (p. 204) Hollender began to shed a few tears. Then the neighbor was convinced and even stated “I can see by your crying you are not all right” (p. 204). Contrary to what individuals' perceptions were of her tears, Hollender felt she was doing just fine. Hollander had significant stressful life events to occur within a short period of time, but she thrived in spite of what others had perceived. Just as Hollender and Frankl confronted stressful life events, Knight experienced the same.

In the autopathography, Knight (2006) described his disbelief and shock when he was diagnosed with colorectal cancer. He could not understand why his body was fighting against him. His diet would consist of chicken, fish, and vegetables on a regular basis. Knight was a pastor, author, and father who would exercise 3-4 times per week and would rest seven to eight
hours per night. More importantly, he was diligent about obtaining his screenings for colorectal cancer. During this time, the rates of obtaining colorectal cancer were on the decline for a 67-year-old male. So, he wondered, where could he have gone wrong?

Knight (2006) revealed in the provocative narrative the initial onset of a mild but consistent pain which began in 1992. He went to several different doctors for tests, to obtain a diagnosis, and treatment for his condition, but the doctors could not define the problem. Finally, one of the doctors had an epiphany that the problem area was a fistula. Surgery was the treatment ordered to take care of the pain. As it turned out, the surgery was not the best mode of treatment and rendered Knight with a disorder he would have to deal with for the rest of his life. It took away his ability to walk and run long distances as he was clearly able to do before the surgery. Knight (2006) stated, “Just because we are handicapped in one area of the body, it doesn’t mean we have to stop living…never allow circumstances to keep us from reaching our fullest potential in life” (p. 16). He encouraged the reader that, this is the time to rely on the only one who created our bodies, God. God will help bring understanding and help you cope with the situation (Knight, 2006). However, the pain did not go away, it became even more persistent.

Knight (2006) discussed the importance of consulting with family and obtaining a second opinion; especially if the original physician was not willing to do anything different. Even though the pain persisted, the doctor insisted that another surgery was the best course of treatment, that could have an outcome much worse than before. The family encouraged Knight to obtain a second opinion. The second opinion doctor provided a very thorough examination with additional testing in the painful area. There were consultations with other doctors on the team. Finally, the test results confirmed that Knight (2006) had a “malignant cancerous tumor” (p. 21). Hearing the word cancer was painful enough. However, Knight found solace because the
cause of the pain he had experienced for eight years was finally identified. So, he began to educate himself about this dreadful disease.

Knight (2006) concluded, that receiving a cancer diagnosis was not the result of him doing something wrong to his body. Moreover, Knight looked at this experience as a badge of honor. God would use him to help other people. So, he underwent an aggressive 31-day simultaneous treatment of chemotherapy and radiation. After the first week of treatment, the tumor was eradicated but the doctors wanted to make sure the tumor was gone. So, he continued the remaining treatments. Knight gave credit to the team of doctors for locating the cancer and providing his treatment. However, Knight (2006) stated, it was God who provided his complete healing. It was God who carried him through the valley of darkness. It was God who helped him not entertain death or the possibility of giving up. Knight continued to have hope because he knew God was with him. God would see him through this process and make him whole again.

Frankl and Hollander are connected to this study through the stressful and traumatic events that occurred in their lives. Frankl had a prolonged exposure to extreme stress while Hollender’s experiences happened within a short period of time. However, they were all compelled to write and share their experiences in order to help others.

**Narrative Therapy**

Michel Foucault was a French philosopher whose principles inspired aspects of Michael White's work in narrative therapy. In particular, Foucault argued, the notion of power and knowledge were inseparable. King Soloman (before Foucault’s time) stated “A wise man is strong, Yes a man of knowledge increases strength” (Proverbs 24: 5, New King James Version). According to White and Epston (1990), although power and knowledge cannot be seen, they are
the “truth” of how people should shape their lives (p. 24). Moreover, White and Epston (1990) reported:

If we accept that power and knowledge are inseparable—that a domain of knowledge is a domain of power and a domain of power is a domain of knowledge—and if we accept that we are simultaneously undergoing the effects of power and exercising power over others, then we are unable to take a benign view of our own practices. Nor are we able simply to assume that our practice is primarily determined by our motives, or that we can avoid all participation in the field of power/knowledge through an examination of such motives (p. 29).

Michel Foucault revealed three distinct modes. The first mode dealt with “objectification” (p. 4) or categorizing people socially. During the 17th Century, individuals were separated from society due to their being poor, mentally ill, or homeless (White, 1990; Madigan, 1992). Similarly, in today's time, we continue to see the marginalization of these same groups (World Health Organization, 2010). According to Foucault, the second mode was the “classification” (p. 4) of abnormal and normal behavior through various writings such as, medical files and others (Madigan, 1992). Likewise, the Diagnostic Statistical Manual V would be an example of this type of classification. The third mode was “subjectification” (p. 4) or the process in which individuals form their identity because of the impact of the previous two modes. It entailed the formation of an inner communication individuals have that becomes enmeshed with societal standards (Madigan, 1992).

In Michael White’s Narrative Therapy process, he would “de-classify” or “de-objectify” (p. 8) (Foucault’s terminology) through externalizing the problem or separating the problem from the person (Madigan, 1992; White, 1990). The process was described as a “rite of passage”
(p. 12) derived from van Gennep in 1960 (Epston & White, 1992). The therapeutic setting worked out a deal where the person who became the consultant. This was done in order to establish no dependency on the therapist in fixing the problem. The person entered the “separation stage” (p. 13) through different approaches, including externalizing the problem which released the person from the problem. Then the person enters “liminality” which was a place of possibilities—“fantasy or desire” (p. 13).

According to Epston and White (1992) the person mapped the influence based on the person’s perceptions and interchange with others. Tracing the history of a problem was known as mapping the problems which was a two-step questioning process. At this stage, it is very important for the therapist to refrain from getting drawn into the negative components of the individual's story. This phase can be a toxic task for the therapist. However, the questions used by White navigated the therapist through the muddy waters (Hilker 2005).

According to Epston and White (1992), the hidden stories become illuminated through the externalizing process. Externalizing conversations help the person identify the hidden story. It begins with a historical account of the impact the problem has had on the person’s life. The person becomes separated during the externalization which provided the entrance to re-author a new story. Ultimately, a re-authored story developed as the externalization conversation occurred about a problem that no longer existed. An internalized entity is liberated for the individual. Interestingly, creating a different story frees and develops meaning and growth in the person (Keeling & Bermudez, 2006).

According to Hilker (2005), people reproduced the stories of their lives through conversations with a therapist through a socially, culturally and politically frame of reference. The narrative therapist assists clients in creating new stories by separating the problem from the
client through externalization. Hilker explained, externalizing conversations are more than just a therapeutic approach. It is a logical way of understanding people, their obstacles, the approach, and how therapists enroll clients in discussions. A new story is developed when the client becomes aware of his strengths (Levinson, 1996). The meaning is given to the person’s experience. Experience gets expressed through the story. The story helps to shape the lives of the readers who read them (Epston & White, 1992).

The person is the source of all meaning (Epston & White 1992). When the person is the consultant, the person becomes the authority of everything—their problems as well as the solutions. When significant events have been identified, it is the person who has the authority to unravel the mysteries. This begins the process of storytelling and meaning making (Epston & White 1992). Narratives set the scene of a problem that has disrupted the life of the individual. The individual tries to make sense of their new normal (Mortola, 1999).

White and Epston (1990) discovered, in narrative therapy, one of the primary tools used is the letter. Letters assist the therapist in creating the story with the client and helps bring the problem to life. Using letters as a case record, changes the power of the dynamics between a therapist and person seeking consultation. When letters are used in narrative therapy, the information is “shared, dialogical rather than a professional monologue and, due to their visibility to all parties, can be easily amended, contested, or confirmed” (White & Epston, p. 126). The person is constructing the true story. To achieve this, it is important for the person as well as the therapist to use imagination which helps create unique outcomes and meaning for the person.

Moreover, when life throws several curve balls at one time more details are needed when extracting the story. A person's identity gets distorted in the wake of multiple trauma. Identity is
what Micheal White termed 'sense of self' (p. 47). It becomes deteriorated during repeated trauma (White, 2004). In order to revive the 'sense of self' (p. 47), it is important to know how the person responded to the trauma. To begin extracting the story, which is listening beyond words, plays an important role in restoring the self (White, 2004). There are usually two stories being told during multiple traumas; the trauma story itself and how the person responded to the trauma. How the person responded to the trauma usually contained fewer details and needs strengthening according to (White, 2004).

**Externalization**

White and Epston (1990) described the process of externalizing the problem in their book *Narrative Means to Therapeutic Ends*. White and Epston (1990) wrote:

Externalizing is an approach to therapy that encourages persons to objectify and, at times, to personify the problem that they experience as oppressive. In this process, the problem becomes a separate entity and is external to the person or relationship that was ascribed as the problem. Those problems that are considered to be, as well as those relatively fixed qualities that are attributed to persons and to relationships, are rendered less fixed and less restricting (p. 38).

White asserted, “the person, nor the relationship between persons is the problem. Rather, the problem becomes the problem, and then the person’s relationship with the problem becomes the problem” (p. 40). The mantra of narrative therapy has evolved from White’s statement: “The person is not the problem, the problem is the problem” (Freedman & Combs, 1996, p. 47).

In White’s clinical practice, he worked with children who had Encopresis. According to the Diagnostic Statistical Manual (DSM–V) (2013), Encopresis has the following four symptoms:
A. Patient’s chronological age must be at least 4 years;
B. A repeated passage of feces into inappropriate places, e.g., clothing or floor. This can be either intentional or involuntary;
C. At least one such event must occur every month for at least 3 months;
D. The behavior is not attributable to the effects of a substance, e.g., laxative, or another medical condition, with the exception of a mechanism involving constipation (p. 178).

White created the persona called “Sneeky Poo” (p. 153) as a way of referring to the Encopresis (White, 1984). While working with the child or family members, White asked for their viewpoint and a description of the soiling behavior. In White’s feedback to the family, he applied the name “Sneeky Poo” (p. 153). Through this discussion, White was able to help the family see the impact “Sneeky Poo” (p. 153) had on the family and the child. Through a series of inquiry, White determined how “Sneeky Poo” (p. 153) was like a leech to the child and family. Each individual was able to give their perspective of how they were dealing with the invasive creature. It was through White’s “influencing questions” the family became informed they could take action against “Sneeky Poo” (p. 153) and fight back. This process took the blame off of the child and created an innovative way of solving a problem having a huge impact on the family.

According to White (1990), the first step in externalizing the problem is to describe the problem from the client's perspective using their words. Then the wording was changed to reflect the problem being outside of the person rather than a part of them or "objectifying the problem" (p. 39). This is the process of separating the person from the problem. The externalizing process occurs through discussions led by strategic questions during the therapeutic exchange.
According to Miranda (2000), by asking the person relative influence questions a person can go through the separation stage:

- How have you kept the problem from becoming worse?
- Describe the times the problem is manageable?
- How do you cope when things require the problem, not get in the way?
- What kind of things is more important to you than your problem and when have you followed your impulses, not to let the problem get in your way? (p. 27)

The following questions involve what (Carr, 1998) interprets mapping the influence of the problem on the person’s life and their relationship with it.

- In that situation were you stronger than the problem or was the problem stronger than you?
- Who was in charge of your relationships then? Were you in charge or was the problem in charge?
- To what extent were you controlling your life at that point and to what extent was the problem controlling your life? (p. 492)

The questioning helps the person see that they are in control of their problems and is on the journey to reconstructing the old problem story into something new and different. The words or externalizing language helps to separate the person from the problem which opens up possibilities for change (Hilker, 2005). Carr (1998) reported, in directing the person to change White referred to this as unique outcomes and then other questions were employed:

- Can you tell me about a time when you prevented this problem from oppressing you?
- How did you manage to resist the influence of the problem on that occasion?
The unique outcomes included, “the whole gamut of events, feelings, intentions, thoughts, actions, etc., that have a historical, present, or future location and that cannot be accommodated by the dominant story” (White & Epston, 1990, p. 16). The inquiry produced exceptional information about the person that is used in the person’s new story.

More specific questions are generated to create the events, plot, sequence, meaning, effects, evaluation, justification, and time (Carr, 1998). The following are examples of questions:

- Can you tell me your memory of that? (Events)
- What was happening before this event and what happened afterwards? (Sequence)
- Was there a turning point where you knew things were turning out for the best? (Events)
- At what point in your life did this occur? (Time)
- If your problem was a project what would you call it? (Defining the plot)
- What sense did you make of that? (Meaning)
- What does this story say about you as a person? (Meaning)
- How did this affect you? (Effects)
- Was that a good thing for you, or a bad thing? (Evaluation)
- Why was that a good (or bad) thing for you? (Justification) (pp. 494-495)

According to White (1990), externalizing the problem produces the following:

- Decreases unproductive conflict between persons, including those disputes over who is responsible for the problem;
• Undermines the sense of failure that has developed for many persons in response to the continuing existence of the problem despite their attempts to resolve it;

• Paves the way for persons to cooperate with each other, to unite in a struggle against the problem, and to escape its influence in their lives and relationships;

• Opens up new possibilities for persons take action to retrieve their lives and relationships from the problem and its influence;

• Frees persons to take a lighter, more effective, and less stressed approach to "deadly serious" problems; and

• Presents options for dialogue, rather than monologue, about the problem (p. 39).

Some people come into the process tormented with guilt, shame, and blame. Externalization releases the blame and allows the individual to take responsibility for one's actions, therefore empowering the individual (Hilker, 2005).

**Various Applications of Externalization, Narrative Therapy, and Autoethnography**

Keeling and Bermudez (2006) utilized externalizing the problem through artwork, namely sculpture. Participant’s created sculpture that personified their problem. The process was done in the privacy of their homes without the guidance of a therapist. Participants were guided by questions to respond to as well as a journal for reflection. Keeling and Bermudez’ findings were: (a) making the problem a person was a powerful way of coping with the problem. It separated the problem from the person which reduced stress in them, (b) using a physical component to externalizing the problem helped participants connect with the externalizing terminology, (c) the technique allowed the participants to create experiences within themselves, (d) writing was a great tool to create a new story and examine the inner emotions of an individual
to create meaning and growth, and, (e) externalization is ongoing and it permeates the participant's daily lives to facilitate the dismantling and rebuilding process.

A blogger (Myopicdreams, 2011) suggested the possibilities of using externalization as a self-help tool for individuals with paraphilias. The blogger stated, if a person is wrapping themselves in the diagnosis of paraphilia, then the person needs to step out of the problem. The person needs to separate themselves mentally because the diagnosis has become their identity. The felt externalization could help a person struggling with a mental illness. There is a gap in the literature when using externalization as a technique for self-help.

In the article, *Externalizing Lupus: A Therapist/Patient’s Challenge* (Maggio, 2007) discussed the disease of lupus and how she coped with its impact on her life. Maggio was a therapist and teacher who grew up with the value set (also her internalized dialogue) of being very compassionate toward others and helping them. She never saw herself as a person needing help (Maggio, 2007). Even though students and colleagues could see the physical change Maggio’s body was experiencing, she struggled to share anything about her disease with those individuals. The discussion remained a private conversation between Maggio and her husband. In the meantime, Maggio’s rheumatologist had broken his pelvis months prior to one of her visits and Maggio inquired about his health. The rheumatologist went into depth and explained what he thought the fall meant which surprised Maggio. His testimony became the catalyst for Maggio to self-disclose her story. Maggio summarized the final topic of the article, “Writing as Externalizing” (p. 579) where she supported an argument of how writing itself separated the issue or problem outside of the individual. Writing allowed Maggio to use reflection as a tool to unleash her pain and create a sense of meaning about her illness. The article was Maggio’s first time writing her story about lupus and how overwhelming it was when she read what was
written. Maggio stated, the writing was very appealing to her and provided the lens to see the truth about lupus. It was definitely a coping strategy for her. Maggio did not reveal whether she was guided by specific questions in order to write her story.

The previous study, article, and blog suggested, externalization was not exclusive to the narrative therapy process. The blogger suggested using externalization as a self-help technique. Implications of the study by Keeling and Bermudez (2006), proposed the usage of externalization using other creative methods for future studies based on the successful outcomes of their study. Writing itself was externalizing according to Maggio (2007) especially when writing about an illness.

Even White (1990) recognized not everyone would participate in therapy because of a problem-saturated issue. The person may have experienced life as routine or uninteresting. White recommended the therapist associate the “sparkling facts” (p. 76) of a person’s life and relate meaning to it, thereby creating a different story for the individual. So, White was open to alternative ways of using the externalization technique even with Schizophrenics.

Gaddis (2004) discovered through his own inquiry that the client was really the expert. Gaddis was no longer interested in research that contained someone else’s interpretation. He felt the client’s ideas and their experiences were more provocative and interesting to learn. In a study with three couples, clients were invited to become research consultants rather than clients, to teach the therapist about what was important to them in the therapeutic process. Gaddis used an Interpersonal Process Recall system, in which audiotapes or videotapes were used to trigger memories from the past. The participants watched a video of some past event or previous therapeutic sessions and gave an explanation of what they saw.
Afterward, Gaddis (2004) drafted letters of what he saw in the same videos watched by the participants. The participants were given the letters in order to provide feedback on what they saw. Gaddis found, client descriptions were focused on issues in their personal lives and their relationships.

In addition, Gaddis (2004) discovered, when individuals were research consultants rather than clients, there was more freedom in expressing their insights and knowledge. The Gaddis study validated the narrative therapy viewpoints. It demonstrated how individuals have the ability to make decisions and give input about problems and their lives. Components of the Gaddis study are similar to what Ellis’ has done with mediated co-constructed narratives. Moreover, the study proved how the therapist was not the expert, but the person or consultant is really the expert. In other words, people know what they need in their lives and how to solve their own problems.

Autoethnography and narrative therapy become collaborative perspectives in working with families. Aleman and Helfrich (2010) presented their work at the 96th Annual Convention of the National Communication Association. A mother and daughter, who were also a narrative therapist and ethnographer respectively, who primarily work with families. In the comprehensive paper, Building Bridges between Practices: Collaborative Autoethnography and Narrative Therapy, Aleman and Helfrich created the framework by citing White and Ellis as the foundation of how they utilize aspects of both narrative therapy and autoethnography in working with families. The paper acknowledged how narrative therapy and autoethnography can be used together while working with families through Dialogic imagination. Dialogic imagination stemmed from Mikhail Bakhtin's who was a Russian philosopher and “literary critic.” (para. 1) Bakhtin believed whatever was stated by anyone in the past, present, or future was not void
because words created a continual conversation (Irvine, 2004). In addition, both processes began with listening. Each approach had the same outcome which was finding the meaning of the lived experience. Asking and responding to questions and comprising externalizing conversations by identifying the problem were commonalities. New stories were created through letter writing.

The key techniques used in Aleman and Helfrich’s report are summarized in Table 1:

Table 1

<table>
<thead>
<tr>
<th>Comparison of Narrative Therapy and Autoethnography</th>
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<tr>
<td><strong>Narrative Therapy</strong></td>
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<tr>
<td>Dialogic Imagination (p. 13)</td>
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<tr>
<td>Begins by listening</td>
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<td>Double listening is used while working with families and in multiple trauma. Listening beyond words to find the meaning behind the story. (p. 14)</td>
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<tr>
<td>Ask and respond to questions that seek to open up aspects of a person’s lived experience that remains hidden (p. 15)</td>
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<tr>
<td>Externalization-Using White’s technique the problem is named or “coding” language is used to flush it out or describe it. (p. 20)</td>
</tr>
<tr>
<td>Knowledge Through Writing and Reflection-Therapeutic letters are primarily used by the participants in therapy. (p. 21).</td>
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Although the report utilized families as the participants, the relevance to this study were the common techniques used by narrative therapy and autoethnography which proved the techniques can work together. Specifically, externalization was used with autoethnography. The research also exposed a gap in the literature of combining externalization and autoethnography used by an individual which are the central tenets of this study.

Kross et al. (2014) found in a study of 585 participants using self-talk language can promote a person’s ability to cope with stressful events. Participants were instructed to think about a stressful event for a period of time. While thinking about the event, they used the word “you” (2nd person language) in place of the word “I” or “me” (1st person language) (p. 304). The results revealed when persons used the word “you” they had more positive thoughts and less anxiety about the stressful event. In addition, the perception of the stressful event became more of a challenge rather than endangerment to them. The study also used third person language where the individual used his or her own name such as “Bob” (p. 304). Researchers discovered the change in language puts the individual outside of him or herself, as if they become a different person, thereby allowing the individual to cope with the stressful event. The relevance to this study was the ability to create personas to describe the extremely stressful life events.

**Summary of Chapter Two**

The literature review discussed the importance of and the need for a study in autoethnography utilizing externalization as a method to explore a person’s stressful life events. There was a contextual discussion of the theories about resilience, hardiness, thriving, and posttraumatic growth. Further examination included subjectivity, autoethnography, ethnography, narrative therapy, and externalization was reviewed.
According to the PTG researchers who encounter a major life crisis or lived experiences maintain emotional stability. Somehow adjustments were made within the individual and the individual becomes grateful for the experience because a sense of meaning has occurred.

The origins of autoethnography and how it connected society and humanity through evocative narratives was discussed. Bochner (2010) stated, “The storyteller promotes a sociology of caring and community, an engaged and passionate sociology that requires us to develop caring relationships with others instead of standing apart from them in the name of objectivity and rigor” (p. 664).

A review of the literature indicated through autoethnography it is the writer who tells the story using first person language which experiences a new outcome and evokes feelings in the reader. The writer is the participant and researcher moving in and out of the process. It is the story that becomes the data. There was a discussion on how this burgeoning method has evolved over two decades as evidenced by its etiology. Other studies utilizing autoethnography in various aspects of their lives were examined. There was a discussion about individuals who have thrived.

The discussion shifted to narrative therapy and externalization. The origins of narrative therapy were discussed with Michael White and David Epston pioneering it. An in depth look revealed the process of narrative therapy, leading up to how problem saturated situations become separated from the person. Examples of questions were given to show how detailed the process occurred. In addition, there were studies that used externalization without a narrative therapist to facilitate and participants had successful outcomes.

This study contributed to the body of knowledge by utilizing autoethnography and the externalization as a combined method to explore the categories of lived experience in work, and family; that occurred from January 2009 through August 2011.
What this means is knowledge empowers the person to be the expert on his or her lived experience. Introspection is used along with changing the thoughts to produce written words that create a powerful story in order to help the person find a sense of meaning of their lived experiences (Ellis & Bochner, 2000).

Chapter Three discussed an explanation of the methods of this study, including a brief introduction, research tradition, central guiding research questions, the role of the researcher, data collection strategy, data analysis, interview questions, study validity, reliability and data gathered, and the summary of the chapter.
Chapter Three: Methods

This study examined how externalization (White and Epston 1990), applied as the core process of autoethnography, could be a feasible methodological modification applied to autoethnography. If feasible, this modification of autoethnography might be used by leaders and others, to support their ability to make sense of stressful events while thriving in the face of stressful events that accompany leadership.

Research Design

Denzin and Lincoln (2000) defined qualitative research as “the studied use and collection of a variety of empirical materials-case study; personal experience; introspection; life story; artifacts; cultural texts and productions; observational; historical; interactional and visual text-that describe routine and problematic moments and meanings in individual’s lives” (p. 3). Qualitative research is also described as research that does not require numerical computations and is done in a “real world” environment (Golafshani, 2003, p. 600). Autoethnography is an example of a method in qualitative research. Autoethnography is defined by its pioneers, Ellis and Bochner in the Handbook of Qualitative Research. Autoethnography are personal stories that delve into the deep thoughts of a one’s connection with their social environment, communication, with times past; described in qualitative research that provides meaning to the researcher and readers (Denzin & Lincoln 2000).

Ellis and Bochner (1996) stated, autoethnography should be written in the first person voice in which, “concrete action, dialogue, emotion, embodiment, spirituality, and self-consciousness are featured, appearing as relational and institutional stories affected by history, social structure, and culture, which themselves are dialectally revealed through action, feeling, thought, and language” (p. 739). Ellis and Bochner (1996) felt it was important to tell the truth
through stories and language no matter how difficult or awkward. Obtaining the story can be challenging. In the next section Epston and White described a technique used to attain stories that may be hidden from the consultant.

White and his colleague David Epston described the process of externalizing the problem in their book, *Narrative Means to Therapeutic Ends*. White and Epston (1990) wrote:

Externalizing is an approach to therapy that encourages persons to objectify…to personify the problem that they experience as oppressive. The problem becomes a separate entity and is external to the person or relationship that was ascribed as the problem (p. 38).

According to Epston and White (1992), the hidden stories become illuminated through an externalizing process. Externalizing conversations help the person identify the hidden story and begin with a historical account of the impact the problem has had on the person’s life. The person becomes liberated from the problem during the externalization process which provides the ability to re-author a new story.

In Michael White’s Narrative Therapy process, the tone was set in order to “de-classify” or “de-objectify” (p. 8) through externalizing the problem or separating the problem from the person (Madigan, 1992; White, 1990). In the therapeutic setting, the person became the consultant, avoiding dependency on the therapist to fix the problem. This establishment empowers the person to direct and redirect conversations to unleash the routed information that only the person has the knowledge of. To accomplish this, the person enters the “separation stage” (p. 13) through different approaches, including externalizing the problem which evicts the person from the problem. Then the person enters “liminality” which was a place of possibilities—“fantasy or desire” (p. 13) in which the person is the source of all meaning (Epston and White
1992). Thus, when the person is the consultant, driving the externalizing process, the person becomes has authority over their problems as well as the solutions. When significant events have been identified, and externalization is applied, it is the person who has the power to unravel the mysteries. This begins the process of storytelling and meaning making (Epston & White 1992).

According to White (1990), the first step in externalizing the problem is to describe the problem from the client's perspective using their own words. Then wording is changed to reflect the problem being outside of the person rather than a part of them or "objectifying the problem" (p. 39). This is the process of separating the person from the problem. Although White’s technique was used within the confines of therapy, in this study, externalization was not used in a therapeutic setting, or with therapeutic intent. Externalization will be explored as a technique in the autoethnographic method.

Central Guiding Research Question

What is the feasibility of employing externalization as a methodological modification to traditional autoethnographic approaches?

Role of the Researcher

I was both researcher and subject in this study. Based on Epston and White, (1992), the client is the consultant of his or her lived experiences and it is best to use the individual’s words. The areas to be utilized for the externalization are the categories of work and family. The personas are given to indicate names based on the categories of my lived experiences. This is what White indicates as "personifying" (p. 39). Following the tradition of externalization, the categories chosen for me to explore were in a sense problematic. They are associated with a category and its persona as follows in Table 2 below.


<table>
<thead>
<tr>
<th>Categories</th>
<th>Persona</th>
<th>Representation</th>
<th>Time Period Beginning</th>
<th>Time Period Ending</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work</td>
<td>Mr. Toxic</td>
<td>A troubled work environment</td>
<td>January 2009</td>
<td>August 2011</td>
</tr>
<tr>
<td>Family</td>
<td>Mr. R.I.P.</td>
<td>Loss of two family members</td>
<td>May 2009</td>
<td>July 2011</td>
</tr>
</tbody>
</table>

The Work category or *Mr. Toxic* represented a troubled work environment. Family or *Mr. RIP* were two family members that passed away. The lived experiences encompassed the time frame between January 2009 through August 2011 and depended on the recollection of the events occurred during this period.

The personas associated with each category were explored using six structured interview questions that were developed based on the externalization. During this process, the personas became a separate entity and were external to me through individual conversations with each persona. Each dialogue was audiotaped with a digital recorder to capture the conversation.

The theoretical areas explored were the attitudes of hardiness (control, commitment, and challenge), posttraumatic growth, and thriving which illuminated information in developing the dialogue that constructed the autoethnography. The questions were based on White’s externalization process.

**Data Collection Strategy**

This study occurred in a safe, secure environment at home in order to conduct the externalizations. The instrumentation was a structured interview utilized to provoke, spur, or otherwise stimulate dialogue between me and my personas. The personas and time periods were: *Mr. Toxic* (Work-period from January 2009-August 2011) and *Mr. RIP* (Family-period from
May 2009- July 2011). Five of the six questions (questions 2-6) were centered on the four theoretical perspectives of resilience, hardiness, thriving, and posttraumatic growth.

**Interview Questions: Work Category-Mr. Toxic**

1. Mr. Toxic, what is your memory of work from the period of January 2009- August 2011? (Events)

2. Mr. Toxic, what were the indicators that the setback of losing work became a challenge from January 2009-August 2011? (Challenge)

3. Mr. Toxic, what enabled you to manage what was going on from the period of January 2009-August 2011? (Control)

4. Mr. Toxic, how did you demonstrate your life’s activities were more important from the period of January 2009-August 2011? (Commitment)

5. Mr. Toxic, what were the indicators that you were growing during the work loss process from the period of January 2009-August 2011? (Thriving)

6. Mr. Toxic, what positive changes were made in your life from the period of January 2009-August 2011? (Posttraumatic Growth)
Interview Questions: Family Category-Mr. RIP

1. Mr. RIP, what is your memory of family for the period of May 2009- July 2011? (Events)
2. Mr. RIP, what were the indicators that the setback of losing family became a challenge from May 2009- July 2011? (Challenge)
3. Mr. RIP, what enabled you to manage what was going on from the period of May 2009- July 2011? (Control)
4. Mr. RIP, how did you demonstrate your life’s activities were more important from the period of May 2009- July 2011? (Commitment)
5. Mr. RIP, what were the indicators that you were growing during the family loss process from the period of May 2009- July 2011? (Thriving)
6. Mr. RIP, what positive changes were made in your life from the period of May 2009- July 2011? (Posttraumatic Growth)

Data collection for this study consisted of executing the autoethnography and externalization technique. Each persona from the categories of Work (Mr. Toxic) and Family (Mr. RIP) received a set of six questions that were given verbally by me as the researcher and participant. The recorded conversations were held between myself and each designated persona. I recorded one persona and waited two days before recording the second persona. The rationale behind waiting the two day period prevented data from overlapping and prevented me from being emotionally overextended. The recordings were transcribed into a dialogical style and analyzed thus creating the autoethnography.
Data Analysis

Audio-taped interviews were transcribed and reviewed manually to organize and code the data. Using an open coding system, meaning the data was read, marked, and highlighted sections of the text to create the themes. An axial coding method was used to sort and group the themes using a hierarchical system to reduce the number of themes and show the relationship (Strauss & Corbin, 1990).

The interpretive research uses inductive analysis, which means categories, themes, and interviews are not imposed prior to data collection (Denzin & Lincoln, 2005). The preferred names of the themes were derived from the data (Zhang & Wildemuth, 2009).

Once categorized, the data provided, details, events, thoughts, and dialogue to help in the process of invoking the memory of passion. This emotional reflection is an important aspect of data analysis. The data were useful in generating strong feelings as referenced by Bochner and Ellis (2002). Communication through dialogue helps the writer connect with the reader and provokes emotion during the process. The process is like using show and tell. It provides the reader with enough space to be able to look at the described events in a different manner. It gives the reader distance from the event to allow for a period of reflection. (Ellis, Adams, & Bochner, 2011).

Protection of Human Subjects

This research did not include any external human subjects and was determined by the University’s IRB to be nonhuman subject research (Appendix A). As the researcher and the participant of the study, I protected myself in a number of ways. Scheduled breaks were taken from the autoethnographic process and I participated in extracurricular activities that have nothing to do with the research. Some of the extracurricular activities included: going shopping
with girlfriends; going to graduations; ordination services; walking my dog; playing tennis; and watching favorite television. The extracurricular activities helped me feel renewed during the process of writing the study.

In the event, I felt emotionally traumatized, I did not have to seek counseling with a psychotherapist. However, I spoke to other colleagues, my chair, and my pastor. As a licensed therapist in another state, and one who has treated trauma previously, I knew the triggers of such symptoms. I was also aware that counseling was available through the university or with a local licensed therapist of which I had a previous relationship. There was a one day rest period between conducting the structured interview and collecting the data to assist in protecting me. In addition, after each question was presented in the protocol, I debriefed the questioning experience by using a separate recording device.

**Study Validity**

According to Bochner (2012) stated,

> It depends on your definition of validity. I start from the position that language is not transparent, and there’s no single standard of truth. Validity means that our work seeks verisimilitude; it evokes in readers a feeling that the experience described is lifelike, believable, and possible. You might also judge the validity of whether it helps readers communicate with others different from themselves or offers a way to improve the lives of participants and the readers or even your own. (p. 674)

It is my hope that this study spoke to the reader as it did for me as the researcher and produced the genuineness in the research revealed. Also, that the study impacted the reader to have empathy while experiencing the journey with me.
Reliability of Data Gathered and Interpretation

According to (Golafshani, 2003) “the term ‘reliability’ is a concept used for testing or evaluating quantitative research…If we see the idea of testing as a way of information elicitation then the most important test of any qualitative study is its quality” (p. 603). For an autoethnographer, questions of reliability referred to the narrator's credibility. Could the narrator have had the experiences described, given available "factual evidence"? Does the narrator believe that this is actually what happened to her or him? (Bochner, 2002, p. 86). Has the narrator taken "literary license" to the point that the story is better viewed as fiction than a truthful account? (p. 33). According to Ellis, “Since we always create our personal narrative from a situated location, trying to make our present, imagined future, and remembered past cohere, there’s no such thing as orthodox reliability in autoethnographic research” (p. 674). This study was authentic and told the truth as I understood it about the events that occurred in my life.

Multiple reviews of the transcripts occurred at least six times over a period of a month which produced intra rater reliability. Intra rater reliability is defined as, “The degree of stability observed when a measurement is repeated under identical conditions by the same rater” (Health Technology Assessment Glossary, 2015, para. 1). The strength was the iterative process of analysis of the data by the researcher.

Summary of Chapter Three

This chapter explained a study that explored an innovation in the area of authoethnography. An authoethnography was performed employing externalization (White & Epston, 1990). The feasibility of this method was explored through an analysis of the author’s lived experiences of the externalization. The proposal was organized by setting the contextual
framework with a discussion about resilience, hardiness, thriving, and posttraumatic growth. Subsequently, there was a discussion about autoethnography and externalization.

In Chapter Four the findings of the study were presented. Following the introductory paragraph the purpose statement will be reaffirmed. According to Blum (2006), an analysis of the data occurs to examine patterns or themes, and is presented based on the major themes found in the data.
Chapter Four: Research Findings

Chapter Four reports the results from the study. The chapter begins with a restatement of the purpose followed by a detailed discussion on data organization and analysis. The results are explained and presented in tables and narrative format. The findings are presented using the following categories: Memory of Work and Family Events (MFWE), Challenge Indicators (CI), Management Indicators (MI), Activity Persistence Indicators (API), Growth Indicators (GI), and Positive Change Indicators (PCI). A summary is provided along with a brief look at Chapter Five.

Restatement of the Purpose

The purpose of this study was to explore the use of autoethnography and externalization combined as a method to examine how feasible it might be for persons to employ the combined methods to process stressful life events.

Data Organization and Analysis

The discussion is based on how the personas were used for the externalization portion of the method, how the data were collected, coded, and organized. The personas were created for the externalization and names were provided to represent the lived experiences of the researcher-participant. Each persona from the categories of Work (Mr. Toxic) and Family (Mr. RIP) received a set of six questions and the process was audiotaped. The recorded conversations were between myself and each designated persona. The Mr. Toxic persona was recorded first, and a two day delay occurred before the second persona (Mr. RIP) was recorded. The rationale behind delaying was to prevent the extraction of data from the two distinct personas from overlapping and to prevent emotionally overextending myself. The complete dialogue of Mr. Toxic and Mr. RIP can be found in Appendix D.
Audio-taped interviews were transcribed and reviewed manually to organize and code the data. Using an open coding system, meaning the data was read, marked, and highlighted sections of the text to create the themes. Initially, 21 themes were generated. A manual coding process with axial coding was used to sort and group the themes using a hierarchical system to reduce the number of themes and show the relationship (Strauss & Corbin, 1990). Once a relationship between themes was created, then the data were categorized. Six categories emerged from the data and were reviewed at least six times over the course of a month, which produced intra rater reliability.

Once categorized, the data provided, details, events, thoughts, and dialogue to help in the process of invoking the memory of passionate feelings. Emotional reflection is an important aspect of data analysis. According to Bochner and Ellis (2002), through the use of dialogue the writer brings characters to life and makes the lived experiences engaging and emotionally rich. This process is called telling and showing. Ellis et al., (2011) stated, “Telling is a writing strategy that works with "showing" in that it provides readers some distance from the events described so that they might think about the events in a more abstract way.” (p. 5). The externalization was used to assist with the expressing and inducing reflection about the events. The research question directed the premise of the study.

Central Research And Interview Questions

This study was guided by one central question: What is the feasibility of employing externalization as a methodological modification to traditional autoethnographic approaches? In other words, the study examined how useful was it to apply objectification to a traditional descriptive method of a researcher’s personal experience through self-reflection writing.
Six interview questions were used to create a dialogue between the personas and participant. Five of the six questions (questions 2-6) were centered around the four theoretical perspectives of resilience, hardiness, thriving, and posttraumantic growth. Mr. Toxic and Mr. RIP each had a set of questions:

**Interview Questions: Work Category-Mr. Toxic**

1. Mr. Toxic, what is your memory of work from the period of January 2009-August 2011? (Events)
2. Mr. Toxic, what were the indicators that the setback of losing work became a challenge from January 2009-August 2011? (Challenge)
3. Mr. Toxic, what enabled you to manage what was going on from the period of January 2009-August 2011? (Control)
4. Mr. Toxic, how did you demonstrate your life’s activities were more important from the period of January 2009-August 2011? (Commitment)
5. Mr. Toxic, what were the indicators that you were growing during the work loss process from the period of January 2009-August 2011? (Thriving)
6. Mr. Toxic, what positive changes were made in your life from the period of January 2009-August 2011? (Posttraumatic Growth)
Interview Questions: Family Category-Mr. RIP

1. Mr. RIP, what is your memory of family for the period of May 2009- July 2011? (Events)

2. Mr. RIP, what were the indicators that the setback of losing family became a challenge from May 2009- July 2011? (Challenge)

3. Mr. RIP, what enabled you to manage what was going on from the period of May 2009- July 2011? (Control)

4. Mr. RIP, how did you demonstrate your life’s activities were more important from the period of May 2009- July 2011? (Commitment)

5. Mr. RIP, what were the indicators that you were growing during the family loss process from the period of May 2009- July 2011? (Thriving)

6. Mr. RIP, what positive changes were made in your life from the period of May 2009- July 2011? (Posttraumatic Growth)
Findings

The thematic analysis resulted in six categories. Each is discussed below.

Memory of Work and Family Events (MWFE)

The Memory of Work and Family Events represent the responses to the lived experiences that occurred. The purpose of identifying the work and family events was to demonstrate how many lived experiences were happening from the period of January 2009 through July 2011. Chapter Five provides the interpretation of what the findings.

The questions used to generate dialogue were: Mr. Toxic, what is your Memory of Work from the period of January 2009- August 2011? And Mr. RIP, what is your Memory of Family for the period of May 2009- July 2011? The MWFE table identified the frequencies to Interview Question 1 from the Mr. Toxic and Mr. RIP personas. See Table 3 below:

Table 3

MWFE Frequencies

<table>
<thead>
<tr>
<th>Events</th>
<th>Mr. Toxic Frequency</th>
<th>Mr. RIP Frequency</th>
<th>Total Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Memory of Work Events</td>
<td>29</td>
<td>0</td>
<td>29</td>
</tr>
<tr>
<td>Memory Of Family Events</td>
<td>0</td>
<td>43</td>
<td>43</td>
</tr>
<tr>
<td>Memory of Family and Work</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Total Events</td>
<td>-</td>
<td>-</td>
<td>72</td>
</tr>
</tbody>
</table>

Interpretation Memory of Work and Family Events (MWFE) Frequencies

Table 3 was intended to uncover the underlying significance of the lived experiences. Mr. Toxic and Mr. RIP represented work events and family events respectively. The frequency responses were reported individually and totally for Mr. Toxic and Mr. RIP personas. A complete list of family and work events occurred is located in Appendix B.
According to the MWFE Table, there were 29 work events and 43 family events that happened from January 2009 through July 2011. Overall, there were 72 events. There were four events that were shared in the Mr. Toxic and Mr. RIP frequency responses which were included in both totals. The four events included, hiring a learning disability specialist, talking to goddaughter on the way to class, counseling department raising money for mother’s funeral, and a State inspection of the disability student's program.

The Memory of Work and Family Events (MWFE) produced eight themes that were prominent in the Question 1 dialogue of Mr. Toxic and Mr. RIP. See Table 4 below:

Table 4

<table>
<thead>
<tr>
<th>Themes</th>
<th>Mr. Toxic Frequency</th>
<th>Mr. RIP Frequency</th>
<th>Total Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Withstood the pressure</td>
<td>21</td>
<td>7</td>
<td>28</td>
</tr>
<tr>
<td>Communicated with others</td>
<td>4</td>
<td>21</td>
<td>25</td>
</tr>
<tr>
<td>Stayed focused</td>
<td>9</td>
<td>8</td>
<td>17</td>
</tr>
<tr>
<td>Made calculated decisions</td>
<td>3</td>
<td>12</td>
<td>15</td>
</tr>
<tr>
<td>Embracing the facts</td>
<td>3</td>
<td>8</td>
<td>11</td>
</tr>
<tr>
<td>Not giving up</td>
<td>4</td>
<td>7</td>
<td>11</td>
</tr>
<tr>
<td>Supported by friends</td>
<td>2</td>
<td>7</td>
<td>9</td>
</tr>
<tr>
<td>Took care of physical self</td>
<td>6</td>
<td>3</td>
<td>9</td>
</tr>
</tbody>
</table>

**Interpretation MWFE Responses**

Table 4 uncovered the underlying significance of the lived experiences and demonstrated coping strategies used when the events occurred. The theme *withstood the pressure* indicated a total of twenty-eight occurrences between Mr. Toxic and Mr. RIP. It had the highest frequency over others listed. Mr. Toxic (21) had more than Mr. RIP (7) in this category. The Mr. Toxic dialogue revealed, “I had been through a battle the last two years dealing with a very difficult employee and dealing with harassment in the office of this subordinate employee as well as dealing with unsupported administrators, a Dean and a Vice President who were both colluding
with this employee. It had been a very difficult time the two years prior in working with this
person and trying to get this person to do their job.” In the Mr. RIP conversation, “So I
remember, Darlene, you sat there while they put the IV and the different bags of medicine, there
hanging while he's sitting in a chair and you're sitting next to him. You're there, sitting and
watching how everybody is being connected because there're just rows and rows of people in this
facility that are all connected to these IVs that are getting some sort of medical treatment during
this process.” The communicated with others theme had a total of 25 responses. Mr. Toxic (4)
had more than Mr. RIP (21) in this category. Mr. RIP stated, “I’m driving down the freeway on
my way to class and I get this phone call and it happens to be my goddaughter. Now normally
on my way from work to class I call my parents to check in with them to see how things are
going with them and how their day was going. But instead, this call came in from my
goddaughter and we talked. And the conversation ended up going on until I arrived at school.”
Mr. Toxic reported, “I made a request to the President to move and relocate to a different place
and he of course said ‘no’. The third highest theme, stayed focused had an outcome of 17
responses. Mr. Toxic “I felt really good going into the evaluation because I had accomplished a
lot of things in that third year, even though the obstacles were there in dealing with this
belligerent oppositional employee that I had. The program had increased and was surviving even
thriving at this point once the structural things were put into place.” Mr. RIP reported, “What I
also remember the next day was a very difficult time for you, your dad and sister, where you all
had to get together and begin planning the services for your mom.”

Overall, the theme made calculated decisions produced 15 responses which are described
in The Mr. RIP dialogue stated, “And that’s when I made the decision to go into the house.” Mr.
Toxic revealed, “You’ve gone through the evaluation and you made a decision about treatment
for breast cancer.” *Embracing the facts and not giving up* generated 11 responses between the Mr. RIP and Mr. Toxic dialogues. *Embracing the facts* in the Mr. RIP reported, “I get what they’re saying, but it just doesn’t help the hurt of loss at that time when you’re trying to figure out how all this happened and then trying to deal with the fact that, you know, she really is gone.” Mr. Toxic reported, “I had other personal things that I was more concerned about and so I knew that I couldn’t control whatever they decided.” *Not giving up* was demonstrated in the Mr. RIP dialogue by, “he loved people and loved living, and so he too wasn't ready to go. He wasn't trying to leave here so he was determined to fight it.” Mr. Toxic reported, “The letter of rebuttal had to go to the Dean first and then eventually I ended up filing a grievance against the whole process because the process was just not normal.”

*Supported by friends and took care of physical self* comprised nine responses between Mr. Toxic and Mr. RIP. According to Mr. Toxic, *supported by friends* revealed, “And once that happened there was another colleague friend of mine who advocated for me.” Mr. RIP reported, “Darlene, and you know people were coming in by the droves and people were calling and so forth. You know giving their support to you, especially your classmates and there were a couple people at work that also gave their support.” With the theme *took care of physical self* Mr. RIP reported, “He was actually in the best of health that a person could be in. He never drank, smoked or anything like that. He always ate healthy.” For Mr. Toxic stated, “I started an exercise regimen.”

**Challenge Indicators (CI)**

The Challenge Indicators are represented by the initials CI. The literature stated, one who has a strong attitude of challenge accepts change as part of a normal part of development (Maddi and Khoshaba, 2005). The questions used to generate dialogue included: Mr. Toxic, what were...
the indicators that the setback of losing work became a challenge from January 2009-August 2011? Mr. RIP, what were the indicators that the setback of losing family became a challenge from May 2009- July 2011? The Challenge Indicators (CI) Table identified responses and frequencies to Interview Question 2 from the Mr. Toxic and Mr. RIP personas. See (CI) Table 5 below:

Table 5

<table>
<thead>
<tr>
<th>Themes</th>
<th>Mr. Toxic Frequency</th>
<th>Mr. RIP Frequency</th>
<th>Total Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not giving up</td>
<td>4</td>
<td>2</td>
<td>6</td>
</tr>
<tr>
<td>Moving Forward</td>
<td>5</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>Handling loss my way</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Being strong for others</td>
<td>0</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Just going with it</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
<tr>
<td>Embracing the facts</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>

Interpretation of Challenge Indicators (CI)

Table 5 was intended to uncover the indicators of how losing work and family became a challenge rather than a setback. A total of six times Mr. Toxic and Mr. RIP indicated, *not giving up* and *moving forward*, which were the highest numbers for this question. An example of not giving up with Mr. Toxic was, “That I was not going to give up and I was still going to plow through the process.” In the Mr. RIP dialogue relative to *moving forward*, “But I think, Darlene, the challenge was moving forward and what was that going to look like since your parents were not here.”

In the Mr. RIP dialogue, there was an indicated five times in *handling loss my way* and *being strong for others* which were markers for the losing family became a challenge. An example of *being strong for others* was, “They saw your parents everyday…and so you really
had to be strong for them.” According to Mr. RIP in handling loss, “You don’t tell me when it’s
time to move past my grieving process.”

On the other hand, there were no iterations for Mr. Toxic. However, Mr. Toxic specified
three times to just go with it, whereas, Mr. RIP had no responses in this area. There were three
total responses for Mr. Toxic and Mr. RIP to: embracing the facts. For Mr. Toxic embracing the
facts was, “and the challenge was finally wrapping my brain around the fact of what was
happening.” Mr. RIP reported, “So, to not have them here anymore or, to not be able to
physically hear their voices, that’s a setback. It’s trying to cope with that and it’s a day-to-day
task.”

Management Indicators (MI)

The Management Indicators are indicated by the initials MI. In the literature, one who is
strong in control takes charge of the hardship and has no doubt that a resolution can be found
(Maddi and Khoshaba, 2005). The questions used to generate dialogue included: Mr. Toxic, what
enabled you to manage what was going on from the period of January 2009-August 2011? And
Mr. RIP, what enabled you to manage what was going on from the period of May 2009- July
2011? The (MI) Table identified responses and frequencies to Interview Question 3 from the Mr.
Toxic and Mr. RIP personas. See (MI) Table 6 below:

Table 6

<table>
<thead>
<tr>
<th>Themes</th>
<th>Mr. Toxic Frequency</th>
<th>Mr. RIP Frequency</th>
<th>Total Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Took care of spiritual self</td>
<td>11</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>Took care of physical self</td>
<td>4</td>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td>Supported by friends</td>
<td>6</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>Supported by family</td>
<td>3</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Moving forward</td>
<td>2</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Stayed focused</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>
Interpretation of Management Indicators (MI)

Table 6 was intended to uncover what made it possible to manage what was going on in the life of the participant. Mr. Toxic and Mr. RIP produced a total of fourteen iterations to, took care of spiritual self which was ranked the highest in question 3. Took care of spiritual self is demonstrated in the Mr. RIP dialogue, “We got through that, it took a whole lot of prayer. It took a lot of fasting, and reading the Word.” A total of ten responses referred to took care of physical self. This was demonstrated in the Mr. Toxic dialogue, “My family was already going out weekly to play tennis, so I decided I would join them.” Overall, there were seven recurrences by Mr. Toxic and Mr. RIP indicated in the supported by friends response. For example, Mr. Toxic stated, “I did have one or two friends on the campus that I could talk to.” In addition, six combined responses to supported by family were indicated by Mr. Toxic and Mr. RIP. Mr. RIP reported, “Whatever we were dealing with we were going to do it together as a family.”

There were four times Mr. Toxic and Mr. RIP gave responses to moving forward and three responses to focused on responsibilities. In the Mr. RIP dialogue, “We are still moving forward…if we could just get out of 2009-2010.” The example of stayed focused is in the Mr. Toxic dialogue, “Stay focused on my responsibilities as the coordinator-counselor for students with disabilities.”

Activity Persistence Indicators (API)

The Activity Persistence Indicators were represented by the initials API. The literature stated, if a person is strong in commitment, he or she stays focused on the activities and people surrounding them; whether it is related to work or life in general (Maddi and Khoshaba, 2005) Social support is how the individual remains connected to the interactions of people no matter how contentious the surrounding environment (p. 19). The questions used to generate dialogue
included: Mr. Toxic, how did you demonstrate your life’s activities were more important from the period of January 2009-August 2011? And Mr. RIP, how did you demonstrate your life’s activities were more important from the period of May 2009-July 2011? The (API) Table identifies responses and frequencies to Interview Question 4 from the Mr. Toxic and Mr. RIP personas. See (API) Table 7 below:

Table 7

<table>
<thead>
<tr>
<th>Themes</th>
<th>Mr. Toxic Frequency</th>
<th>Mr. RIP Frequency</th>
<th>Total Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stayed focused</td>
<td>7</td>
<td>2</td>
<td>9</td>
</tr>
<tr>
<td>Being supportive to others</td>
<td>5</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Took care of physical self</td>
<td>5</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>Took care of spiritual self</td>
<td>5</td>
<td>0</td>
<td>5</td>
</tr>
<tr>
<td>Compartmentalized emotions</td>
<td>1</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Created a daily schedule</td>
<td>0</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Communicated with others</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

Interpretation of Activity Persistence Indicators (API)

Table 7 was intended to uncover what was done to ensure life’s activities were more important. Mr. Toxic and Mr. RIP provided a total of nine iterations to stayed focused and being supportive to others which was ranked the highest in question 4. Mr. Toxic indicated, “The only thing I could focus on were the students…making sure they were served.” For Mr. RIP, “We weren’t afraid to speak up and be advocates for my dad.” There were a total of eight occurrences for took care of physical self for Mr. RIP and Mr. Toxic. Mr. RIP reported, “Sleep was definitely a life activity. We needed it.” Mr. Toxic had five frequencies for took care of spiritual self with none reported for Mr. RIP. Mr. Toxic stated, “Making sure that your spiritual foundation was taken care by attending church regularly, attending Bible studies and even doing outreach activities within the church.”
There were a combined four instances of compartmentalized emotions and created a daily schedule. However, no frequency was reported for Mr. Toxic relative to created a daily schedule. Mr. RIP stated with compartmentalized emotions, “We were all analytical machines. We weren’t operating out of emotions.”

Communicated with others yielded three frequency responses for Mr. Toxic and Mr. RIP. Mr. Toxic stated, “It was important for me to reach out to girlfriends.” Mr. RIP reported, “Communication was tight with family members. When one couldn’t follow through, another one picked up and said “I’ll do it.”

Growth Indicators (GI)

The Growth Indicators were designated by the initials GI. Thriving is the person's capability to go beyond their physical or mental development (Norlander, Von Schedvin, and Archer, 2005). The questions used to generate dialogue included: Mr. Toxic, what were the indicators that you were growing during the work loss process from the period of January 2009-August 2011? And Mr. RIP, what were the indicators that you were growing during the family loss process from the period of May 2009- July 2011? The (GI) Table identifies responses and frequencies to Interview Question 5 from the Mr. Toxic and Mr. RIP personas. See (GI) Table 8 below:

Table 8

<table>
<thead>
<tr>
<th>Themes</th>
<th>Mr. Toxic Frequency</th>
<th>Mr. RIP Frequency</th>
<th>Total Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Let things go</td>
<td>3</td>
<td>7</td>
<td>10</td>
</tr>
<tr>
<td>Withstood the pressure</td>
<td>4</td>
<td>3</td>
<td>7</td>
</tr>
<tr>
<td>Took care of spiritual self</td>
<td>3</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Stayed focused and moving</td>
<td>3</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Made calculated decisions</td>
<td>2</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>The pain was necessary</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>
Interpretation of Growth Indicators (GI)

Table 8 was intended to uncover the indicators of growth during the work and family loss process. Mr. Toxic and Mr. RIP produced a total of ten responses to *let things go* which was ranked the highest in question 5. Mr. RIP reported, “I just said, “that’s it” when I rode away in the limousine back to the church…I have not been back since.” *Withstood the pressure* and *took care of spiritual self* (Toxic), “I felt like I was growing spiritually at this time.” This yielded seven overall responses for Mr. Toxic and Mr. RIP. Mr. Toxic stated, “So much hurt in every aspect of my life” in reference to *withstood the pressure*. There were six total responses to *stayed focused and moving forward* for Mr. Toxic and Mr. RIP. Mr. Toxic reported, “The job search was a way to stay focused and keep yourself moving forward.”

The dialogues yielded four combined iterations for *made calculated decisions* and three for *the pain was necessary*. Mr. Toxic stated relative to the pain was necessary, “I keep calling it an awful time. It was something that was necessary for me to go through for a reason.” Mr. RIP made calculated decisions, “I flipped what I was experiencing into a joyous and happy occasion every time when I went to church because I knew that my parents were in a better place.”

Positive Change Indicators (PCI)

The Positive Change Indicators were represented by the initials PCI. Located in the literature, posttraumatic growth is “positive change experienced as a result of the struggle with a major life crisis or a traumatic event” (Posttraumatic Growth, 2011, para. 1). The questions used to generate dialogue included: Mr. Toxic, what positive changes were made in your life from the period of January 2009-August 2011? and Mr. RIP, what positive changes were made in your life from the period of May 2009-July 2011? The (PCI) Table identifies responses and
frequencies to Interview Question 6 from the Mr. Toxic and Mr. RIP personas. See (PCI) Table 9 below:

Table 9

Positive Change Indicators

<table>
<thead>
<tr>
<th>Themes</th>
<th>Mr. Toxic Frequency</th>
<th>Mr. RIP Frequency</th>
<th>Total Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Made calculated decisions</td>
<td>11</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>Became more confident</td>
<td>2</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Changed my thinking</td>
<td>3</td>
<td>3</td>
<td>6</td>
</tr>
<tr>
<td>Made healthier choices</td>
<td>0</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Became more spiritual</td>
<td>3</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Learned to speak my truth</td>
<td>4</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Advocated and supported others</td>
<td>3</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Focused on untapped skills</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Let things go</td>
<td>2</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>

Interpretation of Positive Change Indicators (PCI)

Table 9 was intended to uncover what positive changes were made in the life of the participant. Mr. Toxic and Mr. RIP indicated fourteen iterations to, made calculated decisions which were ranked the highest in question 6. Mr. Toxic stated, “The decision I encouraged you to make was to stick with the class…I believe that was the most positive decision.” Became more confident was the second highest with seven total frequencies from Mr. Toxic and Mr. RIP. According to Mr. RIP, “I am in a place where I am confident of who I am and feeling very comfortable about what I say.”

Changed my thinking and made healthier choices yielded six responses each. Although made healthier choices was only indicated in the Mr. RIP dialogue. Mr. Toxic stated, “I think underneath the anger was disappointment and hurt and I began to change my way of thinking.” According to Mr. RIP, “You eat more leafy foods…you drink nothing but water or green tea.”
Became more spiritual, learned to speak my truth, advocated and supported others yielded five frequencies each in the combined dialogues. In the Mr. RIP dialogue, “We are also very spiritual and very God referencing.” Mr. Toxic stated, “So, I just learned that if you don’t want me to give you the truth, don’t ask me.” Mr. RIP reported, “I am just trying to be supportive and offer an opinion.”

Three frequencies each indicated focused on untapped skills and let things go in the Mr. Toxic and Mr. RIP dialogue. Mr. Toxic stated, “You completed everything and that changed your focus of what other skills are out there that I have not tapped into”. Mr. Rip stated, “You don’t become too attached to material things because they really don’t matter. Material things don’t matter as much as people.”

**Summary of Chapter Five**

The study was based on a modification of autoethnography using externalization, which enabled me as the researcher-participant to convey subjective experiences through audiotaped interviews. The interview was framed as a conversational approach with six central questions to capture the lived experiences through the personas. The study generated six categories with themes. Each theme generated outliers which were statements from the dialogue of the Mr. Toxic and Mr. RIP personas.

Chapter Five will provide a summary, conclusion, and recommendations based upon the themes that emerged. An interpretation of how the findings relate to the research question and the literature review will be given. In addition, the major themes, the implications for practice, future directions, the experience from the participant’s perspective, an interpretation of applying the externalization, limitations, will be discussed.
Chapter Five: Discussion

This study was prompted by the insufficient research available exploring the use of autoethnography and externalization combined together as a useful intervention for method to persons undergoing extreme stress. The externalization, according to White and Epston (1990) involved objectification or creating a persona. In this study, the personas represented the lived experiences of the researcher-participant which were placed into categories of work (Mr. Toxic) and family (Mr. RIP). Each persona received a set of six interview questions which generated the autoethnography of conversation or dialogue between the researcher-participant. Bochner and Ellis (2002) described the different narrative genres written: "short stories, poems, performance texts, fiction, memoirs, autobiographies, narrative ethnographies, conversations, tales, novel's satire, theater, dance, music, documentaries, art, and multimedia presentations" (p. 403). The writing is about self and self is the power of the story (Ellis, 2004). This study examined how the story of the researcher-participant comes to live through the power of dialogue.

Outcomes Of Study Related To The Research Question

The basic tenets of the research question involved the effectiveness of applying objectification to alter the self-reflective writing and explored a researcher participant's personal experience while connecting it to meaning. As a result of the externalization from this study, it suggests feasibility. The following section will examine the preparation, selecting a timeframe of events, identification of the personas, and capturing the data.

According to Ellis (2004), one of the procedures of autoethnography is to recall a situation the writer has experienced. The researcher-participant had multiple personal tragedies or events to occur from January 2009-August 2011. To prepare for the study, a period of time needed to pass before focusing on the personal tragedies. According to Pearce (2010), time is
needed to search for meaning. However, narrative writers should not allow too much distance in
time to write about their experiences. The events and time frames were decided. The time frame
chosen was from January 2009-2011. They were placed into categories. The categories of work
and family were established. Then the personas were created. A troubled work environment
represented the persona of Mr. Toxic and the loss of two family members was Mr. RIP (Rest In
Peace). According to White and Epston (1990), the problem becomes a separate entity and is
external to the person or relationship that was ascribed as the problem. Just as White (1990)
used questions to guide the externalizing process in Narrative Therapy, the interview questions
were used to guide the externalizing process in this study.

A scheduled time was needed for the researcher-participant to receive the six interview
questions for the conversation to commence. The researcher-participant was in a relaxed
environment at home without any distractions. The time was early evening sitting on a
comfortable sofa. Once the first question was given, the information flowed and the dialogue
between the researcher-participant and the personas was continuous. The dialogue was captured
on a mini digital tape recorder and then translated as a written dialogue. Consequently, according
to the Bochner and Ellis (2002) description, the dialogue produced the autoethnography.
Moreover, it was the use of the externalization that generated the story while the lived
experiences (personal tragedies) became the focus of the research.

During the analysis of the dialogue, major themes and categories emerged from the
results. As a result of the externalization, various types of coping were revealed when distressed
situations occurred. Multiple layers of stress were exposed in the work and family categories
which created themes. In addition, the externalization application was the backdrop for the
theoretical concepts of hardiness, thriving, resilience, and posttraumatic growth. As a result of the externalization, categories emerged and are discussed in detail.

**Memory of Work and Family Events**

There were stressful events in the autoethnographer’s life. As a result of the externalization revealed multiple layers of stress, where the autoethnographer thought there were only singular stressors. Mr. Toxic represented a troubled work environment. The externalization application revealed there were multiple layers of stress on the job of the researcher-participant through coworkers, supervisors, subordinate employees, and in serving the population of disabled students. In addition, the faculty tenure process was extremely stressful due to a dysfunctional procedure and extremely poor leadership. While these issues were being experienced, personal tragedy strikes. Mom died suddenly, dad has a rare sinus cancer goes through treatment and dies, and the researcher-participant received a breast cancer diagnosis. All of these events had multiple layers of stress within each of them, which were added to the multiple layers of stress at work. As a result, of the externalization uncovered, all events along with those indicated as extreme stress.

During the events, the themes became indicators of the coping strategies. According to the externalization, the typical responses for coping were: Withstood the pressure; communicated with others; stayed focused; and made calculated decisions. These coping mechanisms not only indicated the intensity of the multiple layers of stress that existed, but also demonstrated the strength in dealing with them. Weinstein and Ryan (2011) stated, “When individuals have processed a stressful event well, their language involves more indicators that they have made… the meaning of the experience, and can speak about it in more tangible ways”
The externalization revealed the outcomes of coping strategies in extremely stressful situations as evidenced by the Memory of Work and Family Events.

**Challenge Indicators**

As a result, of the externalization, the setback of losing work and family was reframed as a challenge. The literature stated, one who has a strong attitude of challenge accepts change as part of a normal part of development (Maddi & Khoshaba, 2005). The externalization application indicated, the most frequent Challenge Indicators were moving forward and not giving up. In stress attribution research, Weinstein and Ryan (2011) reported, independent people realize life’s experiences are a more of a challenge rather than a distressing situation. The externalization indicated, to cope with the setback, it must be reframed, the individual cannot give up and but needs to move forward. The externalization revealed the outcome of hardiness when dealing with extreme stress as evidenced by the Challenge Indicators.

**Management Indicators**

In the literature, one who is strong in control takes charge of the hardship and has no doubt that a resolution can be found (Maddi & Khoshaba, 2005). While the findings of this study cannot be generalized, the Management Indicators revealed the person must take control of the extreme stress and not allow the stressful situation to take control of the person. For example, as a result, of the externalization revealed one of the Management Indicators as *took care of spiritual self*. Recognizing that there is someone bigger than you are or a Higher Power takes the burden of the extreme stress off of the individual. Levin and Taylor (1998) considered this concept by stating a sense of prayer and having a relationship with God, who acts a mediator to impact the stressful events. Another common Management Indicator *took care of physical self* emerged from the results. Dr. David Spiegel at The Center on Stress and Health at Stanford
University stated, “Individuals experiencing extreme stress should “rest, take breaks, get lots of sleep, practice self-soothing; and maintain a healthy diet and exercise routine” (Berl, 2013, para 3). The externalization application indicated, the importance of a spiritual foundation in order to manage extreme stress. Moreover, taking care of the physical body through rest, proper nutrition, and exercise were equally as important in coping with extreme stress. If a person feels strong physically and surrenders to a power bigger than ourselves, he or she can cope with extreme stress. The externalization revealed the outcome of hardiness when dealing with extreme stress as evidenced by the Management Indicators.

**Activity Persistence Indicators**

As a result of the externalization, being persistent in life’s activities such as work, school, or leisure is important in coping with extreme stress. In addition, having a strong social network is necessary as well. These areas produced the most common responses. If a person has a strong attitude in commitment, he or she stays focused on the activities and people surrounding them; whether it is related to work or life in general (Maddi & Khoshaba, 2005). Commitment is the third attitude or characteristic of hardiness. Having strong attitudes in control, challenge, and commitment also produced a very strong state of mind against extreme stress. Maddi & Khoshaba (2005) contended that resilience is based on three attitudes that allow a person to create a mentality of bravery. The externalization revealed the outcome of hardiness when dealing with extreme stress as evidenced by the Activity Persistence Indicators.

**Growth Indicators**

Growth Indicators represented being able to thrive in the midst of adversity. The meaning of thriving for Carver (1998) represents growth rather than recession when responding to a stressor. As a result, of the externalization demonstrated growth based on being able to let things
The 2013 popular Disney animated movie, Frozen had a song entitled, Let it go which was sung towards the end of the movie. In this song, the life of Elsa, the main character, was full of turmoil and extreme stress because she had special powers that hurt other people. So, she decided to hide her powers and isolate herself. Most importantly, she concealed her true self from the world. Through this song, Elsa demonstrated growth from the experience and decided to expose her true self by letting go of the fear that kept the true self-hidden. Fear keeps a person engaged with the distress. Sometimes the best decision is to let the stress go, rather fighting with it. Carver (1998) indicated, thriving is defined as our ability to endure the test and grow rather than wither. The externalization revealed the outcome of thriving when confronted with extreme stress as evidenced by the Growth Indicators.

**Positive Change Indicators**

Positive Change Indicators represented being able adapt in the midst of adversity. Posttraumatic growth is not about maintaining emotional stability in the midst of a crisis; (Bonanno, 2004) but about making adjustments, flourishing, and succeeding during very arduous times in one's life (Linley & Joseph, 2004). Joyce Meyer (2015) in the daily devotional, *Promises In Your Everyday Life* stated, individuals need to be more flexible toward people or things in general, because they are always changing. Be the person that plans a strategy to anticipate the storms of life ahead. When things do not work out, stay strong and do something different. This is based on Romans 12: 16.

Doing something different is illustrated in the externalization through the following adjustments: Made calculated decisions; Became more confident, Changed my thinking, Made healthier choices, Became more spiritual, Learned to speak my truth, Advocated and supported others; Focused on untapped skills, and Let things go. According to Tedeschi, Calhoun, Cann,
and Hanks at the Posttraumatic Growth Research Group (2011), posttraumatic growth occurs in five general areas. As a result, of the externalization demonstrated seven of the nine reported adjustments corresponded to the five general areas in italics:

- The first area is sometimes people who must face major life crises develop a sense that new opportunities have emerged from the struggle, opening up possibilities that were not present before. (Focused on untapped skills)

- A second area is a change in relationships with others. Some people experience closer relationships with some specific people, and they can also experience an increased sense of connection to others who suffer. (Advocated and supported others)

- The third area of possible change is an increased sense of one’s own strength – “If I lived through that, I can face anything.” (Became more confident; Learned to speak my truth)

- A fourth aspect of posttraumatic growth experienced by some people is a greater appreciation for life in general. (Made healthier choices)

- The fifth area involves the spiritual or religious domain. Some individuals experience a deepening of their spiritual lives, however, thus deepening can also involve a significant change in one’s belief system. (Became more spiritual; Changed my thinking)

The externalization revealed the outcome of posttraumatic when dealing with extreme stress, as evidenced by the Positive Change Indicators.

**How The Study Addressed The Research Question**

What is the feasibility of employing externalization as a methodological modification to traditional autoethnographic approaches?
Before providing a response to the research question, it would appropriate to analyze and grasp the nature of the inquiry. Let us look at a few keywords. The question begins with the notion of feasibility. Feasibility is defined as the power to produce results or capable of being used according to *Collins English Dictionary- Complete and Unabridged 10th Edition* (2015). Next, employing can be translated as applying. Finally, the methodological modification can be interpreted as a positive improvement. Consequently, this study was designed to ascertain the use of externalization and its power to produce results as a positive improvement to traditional autoethnography.

As discussed previously, the concept of externalization involves storytelling to solve problems that exist in a person or family structure. The story is rewritten to form an alternative story by separating the problem from the person through externalization (White & Epston, 1990). In this study, the externalization are the personas which represented work and family. Equally important, in autoethnography, storytelling is a powerful way for an individual to find meaning in life. Meaning and purpose are discovered when the researcher and the participant become one in the same. Through the process of being both entities, an epiphany takes place within the individual to discover true meaning in life. It is the personal story that delves into the deep thoughts of one’s connection with their social environment, communication, with times past; described in autoethnography that provides meaning to the researcher and readers (Denzin & Lincoln 2000).

In addition, autoethnography can be represented in various genres such as poems, plays, personal narratives, conversations, etc. (Bochner & Ellis 2002). For the purpose of this study, the genre of interest was a conversation or dialogue. Interestingly, the outcome of both externalization and autoethnography is to create a personal story. Did the externalization change
the outcome of autoethnography? The answer is no. The outcome is the personal story. Likewise, the style or genre was not improved because dialogue is listed as a genre of autoethnography.

In this study, the externalization was identified with the stressful events prior to the story or conversation developing and eventually moved through a process of inquiry. The externalization and the process of inquiry became the steps to achieving the dialogue which enhanced the autoethnography. As a result of the externalization, the participant had a framework and focused only on the personas. The process of obtaining the dialogue was also achieved at a faster rate due to the externalization.

Basically, the research question’s intent is to see if the externalization made a difference in the autoethnography. I would argue, the externalization made an improvement in the process of obtaining the traditional autoethnography. As a result of applying the externalization, dialogue occurred. So, the externalization was capable of producing results. To illustrate, the following suggests why externalization was feasible in this study: (a) Kept the focus narrowed on the stressful events of work and family through the personas of Mr. Toxic and Mr. RIP. (b) Provided the initiation of healing through the use of language and dialogue as discussed in the literature. (c) Reversed the negative label placed on the stressful events. (d) Placed the focus on the participant to take responsibility for her life. (e) Assisted in the ability to recognize choices and alternatives. (f) Projected the stressful event onto an entity rather than a person, which takes the blame off of the individual or anyone in the individual’s life.

Moreover, the externalization revealed the outcomes of coping strategies in extremely stressful situations as evidenced by the Memory of Work and Family Events. The externalization revealed the outcome of hardiness when dealing with extreme stress as evidenced
by the Challenge Indicators. The externalization revealed the outcome of hardiness when dealing with extreme stress as evidenced by the Management Indicators. The externalization revealed the outcome of hardiness when dealing with extreme stress as evidenced by the Activity Persistence Indicators. The externalization revealed the outcome of thriving when confronted with extreme stress as evidenced by the Growth Indicators. The externalization revealed the outcome of posttraumatic when dealing with extreme stress, as evidenced by the Positive Change Indicators. To reiterate, the externalization and the process of inquiry became the steps to achieving the dialogue which enhanced the autoethnography. However, it did not change the context of the autoethnography, therefore, the externalization demonstrated feasibility in this study.

**Limitations**

One limitation was qualitative analysis software was not utilized. In reference to the interpretive research results, the method of coding and the possible bias and subjectivity may have been present. Perhaps if a third objective person to triangulate the results would have enhanced and strengthened the validity of the findings. A peer review process to ensure reliability was not utilized.

The study was limited to the researcher as the participant which is a limitation. According to Denzin (1989), interpretive research begins and ends with the narrative of the self and of the researcher. The method of autoethnography is introspective and the researcher-participant is the focus of the inquiry. Because autoethnography triggers emotions when a person is researching his or her own life, this could cloud the judgment of the investigator which could create bias. It was very important that I remained objective throughout the process. Since data were acquired through memory and reflection, the researcher was aware that the information could have been enhanced or lessened. Every effort was made to present accurate information. “Since we always
create our personal narrative from a situated location, trying to make our present, imagined future, and remembered past cohere, there’s no such thing as orthodox reliability” (Ellis & Bochner, 2000, p. 751).

**Implications For Practice**

The following section delves into a discussion about extreme stress, its impact on the body, the aftereffects of the externalization, and the implications for practice. As discussed in the problem statement, the *Stress in America* report by the APA concluded, extreme stress was at a rate of 23% in 2009 and 24% in 2010. During this time, the researcher-participant's stress level fell into both percentage categories. Based on the report, *Stress In America: Paying With Our Health* extreme stress occurred about money matters. This was also validated in the study when the researcher-participant experienced the loss of employment. For example, “My contract ended on June 30, 2010, and there was no emotion.” Cutting a person’s livelihood was paralyzing, therefore, it was important to make decisions and have a plan. Some of the decisions included: relocating to a smaller living space, downsizing an automobile, and reducing the payment of bills when necessary in order to survive.

Stress, by definition, is a biological response which activates the “fight-or-flight response” which alerts the body there is a threat (Hockenbury & Hockenbury, 2014, p. 505). Extreme stress occurs when the body has extended exposure to the threat which could have damaging effects on the organs in the body. For example, in the Mr. Toxic dialogue, “Individuals had broken into my office, had defecated and put feces in trash cans in my office and in the office area.” The researcher-participant's blood pressure rose for the first time and the nurse at the college sent her home. The possible implications were, if the researcher-participant remained at work, there could have been serious ramifications to the heart. In addition, five months later
the researcher-participant received a breast cancer diagnosis in which extreme stress could have had damaging effects on the whole body. However, that did not happen. Perhaps it is how the researcher-participant perceived the extreme stress experienced that produced coping.

As a result, of the externalization, an adjustment was made in the researcher-participant's perception of the extreme stress. The cognitive appraisal model created by Richard Lazarus affirmed the person’s interpretation of their circumstances and their access to resources determined the actions used to cope with the circumstances (Hockenbury & Hockenbury, 2014). Moreover, a person’s interpretation of their circumstance makes them the most knowledgeable.

Epston and White (1992) reported, the person became the consultant, in order to establish no dependency on the therapist in fixing the problem. Autoethnography provides a voice to atrocities experienced by individuals and removes the silence that held it hostage (Bochner, 1996). The implication is, the person interprets their circumstance and becomes the fixer of circumstance using self-reflection through autoethnography.

This study used autoethnography and externalization as a method is designed for the individual who has experienced stressful events and is mentally healthy. An individual could perform the method by themselves, but the individual should have a keen awareness of their own emotional limitations. A therapist would be needed if the individual had a history of psychopathology, currently has a diagnosis, or if the extreme stress created emotional instability for the individual. This method could assist leaders who do not have the time in their schedules to obtain a therapist or life coach. An adolescent could use this method to learn how to take care of their emotions before using out of control methods such as drugs and alcohol. Anyone who has experienced a crisis or traumatic experience in their lives could use this study for improved social adjustment and understanding of the crisis. A health psychologist could use this method to
examine the mind-body connections and their influences on health, illness, and treatment. This method could be used in milder forms of stress. For example, college students tend to juggle a lot of things at once and tend to report being stressed out. This method could help pinpoint what needs to be adjusted in their lives. A psychotherapist could use the method as a homework assignment, to unleash rooted pain that has not manifested itself in the therapeutic environment. On the other hand, using the method with groups could be an area for future exploration.

**Future Directions**

Perhaps a larger participant sample can be explored to see what the commonalities or differences would be using the autoethnography and externalization method. When individuals from other cultures tell their story, perhaps this study could help reduce stereotypes and racism toward specific cultures. The use of comparative research can be explored, where groups of women and men are using the autoethnography-externalization method. On the other hand, older and younger women could participate in using the method. Then compare their results. Individuals could learn how to use the power within themselves to tell their own truth. (White, 1990; Bochner, 2012). In other words, use the method to learn more about themselves and to express their truth. Perhaps individuals will have a healthier state of mind and better-coping strategies. There could be an exploration using the method on children and youth with a life coach as a guide. Narrative Therapy could include this method in working individuals in the therapeutic setting.

Individuals who use the autoethnographic-externalization method would be most interested in knowing that experiencing extreme stress does not have to be debilitating. The autoethnography - externalization method can address and separate any pain or discomfort experienced by the crisis or traumatic event. There are specific behaviors an individual can use to
maintain functioning and to take care of themselves during the crisis or traumatic event. Some of the behaviors could help with better health and well-being in the future.

**Participant’s Experience And Perspective Of Applying The Externalization**

Initially, it took two weeks to get started with collecting information from the Mr. Toxic persona-A troubled work environment. The reason was, the work category was still relevant, even though four years had passed. It was anticipated that there would be a great emotional impact, subsequently that did not occur. However, because there was a delay in starting may suggest, embedded feelings of hurt and disappointment could have been present. On the other hand, the Mr. RIP persona-the loss of two family members was the most difficult to reflect on and discuss. Consequently, there were more breaks taken during the recorded sessions. Perhaps the issue was more painful to think about and discuss. In addition, there was a personal health challenge going on at the time. When the last interview question was completed from the recorded sessions, there was a sense of relief. Moreover, there was extreme physical exhaustion felt after each of the dialogue sessions. The exhaustion was experienced upon awakening the following morning. The overall experience felt cathartic and liberating. If a story is told correctly, it will liberate the writer and the reader (Bochner & Ellis, 2002).

**Applying the externalization to autoethnography.** This study taught me that, I was thriving and growing throughout the whole process. In the study, the stronger parts of Darlene were the Mr. Toxic and Mr. RIP personas, which kept me supported when dealing with challenges. As a result, of the externalization indicated how the dialogue tells the story about participant’s lived experiences. Consequently, it provided information about coping skills used by the participant or individuals mentioned in the dialogue.
During the past five years, several notable and life altering events occurred. However, the activities in my life remained very important to me. When individuals are involved in social activities there is happiness and satisfaction (Ybarra et al., 2008). My immediate family was a great source of support. I stayed connected to my girlfriends as well as an ex-husband, who was considerably a source of encouragement. Even though the school was a goal, it was also a necessity in my life. Seeing my extended family at a family reunion helped as well. Feeling good includes involvement in normal activities such as maintaining close relationships, commitment to activities, and can find a sense of meaning in life (Huppert, 2009).

My spiritual life was extremely important. It was important for me to believe that God was carrying me through every situation. I needed to stay connected to Him through my church and Bible study. My church family was an important connection for me. My faith in God was my anchor and was used through the disappointments I experienced. A number of scholars have suggested that just being religious has positive consequences for one's health and psychological well-being. Levin (1994) considered this concept as a sense of being in communication with or having a relationship with, a higher power that functions, as does social support, to buffer the effects of stress and increase resilience. Our findings also reinforce the theoretical assumption that links faith and optimistic expectations in positive psychology and faith research (Hood, Spika, Hunsberger, & Gorsuch, 1996). It is arguable that positive attitude might enable perceived spiritual support, which may, in turn, increase the likelihood of prayer coping (AI, Tice, Peterson & Huang, 2005). So, faith in God, prayer, and being in fellowship with members of the church were essential to coping with extreme stress.

The lessons learned. I have always been very organized, learned how to create balance in my life, and remain focused on my goals. The experiences taught me about being very
resilient and remaining diligent. There continued to be a strong inner drive for success. Through
disappointments, I still dreamed about doing great things in life. When intrinsic goals and
personal values relate to one another, well-being is improved (Sheldon & Elliot, 1999).
Proficiency in networking with others was demonstrated. I loved to take risks. It was almost
exhilarating. I utilized specific counseling skills such as, redirecting and reframing to get through
situations. When one area turned out to be a dead end, I had the ability to reinvent myself. Skills
were tapped into that were not being utilized. I was always making decisions, even through the
time times. I left the comfort of my neighborhood to work in a new environment. Learning new
things continued to be a desire. It was important for me to stay relevant with the various forms of
information technology to remain competitive and grow. Sharing my job hunting experiences
with students in order to help them with future endeavors was important. The main lesson
learned is to be grateful for all of the small things in life and to remain hopeful about the future.

Concluding Comments

The primary focus of this study was to explore the effectiveness externalization when
applied to traditional autoethnographic approaches to process stressful life events. This study
examined how the story of the researcher-participant comes to life through the power of
dialogue. The externalization created personas which represented the stressful life events or lived
experiences of the researcher-participant which were placed into categories of work (Mr. Toxic)
and family (Mr. RIP). The descriptive measures were analyzed which provided evidence of clear
and definable themes that were supported by the research. As a result of the externalization,
various types of coping were revealed when distressed situations occurred. In addition, the
externalization application was the backdrop for the theoretical concepts of hardiness, thriving,
resilience, and posttraumatic growth.
As a result, the externalization indicated how the dialogue tells the story about participant’s lived experiences. Consequently, it provided information about coping skills used by the participant or individuals mentioned in the dialogue. Huppert, (2009) reported, psychological well-being is when a person is able to manage painful emotions and while functioning normally. There are 10 practical coping strategies revealed through the data, when stressful life events occur. They are summarized below:

1. Take responsibility and own the situation
2. Reframe the problem as a challenge
3. Stay focused (committed) in activities and goals
4. Look for the positive
5. Do something different
6. Make good decisions
7. Be a risk taker
8. Create a support system (i.e. Family, friends, community, church)
9. Let things go (to a Higher Power)
10. Move forward

In conclusion, two self reflecting methods-externalization and autethnography were examined. Both create stories about the individual. The externalization helped the participant have more power over the story. Combining the two together helped as the participant to focus on the two areas of Work and Family thereby liberating me from those areas. Liberation equals the autoethnography plus the externalization in which the outcome is a new story.

In addition, the researcher’s experience and the categories and themes that emerged from the data provided evidence that the autoethnographic- externalization process was feasible and
suggests that a methodological combination might help others, including leaders, cope with the stress associated with traumatic events.
REFERENCES


APPENDIX A

Protection of Human Subjects

PEPPERDINE UNIVERSITY
Graduate and Professional Schools Institutional Review Board

July 2, 2014
Darlene Knight Wooten

Protocol #: N0514D02
Project Title: Exploring the Feasibility of Employing Externalization as Methodological Modification to Traditional AutoEthnographic Approaches

Dear Ms. Wooten:

Thank you for submitting the Non-Human Subjects Verification Form and supporting documents for your above referenced project. As required by the Code of Federal Regulations for the Protect for Human Subjects (Title 45 Part 46) any activity that is research and involves human subjects requires review by the Graduate and Professional Schools IRB (GPS-IRB).

After review of the Non-Human Subjects Verification Form and supporting documents, GPS IRB has determined that your proposed research activity does not involve human subjects. Human subject is defined as a living individual about whom an investigator (whether professional or student) conducting research obtains (1) data through intervention or interaction with the individual, or (2) identifiable private information. (45 CFR 46102(f)).

As you are not obtaining either data through intervention or interaction with living individuals, or identifiable private information, then the research activity does not involve human subjects, therefore GPS IRB review and approval is not required of your above reference research.

We wish you success on your non-human subject research.

Sincerely,
Dr. Thema Bryant-Davis
Chair, Graduate and Professional Schools IRB
Pepperdine University

cc: Dr. Lee Kats, Vice Provost for Research and Strategic Initiatives
Mr. Brett Leech, Compliance Attorney
Dr. Daphnee DePorres, Faculty Chair

1 Research means a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge. Activities which meet this definition constitute research for purposes of this policy, whether or not they are conducted or supported under a program which is considered research for other purposes. (45 CFR 46.102 (d).
APPENDIX B

Lived Experiences: Mr. Toxic Work Events

1. The third year tenure evaluation was conducted
2. Dealt with the antics of difficult, oppositional subordinate employee
3. Was unsupported by my administrators
4. Subordinate employee chose to focus on union activities rather than hired job duties.
5. Horrible two years of tenure process: character assassination
6. My office was broken into and vandalized three times within three months.
7. Pornographic cartoon materials left on the printer with extra speakers attached to the computer.
8. The person(s) who broken into the office left urine and feces in the office trash cans.
9. The Sheriff didn’t see break in as a crime, therefore, very reluctant to take a report.
10. Fingerprints and footprints clearly exposed in the office sheriff refused to dust for prints.
11. Vice President of Student Services said, “I was Overreacting” to the break-ins.
12. My blood pressure increased significantly. The nurse sent me home.
13. A private detective was hired by the President of the college. He ruled a crime had been committed.
14. The office relocated to a new building in April.
15. The chair of my tenure committee resigned in the middle of the evaluation. The Department Chair of Counseling became the Chair and the committee was short one person.
16. Provided an elaborate presentation of programmatic and personal accomplishments to the tenure committee.
17. Department chair and faculty mentor bullied and gave sarcastic feedback at 3rd year evaluation.
18. Mocked for being in the doctoral program at Pepperdine University.
19. Forced to sit with the faculty mentor, two days per week for three months.
20. Department Chair concocted a 2nd evaluation in November 2009.
21. Had three evaluations in one year.
22. Interim VP conducted a 3rd evaluation with major input from classified personnel, where 37 percent were significant evidence.
23. Contract ended June 30, 2010 and was not renewed
24. Someone from the college where contract ended tried to prevent me from being hired at a sister college in the district.
25. Attended arbitration case first meeting a month after the contract ended.
26. Classified personnel testified in the arbitration case against me.
27. Department Chair and previous chair of committee testified at the arbitration against me.
28. Arbitrator took eight months to make a decision on my case.
29. Lost my case, but the union lawyer was convinced the arbitrator never looked at the evidence.
Lived Experiences: Mr. RIP Family Events

1. Prepared for a State visit to inspect my program at work on the 20th of May.
2. Attended classes in the doctoral program at Pepperdine University.
3. Organized interviews to hire a learning disability specialist before the day before the state inspection
4. Chose learning disability specialist candidates to be sent to the President
5. After class, received an urgent call from eldest niece to come to my parent’s house because “something was wrong with grandma”.
6. Drove to parent’s to find an ambulance, the fire department with all lights blazing in front of their place
7. People were standing outside of my parent’s place emotionally upset
8. Dad told me mom had passed away and she was inside the house.
9. Sitting in the car having a conversation with a friend and my cousin about mom not being here for my graduation or future conversations with her
10. Discussed and reflected on mom’s health condition and how her heart problems began.
11. The funeral home arrived to pick up mom’s body. I made the decision to go in the house to see mom.
12. Mom’s sisters and relatives were notified of her death. We gave out-of-town family members time to make travel arrangements for the funeral. Mom was buried 10 days after she passed.
13. Had a Wake service for individuals that knew mom in the community.
14. The funeral was a joyous celebration of my mom’s life which was very uplifting.
15. When the funeral was over, relatives were gone, it was time to put financial matters in order.
16. Dad complained of sinus headaches and not being able to breathe or smell odors, so my sister and I shared going to the ear, throat, and nose doctor. The doctor saw polyps lodged in the nasal passages on a scan.
17. The doctor scheduled surgery for dad to remove the polyps from his sinuses.
18. While recuperating from surgery, dad acknowledged he could smell again the cologne I was wearing along with his food.
19. The doctor told dad the surgery was successful, but the polyps looked strange. So the polyps were tested.
20. The testing determined that dad had a rare sinus cancer that was aggressive.
21. Dad went for a scan which indicated cancer nodules were in the liver and under the rib cage.
22. In a meeting with the Oncologist, decided chemotherapy was the best way to treat this type of cancer.
23. Dad received his first dosage of chemotherapy through an IV before the planned Palm Springs family getaway. There were rows of people being treated at the facility.
24. I stayed at dad’s house to make sure he was okay after his first chemotherapy treatment.
25. At dad’s house, the chemotherapy had a delayed reaction. Dad needed assistance in standing up. He had diarrhea, dizziness, and an inability to eat.
26. Dad and I went to hydration which put fluids back into his body that were depleted by the chemotherapy treatment.
27. Dad had appointments for radiation and chemotherapy combined which reduced the nodules in liver and eradicated the nodules under the rib cage.
28. Dad continued to complain of dizziness and blurred vision. So, we had an appointment with an ophthalmologist, which determined dad’s eyes were great. Dad wanted to get his head checked, but the doctors thought the referral was unnecessary.
29. Dad called me to come to his room because something was wrong. I saw him lying on his side and shaking. He was talking to me with his eyes opened. I’ve seen people have seizures before, so this was different for me.
30. I called my brother-in-law (who is a physician assistant) to come to the house along with the paramedics.
31. While in the ER, doctor’s discovered five tumors were in dad’s brain. Radiation and Oncology doctor’s never told the family tumors were growing in his brain.
32. Went with dad to whole brain radiation treatments to eliminate the tumors.
33. Dad was moved to a rehabilitation facility because he had movement in his hands and legs and physical therapy could help restore the use of his limbs.
34. Dad went into a sleep state because he was overly medicated and was rushed back to the hospital for three days again.
35. The doctors had written my dad off. They were not caring and produced a “go home and die attitude.” They needed the hospital bed for sick people.
36. While in the hospital, helped dad eat even though he could use his hands.
37. Had to stay on top of the nurses and report them. There was no compassion or respect in caring for dad.
38. The hospital administrators came to dad’s room because of the way he was being cared for.
39. Witnessed dad’s mental capacity as very sharp and he still made decisions about his health.
40. There was one tumor lodge on the cerebellum that refused to completely dissolve during the radiation. It prevented dad from swallowing.
41. Went to visit dad at the rehabilitation center with my brother-in-law. He was sleeping, but he seemed to be breathing harder. My brother-in-law stated, “it could be a matter of days or weeks before organs failed. We have to wait and see.”
42. After getting ready for bed, I received a call from the rehab center to return immediately.
43. Contacted sister and brother-in-law to tell them we needed to go immediately to the rehab center. Raced down the highway, but received a call before we turned the corner, dad was gone, 17 months after mom.
APPENDIX C

Original List: Mr. Toxic Work Events

1. Returned to work from Hawaii, where I presented at a conference.
2. Third year tenure evaluations conducted
3. Difficult time with subordinate employee
4. Was unsupported by my administrators
5. Subordinate employee chose to focus on union activities rather than hired job duties.
6. Horrible two years of tenure process
7. The office was broken into and vandalized three times within three months.
8. Pornographic cartoon materials left on the printer along with extra speakers attached.
9. The person who broken into the office left urine and feces in the office trash cans.
10. The Sheriff did not see break in as a crime, therefore reluctant to take a report.
11. Fingerprints and footprints clearly exposed in the office
12. Vice President of Student Services said, “I was Overreacting” to the break-ins.
13. My blood pressure increased significantly. The nurse made me go home.
14. A private detective was hired by the President of the college. He discovered a crime had been committed.
15. The office relocated to a new building in April.
16. The chair of my tenure committee resigned during the evaluation. The Department Chair of Counseling became the Chair and the committee was short one person.
17. Gave an elaborate presentation to the tenure committee.
18. Bullied by department chair and the faculty mentor after the presentation.
19. Sarcastic feedback was given at 3rd year evaluation.
20. Mocked for being in the doctoral program at Pepperdine University.
21. Sat with a faculty mentor for two days per week for three months.
22. Learned about other student services programs on campus while sitting with the faculty mentor.
23. Department Chair concocted a 2nd evaluation in November 2009.
24. Had three evaluations in one year.
25. Interim VP conducted an evaluation with majority input from classified personnel,
where 37 percent were significant evidence.

27. Contract ended June 30, 2010

28. Someone from the college where contract ended tried to prevent me from being hired at a sister college.

29. Worked at the sister college, thanks to an advocate at the sister college.

30. Attended arbitration case first meeting a month after contract ended.

31. Classified personnel testified in the arbitration case.

32. Department Chair and previous chair of committee testified at the arbitration against me.

33. Arbitrator took eight months to make a decision on my case.

34. Lost my case, but the lawyer was convinced the arbitrator ever looked at the evidence.

35. The Dean of Student Services, testified positively about me at the arbitration.

36. Mentor for students with disabilities said positive things about me at the arbitration.
Original List: Mr. RIP Family Events

1. The month of May celebrating family member's birthday- cousin on the 15th and niece on the 20th.
2. Preparing for a state visit to inspect my program at work on the 20th of May.
3. Attending classes in the doctoral program
4. Interviews being set up to hire a learning disability specialist before the day before the state inspection
5. Chose learning disability specialist candidates to be passed on to the President
6. Received phone call from goddaughter on my way to class. Normally, would have checked in with parents to see how things were going with them
7. After school, received an urgent call from eldest niece to come to my parent’s house because “something was wrong with grandma”.
8. Drove to parent’s to find an ambulance, the fire department with all lights blazing in front of their place
9. People were standing outside of my parent’s place and my dad was outside and looked like he had been crying.
10. Dad told me mom had passed away and she was inside the house.
11. Sitting in the car having a conversation with a friend and my cousin about mom not being here for my graduation or future conversations with her
12. Discussed and reflected on mom’s health condition and how her heart problems began.
13. Mom decided not to go with the family to Goofy’s Kitchen at the Disney Walk with the family. At the last minute, she chose to stay at home and watch her favorite television program.
14. The funeral home arrived to pick up mom’s body. I made the decision to go in the house to see mom.
15. Mom’s sisters and relatives were notified of her death. We gave out-of-town family members time to make travel arrangements for the funeral. Mom was buried 10 days after she passed.
16. Had a Wake service for individuals that knew mom in the community.
17. At the funeral service, my dad sang one of mom’s favorite songs.
18. The funeral was a joyous celebration of my mom’s life which was very uplifting.
19. When the funeral was over, relatives were gone, it was time to put financial matters in order.
20. The counseling department at the job gave me a card with four hundred dollars in it. All counselors had signed the card.
21. Dad was having sinus headaches and not being able to breathe or smell odors, so my sister and I shared going to the ear, throat, and nose doctor. The doctor saw polyps lodged in the nasal passages on a scan.
22. The doctor scheduled surgery for dad to remove the polyps from his sinuses.
23. While recuperating from surgery, dad acknowledged he could smell again the cologne I was wearing along with his food.
24. The doctor tells dad the surgery was successful, but the polyps looked strange. So the polyps were being further examined.
25. The testing determined that dad had a rare sinus cancer that was aggressive.
26. Dad went for a scan which indicated cancer nodules were in the liver and under the rib cage.
27. A family trip had been planned to Palm Springs for a few days. In a meeting with the Oncologist, decided chemotherapy was the best way to treat this type of cancer.
28. Dad received his first dosage of chemotherapy through an IV before the Palm Springs trip. There were rows of people being treated at the facility.
29. The doctor comes over during treatment to make sure dad is comfortable.
30. I stayed at dad’s house to make sure he was okay after his first chemotherapy treatment.
31. At dad’s house, the chemotherapy had a delayed reaction. Dad needed assistance in standing up. He had diarrhea, dizziness, and an inability to eat.
32. Dad and I had to go to hydration which put fluids back into his body that were depleted by the chemotherapy treatment.
33. Dad had appointments for radiation and chemotherapy combined which reduced the nodules in liver and eradicated the nodules under the rib cage.
34. Dad continued to complain of dizziness and blurred vision. So, we had an appointment with an ophthalmologist, which determined dad’s eyes were great. Dad wanted to get his head checked, but the doctors didn’t think the referral was necessary.
35. The family trip, was placed on the calendar again.
36. Dad called me to come to his room because something was wrong. I saw him lying on his side and shaking. He was talking to me with his eyes opened. I’ve seen people have seizures before, so this was different for me.

37. I called brother-in-law and the ambulance.

38. At the emergency room, five tumors were discovered in dad’s brain. The radiation doctor and Oncologist never told the family tumors were growing in his brain.

39. Dad had whole brain radiation to eliminate the tumors.

40. Dad was moved to a rehabilitation facility because he had movement in his hands and legs and physical therapy could help restore the use of his limbs.

41. Dad went into a sleep state because he was overly medicated and was returned to the hospital for three days again.

42. The doctors had written my dad off. They were not caring and produced a go home and die attitude. They needed the hospital bed for sick people.

43. While in the hospital, helped dad eat even though he could use his hands.

44. Had to follow-up behind the nurses and report them. There was no compassion or respect in caring for dad.

45. The hospital administrators came to dad’s room because of the way he was being cared for.

46. Witnessed dad’s mental capacity being sharp and still made decisions about his health.

47. There was one tumor lodge on the cerebellum that refused to completely dissolve during the radiation. It prevented dad from swallowing.

48. Went to visit dad at the rehabilitation center with my brother-in-law. He was sleeping, but he seemed to be breathing harder. My brother-in-law stated it could be a matter of days or weeks. We have to wait and see.

49. After getting ready for bed, I received a call from the rehab center.

50. Contacted sister and brother-in-law to tell them we needed to go immediately to the rehab center. Raced down the highway, but received a call before we could turn the corner, dad was gone, 17 months after mom.

51. We had a wonderful, uplifting celebration service with the American flag draped around the casket since dad was a veteran. The Bishop officiated the service.

52. Our family attended a family reunion, which helped with the healing process so much grief.
APPENDIX D

Mr. Toxic- A Troubled Work Environment Dialogue

Question # 1 – Mr. Toxic, what is your memory of work from the period of January 2009 through August 2011?

Mr. Toxic
What I remember, Darlene is that you had just returned from a wonderful experience in Hawaii by presenting at the Hawaii International Conference on Education. And you were relaxed and very well rested and you were ready to go for this new beginning and this New Year. It was around January 2009, and you had taken two weeks of time off for this experience. You had a great time and you were just ready to go and getting ready to complete your third year for being evaluated as a counselor coordinator for students with disabilities at a community college.

Darlene
You’re right Mr. Toxic, I was on a high because I had been through a battle the last two years dealing with a very difficult employee and dealing with harassment in the office from this subordinate employee as well as dealing with unsupported administrators, a Dean and a Vice President who were both colluding with this employee. It had been a very difficult time the two years prior in working with this person and trying to get this person to do their job.

And this person wasn’t willing to do their job because this person represented the union. All they wanted to do was, focus on their union activities rather than the position they were hired to do. And so, this person made it very difficult for me in terms of leading this particular program and in trying to bring the program up to speed as I was directed to do when the President hired me.

Mr. Toxic
You’re right, Darlene, you did withstand a very brutal two years of working at this community college. Your character was called into question as to whether or not you were a competent counselor and so forth. And students were being paid to say things about you through this same individual. The oppositional employee even paid a coworker to impersonate you and say detrimental things toward a student and tried to blame it on you.

So, yeah, you did endure a horrible first two years of the probationary period as a faculty employee who was going through the tenure process. But the great thing that happened was in the year before, December 2008, this person finally retired or was forced to retire and so you upheld your stamina and focused on the goals of the program by serving students in spite of all of these challenges.

And so, when you received the opportunity to go to Hawaii to do a presentation, not only were you representing the college, but you also represented the university where you were getting your Doctoral Degree. And so, you and another student colleague were there and you were there presenting the findings of a project that both of you had worked on. And so, that was a wonderful experience for both of you.
Darlene
My first day back in the office, Mr. Toxic, it seemed like, you know, I was just flying high until I walked in the door and saw that my office was very disheveled and looked like someone had broken into it while I was away, which was very disturbing.

My computer had extra speakers attached to it. And it looked like someone had downloaded pornographic cartoon materials onto my computer and those were left exposed. Also, someone decided to urinate and even defecate in the trash can. So, you know, the Sheriff’s Department had to be notified. This breaking into my office was the beginning of a three-month activity that occurred from January to March of that year, which was very alarming because I had no idea who would do these things and it made it very difficult to focus on my work.

Mr. Toxic
But, Darlene, you were able to focus on your work because, in spite of all of that, you still were able to serve students. Once you had to clean up the area and so forth, you were still able to serve students in the process. I think the most alarming thing for you was the fact that the Sheriff’s Department didn’t feel a crime had been committed and, therefore, they were reluctant to take a report.

This incident occurred three times from the period of January to March and they were reluctant to take reports, reluctant to take fingerprints and footprints that were clearly exposed in the office and I know you were very disturbed by that whole fact. And then when you reported it to administration, what did your Vice President say, Darlene?

Darlene
Well, first the Sheriff said that “there was no crime committed” and then when I reported it to my VP, he stated specifically “this is not a big deal Darlene, you are overreacting.”

So, Mr. Toxic, can you believe that? I mean here is someone that’s in a high position in the college is saying that I’m overreacting about something when it was clear individuals had broken into my office, had defecated and put feces in trash cans in my office and in the office area where the assistant worked before she left and this was not supposed to be a big deal for me. But it was a big deal for me because my blood pressure rose to high heights because it felt like something was purposefully being done to me and no one was supporting me in this process.

Mr. Toxic
But Darlene the most important thing here, is the fact that there was a crime committed because the President after he saw that this was an issue, that he appointed some sort of detective and this detective pointed out that in the Penal Code of California that you were inhaling bodily fluids against your will and so this Penal Code Section that he found stated that whoever was doing this was creating at least a misdemeanor in the process.

Now God forbid you had gotten sick, but who’s to say that smelling the urine wasn’t creating your blood pressure to increase. I mean it did create some anxiety in your body because your body was definitely reacting to that. And so through this process, Darlene, you still
didn’t take time off, although when your blood pressure went up that first time the nurse made you go home. But the times after you stayed focused on the job. I don’t know how you did that.

**Darlene**

Mr. Toxic, I felt like the weight of the world was basically on my shoulder. This was a very important program for the college. There were quite a few students that were participating in the students with disabilities program and I was the only one that understood and could process their services. There was no one else on campus that was qualified to be able to do this. The person that was in the position was not very well-respected anymore to be able to do the work, especially since this person attacked a student in the program and was never reprimanded for that. The person was removed from the students with disabilities office and placed in another office. I found out, of course, after working in this environment. And so, therefore, students had to depend on me in order to get whatever accommodations that they needed in the different classes that they were taking.

**Mr. Toxic**

Darlene, you made an attempt to remove yourself from this office. What was it that you did?

**Darlene**

I made a request to the President to move and relocate to a different place and he, of course, said “no”. This made my stress level, of course, increase because I felt no one was supporting me at this time. They still hadn’t caught the person that was breaking in and so it was just very overwhelming for me.

**Mr. Toxic**

Well, Darlene, you survived it because you went those whole three months and still did your job and right before your office moved in April of that year, it was toward the end, but before the office moved you ended up going through another challenging process.

**Darlene**

Yes, I was approaching my third-year evaluation which happened at the beginning, actually on April fool’s day. I felt really good going into the evaluation because I had accomplished a lot of things in that third year, even though the obstacles were there in dealing with this belligerent oppositional employee that I had. The program had increased and was surviving even thriving at this point once the structural things were put into place.

I was the only Coordinator-Counselor with a minimal staff and was expected to do a budget, write reports for accreditation, write special reports to the State Community College, write rebuttals to the Office of Civil Rights for students who had filed complaints and deal with this employee as well, and supervise student workers and supervise sign language interpreters. So, I had all of these duties that were expected of me to do. The third year seemed to be very challenging in trying to get these things accomplished.
Mr. Toxic
But Darlene, at this evaluation you got some surprises.

Darlene
Yes. I got some surprises. The person that was the Chair of my committee decided not to be my Chair anymore right before the evaluation began. This person wanted the Department Chair of Counseling to be the Chair. This was not a normal request for the Department Chair to do. Besides, I was already short one person on my committee and that was something that wasn’t normal either. The Dean of Student Services was supposed to be present at this particular meeting and he was conveniently absent. And so, you know, I did specifically ask if the dean was going to be there and I was told by the Department Chair that “it wasn’t necessary for him to be there.”

Mr. Toxic
And so, Darlene, you did go in there with a positive attitude and you felt very confident about a lot of the things that you accomplished within the three years and you made a wonderful presentation. Not only did you have PowerPoint set up, but you had poster boards, you had documents that you shared with the committee and so forth. It really demonstrated that you had evidence that you weren’t just fooling around in that office. You were actually working and it was a very elaborate presentation.

Darlene
Yes, Mr. Toxic, and it was very elaborate, but it turned into a circus. It seemed like I was mocked for what I had done. The feedback was sarcastic and the work done was not appreciated.

Mr. Toxic
Well, what do you mean, Darlene?

Darlene
In addition to my accomplishments you also had to talk about the professional development that you’ve been working on within the year. And I was in school in my Doctoral Program and so I mentioned that. I didn’t go into any detail about the program. I just said that I was attending along with some other professional development activities that I had attended within the year, but the Department Chair and this mentor faculty that was assigned to me, who was also on my committee, decided to make a sarcastic comment with one another as if I weren’t present.

They were having a conversation stating things like “so I guess she’s going to be smarter than both of us when she gets her Doctorate and then she will be trying to tell us what to do.” And then they laughed. The only thing I could do at that time was just to respond. I just mentioned it as part of my professional development and stated, “no one could be smarter than the people that are in front of me”. You know, trying to stroke their egos. But it didn’t work.
Mr. Toxic
Well, Darlene, I think because the reason it didn’t work is because they had an agenda already planned. You had a plan and they had a plan. You just didn’t know that they had planned until it began to unfold.

Darlene
Yeah, then the Chair continued, “Oh, and Darlene, you need to get yourself together and you have six months to get yourself together. If you don’t get yourself together, then we’re going to have to take action.” He laughed. I asked, “what was it I was supposed to get together”? And he never gave me anything concrete at that time, he just continued to laugh.

The majority of that third-year evaluation had “exceeds expectations and meets expectations on it”, but the overall grading that the Department Chair and that the Committee decided to give me was “needs improvement”. And I couldn’t get clarification as to how they came up with that based on the evidence. Even the students participate in this process and I got no “needs improvements” from any of the students. And so, it was very difficult for me to wrap my brain around why this particular result was happening.

Mr. Toxic
And Darlene, I know you were upset about it because I really tried to talk to you about this whole process and tried to get you focused on your positive things that you’ve done.

Darlene
I just didn’t understand what they were doing to me at this point. I didn’t understand that there was a plot, a conspiracy that was being created before my eyes here.

Mr. Toxic
But Darlene, you also knew that this was not something that was true. You knew that stuff was being made up as they went along.

Darlene
At that time, Mr. Toxic, I did not know stuff was being made up. I just didn’t get it. I wasn’t getting it. It wasn’t coming clear to me as to what exactly was happening to me at that time. And I responded by writing a letter of rebuttal. The letter of rebuttal had to go to the Dean first and then eventually I ended up filing a grievance against the whole process because the process was just not normal. Number one, you don’t change a Chairperson of the committee right at the evaluation. You normally meet with that person before to say I think there’s going to be some changes occur and these changes were happening right in front of me.

Mr. Toxic
Now Darlene, one of the things I think that helped you through those first two years of dealing with that horrific employee and helping you get through these times of bad evaluations and lies that were being set up against you was the fact that you had sought support, outside support, is that correct?
Darlene
Yes. I did seek outside help to help me through those first two years to get some direction, to get some strength from some place within, to get advice and especially the break-in’s, that kind of, you know, when it started affecting me physically then I really needed to make sure that I was doing something to take care of myself through that particular process.

Now I wasn’t on any medication or anything like that, I just talked. I talked to someone. I got help through my EAP because I felt that’s what I needed at that particular time. I was in a helping profession and one thing I know about being in a helping profession you acquire secondary, post-traumatic stress disorder by dealing with so many difficult things that people are dealing with themselves and my whole crew, my whole 200 plus students that I was dealing with had issues.

And so again I was the dumping person for their issues. So I needed a place or a person to take those issues plus the issues that I was experiencing on the job, a place to go to take care of myself. Aside from my religious background and my faith and dealing with it at church and so forth, I still needed something else and it really helped. And so again, that’s what helped me definitely get through these tough times and plus again dealing with my faith.

The following month of May of 2009 I had a personal tragedy which I’ll go into more detail in my next recording, but I’m just mentioning here because it fits in with the timeline. These issues were going on from January to March. I had the break-in’s and this whole legal issue that never went anywhere because my office eventually moved into a new building. And so once we moved into a new building, the President felt that the problem was solved.

Mr. Toxic
Well Darlene, how could that be? How could that be? How could that be the end result when no one was ever caught? No one was ever brought up to say, okay, this person did it and they’re being reprimanded or they’re being put in jail or you could face your accuser. Nothing. Nothing. But again Darlene you were gracious. You handled it. You went through the move, you know, you moved all of your office equipment and everything that you needed to move out in a timely manner and it was just, I mean you just really handled it professionally.

Darlene
I handled it professionally, but I never felt comfortable working there after that. I always felt that I needed someone to be in the office with me and if I was in there by myself I always locked the door. So it created that kind of space for me that I never had prior to working there.

Mr. Toxic
And so, Darlene, as you were saying about the month of May…
Darlene
Yes, Mr. Toxic, the month of May I had a personal tragedy. My mother died and we buried her June 1st. My dad was diagnosed with a rare sinus cancer in July. I was going back to work at that time and so the family was working to deal with that. But at work, I was told that I would have to sit with my faculty mentor two days out of the week because there was no confidence in my counseling skills according to the Department Chair.

And so this whole business of sitting with this faculty mentor, first of all, I had to go to his office, he never worked in my office, which was totally different, totally different set up in my area, different type of student. And he wanted me to learn about all the different areas of counseling. And then the first and most important thing was the fact that he wanted me to get into his whole thing of writing poetry. He was a poetry writer, so every session that we had he started it off with a poem that he wrote.

And he was peddling basically his books and so I felt obligated and forced really to buy his book. And so these sessions, ongoing sessions, were about reading poetry. It was just really a joke and a waste of my time because I could have been downstairs working with my students that had real issues that needed my time. And this went on from July to October. It was really insane!

Mr. Toxic
Did this person tell you about the time that he was going through the probationary period as well?

Darlene
Yes, he did, Mr. Toxic. He told me that he was “dogged” during his probationary period, his four years. He was literally hazed through the process. So what I was experiencing was normal.

Mr. Toxic
Normal, Darlene! That’s just ridiculous!

Darlene
I think the most irritating part of all of this process was the fact that he never looked at what I did in my area. Never saw the students. I was only evaluated the whole four year period one time, by one person on my committee. This whole process from July to October of sitting with this guy, it was really a waste of time.

Mr. Toxic
I kinda agree with you, Darlene, but there were some positive things that did come out of that experience. If you think about it, you got a chance to know more the Cal Works program. You got a chance to know about the programs in the Extended Opportunity Programs and Services or EOPS. You also got a chance to learn more about the learning skill center on campus. So even though it was taking up your time, but you were still getting some things out of it, even though it was still kinda irritating for you.
Darlene
Yeah, I guess you can say that. But the end result was, I was going to be evaluated again after all of this was over. And the Department Chair concocted another evaluation in October, actually it was supposed to occur in October and it ended up happening in November and they tagged another “needs improvement” on my evaluation.

Mr. Toxic
Darlene, even after he received the an excellent report from the faculty mentor, which was his best friend?

Darlene
Yes. Even though he received an excellent report from the faculty mentor about my progress. The Department Chair still went ahead with another “needs improvement”.

Mr. Toxic
Okay, Darlene, I’m trying to figure this out. So no one observed you during this period. You were just sitting there going to this man’s office two days a week, talking to him about his poetry, going to visit the other offices, no one actually saw you do counseling?

Darlene
No, Mr. Toxic, no one actually saw me do counseling during this period, but they were able to come up with she needs improvement.

During the month of November, I also needed to put my condo up for sale and find another place so that I could move my dad with me. And so that was adding pressure onto this, along with working through a personal tragedy which I’ll talk about in another session. I needed to make a decision about that and so there were just a lot of things that were piling up at that time.

Mr. Toxic
Darlene, but this last thing, really takes the cake with this Interim VP, because the old VP retired, but now you had an Interim VP, who had only been there what? Three months and he were forced to evaluate you a third time?

Darlene
Yes, Mr. Toxic, I had three evaluations in one year.

So, of course, the light bulb went off, “they’re really trying to get rid of me.” So when this process came up, that is, the administrative evaluation where everybody had input who worked in the whole Student Services Department, I couldn’t believe it. The Interim VP could ask anybody, anything about me. Even though the Interim VP asked me for a list, he chose to pick whoever he wanted to get the information needed for this evaluation.

Mr. Toxic
Wow, Darlene. How did you get through this, Darlene?
Darlene
I did a lot of praying. Did a lot of soul searching and my focus really wasn’t on what they were doing at the time because I had other personal things that I was more concerned about. So, I knew that I couldn’t control whatever they decided or said about me, so I just let it go.

Mr. Toxic
So, Darlene, I understand that they came back with a 37% return of individuals that participated in this evaluation about you.

Darlene
Yes, it was 37% and when I confronted the Interim VP about the low percentage, he pretty much said that “37% was significant for him and that it was going to go.” It was going to fly. Whatever these people said it was going to fly.

Now the Interim VP came to the college with some questions in his own character and was given a second chance by obtaining this job. He was damaged goods, so I don’t see how he could, you know, even judge someone else because he had his own personal scandal going on. As I understand it, he was allegedly facing a four-year jail sentence.

Mr. Toxic
So, now we’re in January 2010 where you’ve gone through the evaluation and you made a decision about treatment for breast cancer. You’re now on family leave and so you get this certified delivery while you’re on family leave. What was that about?

Darlene
The certified delivery was a letter that the President had initiated and said that my case was going to the Board and that he was recommending that my contract is not renewed for the following year in my current position.

And because at that time I was facing a personal challenge. During that time, I kinda had to just dismiss it because I needed to focus on myself and what was happening to me. And so I basically had -- I was facing breast cancer surgery and I received that letter the day before breast cancer surgery. I decided not to open it until after I had come home and healed and began the healing process. And so, eventually the doctor in May of that year took me off the job and said that I needed to heal properly because the job was extremely stressful and the atmosphere was too negative for me to properly heal.

Mr. Toxic
Once you had your surgery, Darlene, though, you did go back to work?

Darlene
I did go back to work. I worked from March to May and I was also experiencing some treatment during that time and still reporting every day, focusing on students and not dealing with whatever everybody else thought they were doing to me. I was still going on the campus speaking to people and doing my job as if nothing was really happening to me. But it was pretty devastating.
The process that I was dealing with on a personal level was more devastating, I thought at that time than what was happening on the job because I was already detaching myself from it. During this time, I was also receiving 6.5 weeks of radiation daily. So, I would leave work and go to my treatments.

My contract ended on June 30, 2010, and there was no emotion. Mainly because again, I was still dealing with other personal challenges and that personal challenge was more important to me than me not having my job anymore.

Mr. Toxic
But, Darlene, the beautiful thing about this is even though one college said, “hey, see ya.” Another college said, “hey, come on over here and work for us.”

Darlene
Absolutely, absolutely, Mr. Toxic. A sister college within the same district, said we want you. We want you to come over. We can only offer you part-time work, but we need you over here. We know what you can do. We know what you have done and we know that the experience that you had at that other college was not fair, not right at any level and we want you to come.

Mr. Toxic
And so, Darlene, what happened after that because, I mean I know you were very excited to get that news like right after the other college said bye, so to speak.

Darlene
Well, I went ahead and talked to the Director there and that person was more than willing to have me there and there was, of course, someone from the previous college that tried to stop that and actually did say something negative about me toward one of the individuals that were going to have the say so in hiring me.

And once that happened there was another colleague friend of mine who advocated for me and said, “I’ll have to tell you the whole story because what they’re saying, you can’t believe anything that they’re saying.” And so the friend said, “if you need her, bring her in now.” And so that’s how I was able to get in and I worked that semester, actually in the students with disabilities office. In other words, I was a counselor for students with disabilities and did the same type of work but only part-time.

I loved the students, the employees loved me and it was a wonderful team that we had worked there. So it was really a relief to know that, you know, even though one group said, we don’t need you or you’re incompetent, these people saw how competent I really was and that’s all that mattered. I had more students -- working with over a thousand students in this program triple than the previous program.
**Mr. Toxic**
So while you were riding high off of that Darlene there was still this undercurrent negativity that was brewing which was your case.

**Darlene**
Yes, I had taken my case as far as I could through the union process, which was now going into arbitration and normally when the cases get to this point you think that, you know, everybody has your best interest at heart and that they’re going to advocate for you, of course, it turned out to be different.

**Mr. Toxic**
And so, Darlene, when was the first meeting of your case?

**Darlene**
The first meeting of my case was July 2010, so that was a month after I was given my notice that my contract would not be renewed. And so, I had already started working at this other place. So, there was going to be another meeting scheduled October 2010. However, on October 14th, I had another personal tragedy to occur and asked my lawyer for a postponement because I couldn’t do it at that time. So, the actual case for arbitration actually began December 15th, January 19th and January 28th of 2010 and 2011. It was three days of brutality!

**Mr. Toxic**
Darlene, what I remember is that the District -- you had the first day to present your case, which would have been the 15th and then the District had the 19th of January and the 28th of January to present their case. So it sounds like the burden of proof was more so on the District, rather than you. So how did all of this go? How did it affect you when you were sitting there and, you know, seeing all of these people come up against you?

**Darlene**
Well, I think the surprising thing was the fact that a lot of the people that came up against me were classified individuals (support staff). They were not certificated people (faculty). They were people that were part of the subordinate’s coalition and so those were the individuals that came up against me. So it was almost like this woman didn’t go anywhere. She was still there, but she was there in the form of her people that she use to represent as the union rep at the college.

So these were all her friends. There was a counselor, again this particular person was on my committee. She was the former chair of my committee that decided not to be chair right during the third evaluation. So this person decided to testify against me along with the rest of these friends of the subordinate employee.

**Mr. Toxic**
I remember you telling me, Darlene how contrite their testimonies were and how very well-rehearsed they were and you just sat there. You couldn’t say anything. You just looked. Couldn't you say anything against any of them?
Darlene
No, I couldn’t say anything against them at all. In fact, there was a situation on the first day, it was long, it started early in the morning and ended later in the evening. We broke for lunch, but then, you know, the things that were being said were just not true. And I had to sit there and listen and after listening or actually after going through the first day I decided the second and third day I wasn’t going to end up with my neck, being tight and in pain at the end of that day. I wasn’t going home feeling bad on the second and third day.

I definitely had a plan to get my body stronger. I started an exercise regimen. I planned a massage right after both of those meetings. So as soon as I left to get into my car I was driving to the massage parlor or the spa where I was going to be worked on physically. And so, it was the plan was very strategic in order to take care of me through this process.

Mr. Toxic
Darlene, I think your idea was brilliant in that you planned to take care of yourself physically during this time because it’s so important because if you don’t take care of your physical body, then the physical body breaks down, then the immune system breaks down, then end up sick. Most importantly, emotionally it’s not going to be good for you either.

Darlene
It was brutal the things that were said about me. I never thought I would hear such things as an adult. Things that were said about my work ethic that I never thought I would even experience. I knew sitting there because I had just worked in an environment with professionals, that these people didn’t know me and they obviously were saying things to uphold and get back at me because of what they thought I had done to their friend. Which I thought the whole experience was very elementary or something out of middle school, but these were grown women saying these things about me.

And none of them ever worked with me closely like that. And I have never been anything but nice to them, but they felt it was their responsibility to come and throw dirt or sand in my area because they just didn’t like me. They just didn’t like me. And then to hear what the Department Chair said about me as a counselor, which again he out of the whole four years only observed me one time, one time as a counselor, to hear the things that he was saying, like where was he getting this information from?

Mr. Toxic
Well, Darlene, he had to do something to cover himself because I don’t think he really expected you to take it this far. I really think he thought you were just going to drop it and that you weren’t going to fight back like you did and that you weren’t going to use all of the things that were available to you to try and get your job back and win this case. I just don’t think he thought you were that strong.

I don’t think he thought that you were going to fight back as hard as you did. And so he had to come strong. He had to come with lies because he did not know the truth. He didn’t know the truth about you and therefore, he had to make things up. But towards the end of the three days
Darlene, there was one person that did come to your side that was supposed to be on the opposing side and that was the Dean of Student Services. He’s the one that did say truthful things about you.

Darlene
Yes, Mr. Toxic, he said a few truthful things, but he was being very careful about what he said because he was on the opposing side.

Mr. Toxic
And, Darlene, your mentor for students for disabilities said some positive things about you at the hearing.

Darlene
Yes, the mentor who the district representative mentor said some very positive things and apparently it was just not enough to help me with my case.

The arbitrator took eight months to actually come up with a decision and I could tell during the eight months of waiting that he was working on a backdoor deal. He had to be, because when my lawyer told me at the end of this whole process, by this time it was in August 2011, that, you know, we had been waiting for all this time and the lawyer or the arbitrator obviously did not look at your evidence in your case at all and just made a rush to judgment. Well, it wasn’t rushed because he waited eight months to make this decision. Basically, the lawyer said the arbitrator wanted more work from the District, so he went with whatever the District wanted. That’s what he told me and my lawyer advised me to file a motion for summary judgment with a judge within 30 days and I could get the whole thing overturned.

Mr. Toxic
But, Darlene, by this time, you know, funds were running out and you didn’t have any other prospects of job opportunities. So you pretty much could not file anything because you didn’t have the money, even through a legal aid situation. You just didn’t have the money to go and file this motion of summary judgment.

Darlene
Yes, that’s right Mr. Toxic, I didn’t have the funds and what I see from all of this now is the fact that this is the way everything was supposed to be. I was supposed to be separated from this particular job just the way that I was separated from it emotionally.

Mr. Toxic
And so, Darlene, basically you just lost the case?

Darlene
I lost the case, Mr. Toxic, and I lost the filing actions with DFEH, which is Department of Fair Employment and Housing. I was too late to file with EEOC, which is the Federal branch of that. So I lost the case period, I just lost.
Question #2 – Mr. Toxic, what were the indicators that the setback of losing work became a challenge from January 2009 to August 2011?

Mr. Toxic
The first setback was not getting the support of the Sheriff’s Department after those individuals broke into my office from January to March of 2009. That was a setback. The setback of the Dean not showing up at my evaluation, the third year evaluation, that was a setback and then from that point of realizing that I was being set up to ultimately be dismissed, all of those were setbacks, but at the same time I was looking at the fact that I still needed to do my job. And still needed to follow the process of filing grievances and, therefore, I had to look at this as being a challenge that I was supposed to be involved in at the time. And the challenge was finally wrapping my brain around the fact of what was happening.

But, Darlene, you really didn’t accept the fact that you were losing your job or losing work until after that fourth evaluation and after you were tagged with that “needs improvement” at that evaluation. And so your mindset was, okay, let me just do whatever they tell me to do and if I do whatever they tell me to do then, you know, this will go away, kinda thing.

Darlene
Yeah, I did think that, but after the fourth evaluation occurred in November 2009 it became less important to me. Other things were going on in my life that started to make me think maybe I just need to step back from this because there’s something else going on here and I am just supposed to go with it. And I kept thinking that even though I may go through the process of losing my job I would still get it back. And that was my thought process throughout this whole thing. That I was not going to give up and that I was still going to plow through this process.

After that third evaluation, I filed a grievance, after the fourth evaluation I filed a grievance, so I fought back each time I filed. After the administrative evaluation was done, I decided not to do anything. I made a decision that I was not going to file another grievance, I was going to let it go because by that time it had already gone up to a process where it was going to be a legal issue. So, I decided not to file that third grievance because I had the opportunity to do the appeal before the board and talk to the board, but I chose not to do that either.

Mr. Toxic
But, Darlene, something happened after you moved from that old office to the office in April. After you had that evaluation your office moved and there was something very significant that you did when you got into that new office, do you remember that?

Darlene
I do remember that. I never unpacked. I never unpacked my stuff. I never decorated that new office. I kept whatever boxes I had in there, I kept them all packed.

Mr. Toxic
So, Darlene, you knew after that third evaluation that you probably were getting ready to get up out of there.
Darlene
You’re probably right, Mr. Toxic. I just never felt comfortable moving into that new building even though it was new but there was something else telling me not to unpack my personal things.

Mr. Toxic
Wow, Darlene, that’s powerful.

Question #3 – Mr. Toxic, what enabled you to manage what was going on from the period of January 2009 through August 2011?

Mr. Toxic
I think what enabled me to manage what was going on from that period was I had a focus on what my job responsibilities were. I was very clear about what I was hired to do at the campus, and that’s all I wanted to do. I was able to separate out a lot of the emotional issues that were going on and to stay focused on my responsibilities as the Coordinator Counselor for students with disabilities office.

Darlene
Even though it seemed like I did not have the support of a lot of people on that campus, I did have one or two friends on the campus that I could talk to and go to, and that knew me and knew my work ethic. I was also in school. I was in a Doctoral Program at the time and that was a good distraction to have, so when I left work I could always go to school and mingle with 17 - 20 other individuals in my class and I didn’t have to focus on what was going on at work and that helped with keeping me on an even keel.

Mr. Toxic
And so Darlene, while you were managing the physical components I was handling the emotional components and the deeper components, the spiritual components of that time.

Darlene
Yeah, Mr. Toxic, you did a lot of praying and a lot of consulting and calling on God during that time because I didn’t know what to do. I was just trying to make sure all of my ducks were in a row at the workplace and when the personal challenges started hitting I had to focus on personal challenges. So, there were times that I didn’t know exactly what to do during that time, because it was like I was in a world wind, and everything was hitting at the same time.

Mr. Toxic
But Darlene, that’s when our faith kicked, you know, we had to focus on what we were raised to know about God and how he helps us through these storms and through these trials and tribulations that we face. And certainly the job situation was a trial and tribulation which was totally out of our hands.
EXPLORING THE FEASIBILITY OF EMPLOYING EXTERNALIZATION

You were doing everything you could do physically to stay focused on helping students and you were doing everything you could to take care of your body. You were doing everything you could basically so that nothing else could be said about you negatively, but that wasn’t enough apparently. And so that’s why I had to go deeper and look at this whole process as something more spiritual that was happening and the reasons behind these things that were happening had a spiritual connotation to it.

Darlene
Mr. Toxic, I was probably working more on the natural side and you were working more on the spiritual side because I knew that I had to take care of myself because the only way I was going to get through all of these things that were happening was that I had to be healthy. I had to be physically strong enough to battle these things. If I felt physically strong enough to battle, then I knew that I could get through anything.

Mr. Toxic
Darlene, you also had some good friends.

Darlene
Yes, my girlfriends, I wouldn’t trade them for the world. They were right there with me throughout the whole process; even through my personal ordeal. They were there to support me even when I wanted to talk to someone because at some point the EAP Counselor sessions ran out because I wasn’t attached to that job anymore, so I used girlfriends as a way to communicate emotions that I had and thoughts that I was having about the job situation. So a good network of support was very, very strong during this time and it was necessary to have.

Mr. Toxic
Darlene, we couldn’t count on anyone at the workplace. There were one or two people that we could count on, but that was it. When you went to work at the other facility, at the other college within the district, you had more of a network there that you could depend on in terms of work, because they knew and saw what you were doing.

Darlene
Yes, that’s correct and they were very, very supportive through the whole process. Even though they had no clue what went on prior to me working with them, but when I started working with them and up to the end of the time, even past that time, the individuals there were very supportive, calling me, emailing me to find out how I was doing and how things were going on in my life. They were very special people.

Mr. Toxic
Well, Darlene, I felt it was necessary to turn our attention to God and to reading the scriptures a lot more. After all, you did have more time to do these things and so it was important to get on track spiritually, even though you were already a Bible believing and faith, believing person, you really needed to go a little bit deeper in order to sustain yourself spiritually in order to get through these difficult times that you were facing.
And so it was very important to make sure that you attended Bible Study and the Sunday School, as well as going to church regularly because you really needed an outlet there to connect with God to be able to understand and to get strength from a more spiritual base in order to get through these difficulties.

**Darlene**

So if I were to look back, Mr. Toxic, through January to around July of 2009, most of that time I was still seeing a therapist and talking with someone and that kind of helped me get through a lot of that difficult work period that I was facing. And then from June 2010 on I was separated from the work and so I could not have those things as a resource and so that’s when I used the resources that I had to talk to friends, talk to family and so forth and basically focus on family because that’s what I had at that time to help support me through the process.

I know while I was waiting for the decision to come through from the arbitrator, I ended up going on a family reunion trip and that summer, I believe it was that June or July, and that helped push me over the hump as well because seeing family that I hadn’t seen in a while and connecting with them, talking with them, reminiscing with them was very helpful. And they even wanted me to consider looking for employment in their area. And so the area, of course, was Atlanta, Georgia, and so I had relatives there that were willing to support me there and all I had to do was make a decision to say, okay, this is where I’m going to go and I’m going to still seek employment. Again, they had opened arms, willing to help me at that time, which helped me get through and helped me manage what was going on during this time.

As I stated before, going through this process, as you mentioned Mr. Toxic, that I focus more on the physical and so I was very calculating in starting an exercise regimen. And so my family was already going out weekly to play tennis and so I decided that I would join them. And since I had a lot of time available, I would also go with my niece on the days that she had tennis practice in midweek. I would go with her even just to pick up and throw the balls for her. I was still getting some sort of exercise. I was outside getting the Vitamin D, and so I again made very calculated decisions that I was going to take care of my physical body.

At the time, I still had a membership at a gym so I would make sure that I would work out, at least, two or three days a week at the gym, plus play tennis on the weekends with my family. So they’re very calculated activities that I participated in and I did that for least six months. The first six months of the 2011 year was spent strengthening my body and strengthening my mind during this waiting period. I think waiting for a decision was probably just as difficult as going through the arbitration process.

**Mr. Toxic**

And Darlene, that’s why I focused more on your spirituality and getting more spiritual because once you’ve exhausted your physical body. It’s the spiritual man, that’s going to carry you through the whole ordeal. And so that was my focus. That’s the way I chose to handle this ordeal.
I think what enabled me to manage everything was my faith. I never stopped going to church. I never stopped praying because it was a lot going on at that time. It felt like being in a storm, a huge storm and this was like a category five storm. Tornadoes and all those kinds of things embedded in that storm and it was one thing after another and after another and after another and the only thing I have when things like that are happening to me is to look at a divine intervention that is carrying me through the process here or whatever the process is. In this particular case, it had to be a divine intervention, God was carrying me through the process.

**Darlene**
Yeah, Mr. Toxic, it was God carrying the process, but it was really hard sometimes trying to find him because so much was happening. And then I didn’t understand why it was happening and didn’t get -- I know for me, I couldn’t understand why everything was happening right now at this time in my life. I was still in school for God’s sake! I was still in school. I was trying to finish school. It was difficult many times trying to focus on school. That same year of 2009, there was actually an incident that occurred at school, so that was thrown into the pot too, where, you know, I was being discriminated against by a professor in my doctoral program. So then I had to go through a process to get that issue resolved. So that happened in April as well.

**Mr. Toxic**
You’re evaluated that third evaluation in April, you moved in April, and you were confronted by this professor in April. It was you and two other students in the class, two other African-American students. This was like the last class that you needed before you took the Comprehensive exams. And so there was a process there. You had to get the Ombudsman and the Assistant Dean involved. One more issue to add to the other issues you were already experiencing. So, basically you had drama at work, you had drama at home, and now drama at school. The drama was all around at that time.

**Darlene**
Yes. Yes. Yes.

**Mr. Toxic**
Well, that’s one reason Darlene, I have to say that God was in control of all of it and God was preparing you, preparing your character, you know, sometimes we don’t want to go through the fire, but we have to go through the fire in order to come out pure gold. God was taking you to another level in life and allowing these events to occur in your life to let you know that he is still in control of your life.

**Darlene**
I understand, Mr. Toxic, this whole process with God because of reading about other individuals in the Bible and the things that they went through in order to get to where they’re going, but it was really hard. It was just very hard to wrap my brain around all of it. And some of it I didn’t even wrap my brain around. I couldn’t process it. I just had to go through it and…
Mr. Toxic
Darlene, I know it was hard but you got through it. You were going to get through it. You were not going to be destroyed as a result of it. If you were going to be destroyed, it would have come from your own personal tragedy that you had during this time. But it didn’t happen and it had to happen for a reason and it had to happen in order for you to be able to help others and so it was a juggling act in managing it, but you wouldn’t have to juggle so much if you would’ve released it and given it to God in the first place. And so that’s what we have to learn when these things come about. It’s not for you to juggle. It’s for you to give to Him so that He can manage it for you.

Darlene, one of the ways that I managed going through this process was focusing on something else which was job hunting. You know in 2010 after you weren’t able to work anymore, you had to look for jobs and so that was the main purpose. That was the goal to look for employment. You were already on unemployment and it was meeting a need. The process was to take you through the interviews at the various jobs that you were applying to and to get you prepared for that. To get your mind off of some of what you were dealing with.

Question #4: Mr. Toxic, how did you demonstrate your life’s activities were more important from the period of January 2009 through August 2011?

Mr. Toxic
I demonstrated that my life’s activities were more important by just focusing on the life’s activities because it was certainly more than work going on at the time. I had family issues that were popping up or had popped up eventually and in terms of the period between January to March of 2009 when the breaking in the offices was going on and the poor evaluations and so forth. The only thing I could focus on were the students. The students were the most important thing. It was important to make sure they were served. I was the only one that could actually provide the services for them.

Darlene
And I helped, Mr. Toxic, by making sure that things were running smoothly in the office. We had an office assistant that worked with the program. He was a graduate student and once he had been trained to do a lot of the office assistant types of work and collecting data for the program and making sure the data was in the system and making sure students were being served and assisted with their accommodations, those were the things that kept the office afloat because that’s what made students happy.

And so making sure that the office ran smoothly was a life activity that needed to continue to be focused on while these other plots and conspiracies were going on all around the program.

Mr. Toxic
You mentioned before Darlene that the issue of taking care of self-was extremely important and the activities that surrounded taking care of self-was an important life activity.
Darlene
Absolutely, I made sure, Mr. Toxic, that I had breakfast every day. I made sure that I took my lunch break. I made sure that I have the proper dinner to eat every night and so it was very important for me to make sure that I was eating healthy and to make sure I had fuel in my body during these stressful times.

Mr. Toxic, it was also important for me to reach out to girlfriends. It was very important to continue to have conversations with them, to do things with them such as go shopping every now and then or to go out to dinner or to go to the movies and to just do entertainment like activities that had nothing to do with work at the time.

Mr. Toxic
And as stated earlier, Darlene, the previous activity of making sure that your spiritual foundation was taken care by attending church regularly, attending Bible Studies and even doing outreach types of activities within the church. Making sure the educational scholarship fund program was on target to highlight students that were completing their education. Even when the church had activities of going to luncheons, because there was an annual luncheon that the women would go to and that was an important activity to make sure that you were connecting well with individuals in the church and to make sure that you were being supported by these individuals as well.

Darlene
Mr. Toxic, it was also important for me to spend quality time with family to make sure that I spent time with my nieces and their activities and get involved in their activities. One of my nieces graduated from high school during this time and I had another one to move from elementary school to middle school and both of them were involved in playing tennis and participating in tennis tournaments and so forth. And so it was important to be able to support them. These were all part of my life and so whatever was going on at work it had to stay separated.

I had to continue or you taught me, Mr. Toxic, to make sure that it was compartmentalized and make sure that it was separated and whatever was going on at work was going to continue to go on. However, I needed the whole Darlene, that was needed to participate with the family and to be in the here and now with them as opposed to being concerned and worrying about what was happening with my job, which I could not control.

Mr. Toxic
Yes Darlene, because that was so important for you to do because it not only helped them, but it also helped you and strengthen you. It gave you inner strength in order for you to make yourself available to these individuals and because it helped give you strength through this process.

Darlene
And so Mr. Toxic, when it was time for the young people to go bowling or to roller skate I was there. I participated. I was involved in the activities and because life could not stop because these particular areas of my life, the work part of my life was changing and was going through a transition. And so even though that was transitioning, I had to be stable in these other activities.
Mr. Toxic
Each year, Darlene, it was important for you and another one of your girlfriends to take a group of young ladies to a summer blockbuster movie every year and it was extremely important to be able to continue to do that even during this transition period that you were in. And so the girls started planning early as to what color everyone was going to wear that particular year and decided on the movie that they were going to see and the date was set. You would go to the El Capitan Theatre with these young ladies and participate in not only the seeing of the movie but then have lunch or a light dinner after the movie. And so this really gave the young ladies a lot of confidence in their lives and this was an event that they looked forward to participating in each year. So it was very important to make sure that they were able to do that during this transition.

Darlene
Absolutely and that was like the highlight period that I had as well. I made sure that the girls participated in that particular activity. I believe, right after we returned from the family reunion we went. This was something that the girls were looking forward to doing. So, it was a great time to be able to do that for them.

Question #5 - Mr. Toxic, what were the indicators that you were growing during the work loss process from the period of January 2009 through August 2011?

Mr. Toxic
Growth is something that you don’t really realize is happening to you during the test or the trial. It seems to occur after a person has had time not only to heal but time to reflect back on the experience or coming out of the storms that they have been through. And so for me, I believe that I’ve had time to look back and wonder basically how I got over. I keep calling it an awful time in my life, but it’s a time that had to happen. It was something that was necessary for me to go through for a reason. And having reflected back on the experience, it's mind boggling as to how I got through the process without falling totally apart.

Darlene
Well Mr. Toxic, it didn’t feel like I was growing during that time. It just felt like a lot of heat and hurt. It was just one incident after the other. A lot of hurt. A lot of disappointment and none of that felt like growth at the time.

Mr. Toxic
I realize that, Darlene, but the fact that you were not hospitalized as a result of any of it is growth in itself. There’re so many people could not have withstood that type of pressure and thrived. They would have cracked on the surface and would have been hospitalized. And so looking back you know that there is growth, but as I stated in the beginning, you can’t call it growth while you’re going through it.

Darlene
One example of growth could be I guess how decisions were made. They were very strategic and calculated decisions. And the example of focusing on self-care rather than work-care so to speak
had to be a period of growth within me. I believed I recognized the fact that I needed to build up
strength within my physical body in order to withstand the mental anguish that I was about to
undergo. So maybe that showed a sense of growth.

**Mr. Toxic**
That’s correct, Darlene, but also when you made the decision to let the issues that you were
dealing with on your job, let it go and separate from it. There was a time you were holding on
and fighting back and holding on again because you wanted your job back, but when you made
the decision to let it go, that was a period of growth for you. I think you understood or, at least,
you were beginning to understand that this situation was out of your control.

And I don’t mean that it was in the control of your lawyers or it was in the control of the
arbitration process. I mean that you were understanding that this was a higher power issue that
you needed to release and let the higher power deal with it. Let God deal with it.

**Darlene**
You’re right, Mr. Toxic. Even when I made the decision at the November evaluation to just go
with it, not say anything and not fight back. It really felt like a Jesus moment at that point. It
was, you know, when he was standing before Pontius Pilate and they were making accusations
about everything that he did not do, I felt like I was in that moment in time and I just didn’t say
anything.

And, you know, people at the evaluation meeting were asking me questions: “Do you
understand”? And I responded “yes”. Then they would ask: “But, do you have anything to say?
Do you have a rebuttal? Do you have any questions?” I would respond with “no”. I literally
had nothing to say. I was done. I had exhausted myself of this issue.

**Mr. Toxic**
Darlene, I felt that I was growing spiritually at this time. I did feel a closer relationship with God
and the fact that I was getting closer to him or had gotten closer to him through this process
because it was just so much hurt around. So much hurt in every aspect of my life that I just
needed to be silent a lot of times and just to hear the voice of God and to just not, even at some
point not do anything. Because that’s what gave me peace. I learned how to receive peace
through this process, which I think is also a good example of growth.

**Darlene**
Mr. Toxic, the fact that you’re going out on interviews and keeping your nose to the grind with
the job search piece was a way to stay focused and a way to keep yourself moving forward and
you’ve got a lot of interviews. You’ve got a lot of good looks at some jobs and went to the
second round in a couple of jobs and therefore, you were building up confidence again your
work ethics and so that was a growth period. Because the process of arbitration, the process of
accusations, the process of, you know, the information being put in your personnel file and
listening to lies that were told to you during this time certainly started chipping away at your
confidence level.
But growing through the process, you were able to rise above that and actually look beyond positions that dealt with only counseling. You actually looked in the area of administration, which is what your Doctoral Degree is about, so you started looking as if you were already working in those types of positions and interviewing in those types of positions. And so I think I think that was very helpful for you to do during this time because it beefed up the awareness of yourself, but it beefed up your ability to interview. You also saw that you could withstand any type of interview.

**Mr. Toxic**

I certainly did withstand those interviews because I ended up going from three to four people in an interview to 16 people sitting at the table. And so it was a growing period for me even through sharpening my skills to be able to have a conversation with people and to try and sell myself in terms of the particular position that I was applying to.

**Question #6 – Mr. Toxic, what positive changes were made in your life from the period of January 2009 through August 2011?**

**Mr. Toxic**

I did a lot of positive self-talk, a lot of soul searching, a lot of reflection and I decided that I was not going to let this process that I was in get me down. Because I knew what the truth was. I focused on the truth. I knew that I was sent to this college to help students and the beautiful thing that I realized through this transition was in an interview when I went back and looked at the educational master plan that I wrote for the program and looked at all of the goals and objectives that were written in that educational master plan, I saw that I was able to check off everything by the time I left. In the four years, I had completed everything that I had dreamed about completing that was written in that document. And so that was definitely a booster in my self-awareness and self-esteem, especially in the area of accomplishments.

**Darlene**

That is so true, Mr. Toxic. You discovered that actually preparing for an interview and an interview that you just knew that you -- and I think you became a finalist in this interview and you discovered the fact that when you went back and looked at this educational master plan for the college in your area, you completed everything and that changed your focus of -- well what other skills are out there that I have not tapped into.

And so having accomplished everything that you could do in this field or this area, what else were you capable of doing? Because in the past, you’ve always worked two jobs. You’ve always worked two jobs and in working two jobs you were either in education or in mental health or you were in management or teaching. You were always doing two things at one time.

And so I think this started you to thinking that maybe there were some other things that you could be doing that you hadn’t tapped into because you were stuck doing this one particular job, even though it had a variety of assignments attached to it, you were stuck doing this one particular thing for these four years. And you did them well, but it was time to reflect and think about other things that you were capable of doing.
Darlene
And so, Mr. Toxic, I began to change my attitude. My attitude was one of being very – angry. What I think underneath the anger were disappointment and hurt. I began to change my way of thinking, you know, the question that kept coming up was: How can they do this to me? What did I do to them? And so, I stopped asking those questions because they were keeping me stuck. Stuck in an emotional rut that I didn’t want to continue to be in.

Mr. Toxic
Darlene, it’s best that we didn’t focus on those questions because being stuck meant emotions would fester and stress would take its toll eventually on your health and we didn’t want that vicious cycle to turn into something else down the road. And so you were already dealing with a personal health challenge and so you needed to stay positive and needed to stay stress-free. And so I think you did all the things right in order to make sure that you stayed stress-free and stayed focused on the positive things that were happening in your life. So that was a conscious decision that you made.

Darlene
And you’re right, Mr. Toxic, and so when I started looking at different jobs to focus on, I would not focus on anything dealing with counseling and I wouldn’t focus on anything dealing with students with disabilities. Simply because those jobs were triggering emotions and feelings about the past jobs that I had.

Mr. Toxic
And so, Darlene, I found myself praying a whole lot more, just being grateful and having an attitude of gratitude most of the time, especially in the prayer, sometimes I wouldn’t ask God for anything. I would just have a prayer of thanks and gratitude for life, gratitude for just still being here in existence and not fully understanding why I was still here, but make whatever I was going through something that was going to help someone else down the road.

I think, Darlene, you felt that you were feeling a little bit more independent as opposed to dependent. In other words, you were feeling very confident and independent in a lot of the decisions that you were making about yourself, about your career and that was a good thing and that was also something very positive that you were doing.

I also felt, Darlene, that I was being a little bit more aware of time and conscious about time and making sure every day counted. The plan was to do something every day, if it wasn’t job hunting every day, if wasn’t going on an interview scheduling that week, but you were sitting at the computer, you were looking for other jobs -- and we’re talking specifically from the period of 2010 to 2011.

During this time period when you had the part-time job, but you were also still looking for full-time work at the time, even though you were waiting on the decision for your case. You made a conscious effort even though you were still in somewhat of a holding pattern. The plan was to move forward. You were actually continuing to move forward with your life. So you felt like you were in control of that part of your life.
Darlene
Well, maybe not so much in control Mr. Toxic but taking control of that part of my life.

Mr. Toxic
Significant positive changes and focusing on family, especially family that was going through illnesses that needed you to be there to assist and to advocate where they could not advocate for themselves. This was a huge positive change that you made when you decided to move your father in and take care of him, that was a positive change as well.

To relinquish something that you worked so hard for, which was your condo and you wanted to keep it, but because of the way the market was and you were upside down anyway with the property. So you ended up taking a loss and just relinquish it, and letting it go so that you could move into a rental property so that you and father could live together. You took care of him, not knowing how much longer he was going to be here on earth.

And so that was very positive and also during this time you stayed focused on school. You focused on your comprehensive exams that were coming up around the same time of that November evaluation. In fact, they were all due around the same time: moving, comps, and evaluation. I’m sure, Darlene, this was very stressful but we held it together. I helped you keep focus on school work and focused on passing the comps.

Darlene
But one thing I do remember, which was not so positive, but it was positive, I contacted a person that was supposed to be my mentor and actually talked to that person about what should I do with either passing the comps or taking this comp class or waiting until the next semester to do this comp class. And this person told me that I should just drop out period because I had way too much going on.

Mr. Toxic
Well, Darlene, I’m glad you didn’t listen to that person because a colleague stated, “Well Darlene, I don’t think that’s the best advice this mentor is giving you. Why don’t you talk to the faculty that’s teaching the course and see what that person says?”

Darlene
And, Mr. Toxic, I did listen to my friend and colleague and talked to the faculty and just laid everything out to the faculty. I just asked his honest opinion about what should I do right now? Should I go ahead and take the comprehensive exams and focus on the comprehensive exam, which was really a 50-page paper that I had to write over a problem that I was solving and had solved within the past two years and use all the school work information, class work information in this paper.

And so this faculty member listened to everything and said, “Darlene, life is going to continue to happen. Whether it’s this semester or its next semester or even next year, but your best time is right now, because you have your cohort members with you. They’ve known you the last two
years and so they’re there and going to be there to support you. And so I would not advise that you drop this class right now. You are this close to finishing.”

**Mr. Toxic**  
And Darlene, I supported the decision the faculty person told you because I felt you had come a long way, you had been through a lot already and you were really at the tip of the iceberg. You had really gone through a lot of fire, but you were on the other side of the fire. I mean you were almost coming out of the fire and so this was just one more thing that you needed to get through and you could do it and we were talking about just only a few months. And so the decision I encouraged you to make was to stick with the class and that was, I believe the most positive decision, because the outcome was positive as well.

**Darlene**  
You’re right, Mr. Toxic, because I did pass the comprehensive exam with no modifications at all and it was really a very easy process for me to go through after everything was written. It was just making the decision… And this is one thing I’m looking at too that is very positive, the fact that my decision-making skills have gotten a whole lot better. I’m making decisions about myself and about things that are happening in my life and I feel very confident about a lot of the decisions that I’ve made.

**Mr. Toxic**  
Something else, Darlene, that I think is very positive here is the fact that you’ve learned how to basically say it like you mean it. If you ask me something, you are going to tell you the truth and it’s going to be in a matter of fact way. You were not like that on your job and with the colleagues that you worked. But I believe this experience has shown you that you don’t have to always be silent and non-verbal when it comes to things. Think back on your responses to some of the things that were said to you and a lot of times you didn’t say anything. You didn’t speak up for yourself and now you know for a fact that if you had a do-over it would definitely be done differently.

And so I just learned from you, “if you don’t want me to give you the truth, don’t ask me.” And so that’s one of the things, I don’t know, it may not be positive for some people because a lot of people wear their feelings on their sleeves but you are not responsible for their feelings. And that’s just the attitude now having gone through this whole process. Your skin is a little thicker and I would say that your words for some people may seem harsh.

**Darlene**  
Yeah, Mr. Toxic, I think I’ve been accused of that a little bit more these days that, you should tone it down, change it a little bit, be a little bit more politically correct, middle of the road kind of thing and I’m just not buying it. And I agree with you that I’ve or we’ve been through too much to be that type of person. Apparently going through these transitions, these life events for a reason doesn’t make you a weak link or a weak minded person, but it strengthens you and strengthens your attitude about things. It makes me want to be a voice for individuals that don’t have one. So I think, Mr. Toxic, that’s a huge positive because you’re not being silent and
you’re not being nosey a middle of the road type of person. You are either on one side or on the other side and that’s what’s important.

**Mr. Toxic**
Another positive change was to separate me or the self of Darlene from her work duties or her position that she was working at the time. In other words, Darlene and the work that she does are two separate entities. When I discovered that I was no longer able to work in the position that I was hired to work in, it became very difficult for me to separate emotionally. But I learned that the position does not define who Darlene is or basically who I am. Another positive change was to focus on the people that were supporting me because these people were real. They were real friends. They were a real family and were being real people. Individuals that I thought had my back did not and so had to stop focusing on those individuals because they were creating negative energy.

Finally, when things seemed like they were out of control in my life, I learned to let it go…surrender it to a higher power. This is God for me. I just let Him deal with the situation. As long as I know that He is guiding and dealing with the situation, then I can rest in the situation.

This concludes the Work Category Mr. Toxic section.
Mr. RIP- Loss of Two Family Members Dialogue

**Question 1: Mr. RIP what is your memory of family for the period of May 2009 through July 2011?**

**Mr. RIP**
What I remember, Darlene is that there were a number of activities that go on in the month of May. You had Mother’s Day. You had a couple of family members’ birthdays. You had a cousin whose birthday is on the 15th and then your youngest niece who celebrated a birthday on the 20th of that month. And so there were a lot of family activities that were buzzing around at this time and so there was a lot of preparation to prepare for the youngest niece’s birthday.

**Darlene**
You’re right, Mr. RIP, and one of her favorite places for my niece to celebrate her birthday was Goofy’s Kitchen; Goofy’s Kitchen at Disney – I believe it’s Disneyland – but it’s the Disney Walk and so that’s one of the places that she loved to go and celebrate her birthday with the family.

**Mr. RIP**
I remember Darlene, that you had a number of activities at work going on at this time as well. You were preparing for a state visit where individuals were coming to inspect your program and so you had to have reports ready for that. And so, that visit was expected to occur on the 20th of May. You also had classes that you were still going to in your doctoral program.

**Darlene**
Absolutely, Mr. RIP. There were a number of activities going on for me personally at that time with the state visit approaching and needing to make a good impression on the individuals that were coming to inspect our program. So that was, indeed, important. I also had interviews set up, too, after two years of trying to push the administration to hire a learning disability specialist, we were actually in the process of getting ready to interview that individual. So, the day before the visit were the interviews and then the very next day was the state inspection. So there were a lot of things that needed to get done during that third week of May.

**Mr. RIP**
I remember Darlene, because of all of your activities that you were probably not going to be able to join the celebrations of your niece because of school because you had a class that evening.

**Darlene**
That’s correct. I think the birthday was on a Wednesday and so, yeah, that was class time.

**Mr. RIP**
So on the day of the 20th, Darlene, I remember you left work feeling pumped up because the inspection went well. The individuals gave you great suggestions to help improve your program. They were just very impressed with everything that you were doing in the short period of time that you had been the coordinator of the program. And they were a little disappointed because
you didn’t have any administrators to come and participate in this process. They came in said, “Hello,” and they left. They weren’t really interested in the fact that state representatives had traveled afar to come to their campus.

**Darlene**
That was disappointing… yes, Mr. RIP, but it did not surprise me because basically that’s how the administration was. They were not very supportive of our program. But I did leave in an upbeat manner after the visit concluded, because I had chosen a couple of candidates the day before who were going to be sent up to the president for his review, in order to select someone to become the new learning disability specialist. Then I was thinking about the fact that the program, the state, placed their stamp of approval on our program and services we were providing. And so, as usual, I’m driving down the freeway on my way to class and I get this phone call and it happens to be my goddaughter. Now normally on my way from work to class I call my parents to check in with them to see how things are going with them and how their day was going. But instead, this call came in from my goddaughter and we talked. And the conversation ended up going on until I arrived at school.

**Mr. RIP**
Now, I thought that was unusual because that had never happened before. But you needed to talk to your goddaughter and so at that point, you decided that, well, you’ll just call your parents once you got home that evening from school and you’d check in with them. You were going to tell them about all your good news from the past two days.

**Darlene**
And so, Mr. RIP, once I got in that evening and got settled, actually just putting my bags down, I was getting ready to pick up the phone but the phone rang and it was my niece on the phone. And her words were, “Auntie, hurry and come to grandma and papa’s house. We think something is wrong with grandma.” And so, I proceeded to ask her questions that she obviously could not answer and so I said, “Okay, never mind. I’m on my way.”

**Mr. RIP**
Now Darlene, where your parents lived was a short distance for you to travel. What, five minutes or so?

**Darlene**
Yeah, maybe less than that because we lived in close proximity; especially with me driving fast.

**Mr. RIP**
So what I remember, Darlene, about that evening you arrived and there was an ambulance, fire trucks, all lights blazing right in front of your parent’s place. And there were quite a few people standing outside of their place as well. And so, you didn’t know what to make of any of it because you still didn’t get it. You still didn’t understand what was going on. And then your sister was crying and my brother-in-law and by this time I knew something serious and terrible was wrong. Your dad was there as well and he had been crying as well.
Darlene
Yeah, Mr. RIP. He was the one that told me that my mom had passed and she was inside the house. At that point, I lost it and somehow just started asking questions of the fireman at that point. You know, “what happened? What’s going on?” And then he responded in a very matter-of-fact way. Basically, my family members were trying to get me to calm down because, you know, I just didn’t understand how this could happen. And so, they tried to explain things to me and at that point I only recall walking away from everybody and just walking, crying, balling down the street. I had no clue where I was going, but I was getting away from all of that. And so, I walked down the street, just balling. At one point I saw a man that was passing me and he saw that I was, extremely upset. And all I could think of in my mind was, “Now is not the time to try and take advantage of me.” I just thought, “I am liable to do anything at this point. Just stay away from me and leave me alone and let me continue to walk and walk this off.”

Mr. RIP
It’s pretty amazing, Darlene, that you actually ended up at an old friend’s house that you grew up with that went to your former church. It was a wife and husband and the husband was a minister - who knew your dad and mom and they were there to console you.

Darlene
Yeah, I went from being there with them to calling everybody on my phone. I don’t know how I still had my phone with me going through all of this shock. But I just started calling everybody from my contacts saying, “My mother just died. My mother just died. My mother just died.”

Mr. RIP
And so, Darlene after you finally… we pulled ourselves together, then to wrap our brain around what was going on, you had to make that walk back up that hill to face reality and deal with decisions that were going to be made at that time.

Darlene
Yeah, but I still couldn’t go in the house. I was not ready to go in the house at all. I remember sitting in someone’s car and I was talking to my cousin and a friend and both of them were talking to me. They were crying and upset and both of them were telling me that, you know, I needed to go in the house and see my mom.

Mr. RIP
Yeah Darlene, and the conversation kind of went like you…she wasn’t going to be here for your graduation. She wasn’t going to be here for any future things that you did and any conversations that you were going to have with her in the future.

Darlene
Right, and then people, you know, then they started saying things like, “Well, she’s going to be with you in spirit.” You know that kind of stuff really doesn’t help at the time. I get what they’re saying, but it just doesn’t help the hurt of loss at that time when you’re trying to figure out how all this happened and then trying to deal with the fact that, you know, she really is gone.
So, at this point, I’m sitting in the car thinking about how we came to this point which in 2007 was when mom actually had three heart attacks within a week’s time. So she had a very severe blockage in her heart. Only one chamber was actually functioning and the only treatment process for her was to have a defibrillator placed in her heart three months after the heart attacks occurred, which would have been December of 2007. And she was placed on medications to make sure that her blood stayed thin and that she didn’t get clots or anything like that. But she was living off of her own crash cart so-to-speak. And there were many different problems with the defibrillator not being able to calibrate well and so she had quite a few hospital stays to recalibrate the defibrillator going off at inopportune times. And on top of that, she wasn’t able to drive anymore because of that, because we never knew when that defibrillator was going to go off. And the purpose of the defibrillator going off in the first place was to revive the heartbeat back because the heart had stopped. So, if it stopped and there was no defibrillator to make it start, then the person died. And so, we saw that happen three months after it was put in December 1st of that year, 2007. We actually…mom had her first episode of her heart stopping. And so, it really prolonged her life for 18 months. So, we were at the 18-month fact, but the thing we couldn’t figure out was, okay the defibrillator was working but there was no heartbeat. This was so confusing!

Mr. RIP
What I also remember you finding out later on, Darlene was the fact that your mom did not…she chose to stay back and not go to the celebration at the Disney Walk at Goofy’s Kitchen with the rest of the family. She was all geared up to go. She had been cleaning the house all day and ironing your dad’s clothing, getting him ready to go and, you know, just cleaning up everything and tidying up everything, you know, really busy. She felt real good and so she was looking forward to going, but then at the last minute, she decided not to go because then she felt tired. And so, mom decided to stay back and watch one of her favorite programs which are, the Trinity Broadcasting Network or TBN. And she decided to sit there and watch her programs and let the rest of the family go ahead and celebrate the niece’s birthday that day. And then when your dad came back from the celebration, he saw your mom sitting in a position looking away from the television and she didn’t look like she was breathing. And so, he immediately called your brother-in-law back and then he did CPR because as well as calling the ambulance. And so, by the time paramedics came, they tried to revive her, but she was already gone.

Darlene
And so, the funeral home arrived at the house and they were ready to take my mom to the funeral home. My cousin said, “You better go on in there and look at her before they take her.” And that’s when I made the decision to go into the house. My sister was already there on the floor with her and I just looked at her and it looked like she was sleeping. And then I walked out of the house crying and went back and got into the car.

Mr. RIP
What I also remember the next day was a very difficult time for you, your dad and sister, where you all had to get together and begin planning the services for your mom.
Darlene
It was also difficult because we had to notify her sisters and brother that were still alive… and cousins to let them know that she had passed. Although mom died on the 20th of May, we didn’t bury her until June 1 because we wanted to allow enough time for relatives who were coming from out of town to be able to get…to make arrangements for the services and to get their tickets in time or in enough time to be able to come to the service.

Mr. RIP
Also, there were some scheduling concerns too with the bishop who was going to do the eulogy at the service.

Darlene
Yeah, we had to make sure that we got on his calendar so he could fit our service in with the rest of his schedule.

Mr. RIP
And so, I remember that as we approached June 1st, relatives started coming in, Darlene, and you know people were coming in by the droves and people were calling and so forth. You know giving their support to you, especially your classmates and there were a couple people at work that also gave their support. In fact, the counseling department raised money with a card and gave it to you, which was pretty surprising. These were people that claimed they didn't like you, but everybody signed the card and contributed. You got four hundred dollars from them, and so that was very interesting. You know, things weren’t going in your favor on your job, you know things were going sideways because you were right in the middle of that stuff too. But yet these people came through with this envelope and you looked at the card ….. everybody's name was on the card, you know original signatures, not just one person signing everybody's name. So, that was very interesting too, Darlene, and I know you very blew away by it. I know I was blown away by it because that was unexpected. These were the same people that spoke against you further down the road.

Darlene
You're absolutely right, Mr. RIP, I totally almost forgot about that. That was mind boggling and then, yeah, when I tried to introduce that stuff in my arbitration case, it did not work, because they wouldn't let me talk about it. So yeah, that was very interesting to come up with all this money, you know, after my mom died and give it to me in a sympathy card. They were pretending like they really cared.

Mr. RIP
And so what I remember too, you all had a wonderful wake service for your mom in case individuals were not going to be able to make it to the main service. You had like a Friday night kind of open mike type of service, where people that knew her in the community if they wanted
to say something about your mom, they could say something about her. Your mom was only 74 years old and she was a woman that worked up until basically the day that she got sick. She was an entrepreneur, a paralegal, had her own businesses throughout her life. You know just a hard working woman with wonderful values in terms of helping people. She had a heart of gold in terms of giving and so forth, and so everybody said wonderful things about her and had felt her presence in their lives, which says a lot about the type of person your mom was.

**Darlene**

Absolutely, Mr. RIP, and she was very hard on her children growing up as well, and didn't take any mess from anybody, and usually said what she meant and meant what she said, and many times demanded respect, you know when it wasn't given. She was outspoken on things and sometimes, you know that didn't go in her favor, but she was her own woman. She was her own boss and did things her way. The funeral was a beautiful service. It was an upbeat celebration. There was no moaning. Well, people were crying, but it was a celebratory type of service. The music was upbeat and it was actually a praise and worship service, but that's the type of life she lived, that's the type of person she was, and so I think we had a wonderful celebration for her.

**Mr. RIP**

Now Darlene, your dad really did, you know, do well with the service. I mean he actually sang one of her favorite songs at the service, and he was just magnificent and he really upheld himself during this whole period.

**Darlene**

Well, they had been married for 54 years and so they got married young, and you know they knew each other, and they were best friends and so forth, so this was his life partner that was gone.

**Mr. RIP**

And so Darlene, after the celebration and everyone left and went home, then it was time to deal with the bereavement and to put things in order. It was also a time to think and reflect on a wonderful life that had been lived.

**Darlene**

The only thing about that Mr. RIP was that we didn't have very long to do that because my dad had been complaining about breathing and having sinus headaches. So my sister and I took turns going with him to the ear, throat and nose doctor. He had been taking medicine for that, and having exams and so forth. Eventually, the doctor saw on one of his scans that there were some polyps in the nasal passages.
Mr. RIP
Now I remember you saying at one point that, your dad's brother, had that same type of procedure done, and apparently it was something that was genetic and ran in the family. So that particular brother, who was older than your dad, went through that procedure pretty well, and so I guess the two of them were talking, you know when it was time for him to actually have that procedure done.

Darlene
Absolutely Mr. RIP, and so the doctor and my dad decided to take these polyps out of his nasal passages. And so, his surgery was scheduled about six weeks after we buried my mom, on July 24th.

Mr. RIP
These polyps had impeded your dad's ability to even breathe and to distinguish certain types of smells.

Darlene
Yes. I didn't realize that until we got closer to the time for him to have that surgery. He had said there were odors that he wasn't able to distinguish or certain things he wasn't able to smell.

Mr. RIP
So I remember, you were saying it was a Saturday morning when you all went to see your dad and actually he had come out of recovery. He was doing fine and just kind of slept off the anesthesia the night before. The family came in the hospital room and the first thing he said was what?

Darlene
He said, "What type of cologne are you wearing?" and I said, "Well, you can smell that now?" and he said, "Yes, I can smell. I can smell the cologne. I can smell my food. I can smell all those things." And so, we all got exciting and were celebrating, you know, his ability to smell.

Mr. RIP
By this time, the doctor came in to make his rounds and he had some additional information to give the family.
Darlene
What a bummer! He was just a killjoy! He tells us when he took the polyps out of my dad's nose they “looked strange” and so he was having the polyps examined because they didn’t look right.

Mr. RIP
Well, what does that mean, Darlene? How were you all suppose to distinguish what “strange” meant?

Darlene
I have no idea, but you know it was such a downer. We were all excited and then he comes in with this “look strange” stuff, and more importantly, we wouldn't be able to find anything out until Tuesday of the following week.

Mr. RIP
And so, I believe it was your brother-in-law that went with your dad to the appointment and they were the ones that got the information first that he had cancer?

Darlene
Yes. It was determined that it was a rare sinus cancer. I mean of all the places to have cancer. Really???

Mr. RIP
But then, Darlene, once there was another exam given, which I believe he had a CT scan, and it was discovered that it was not just in the nasal passages, but there were nodules in the liver and near the rib cage.

Darlene
Yes and Mr. RIP, it was mind boggling to the doctors because you go from one part of the body and then it jumps several other major organs and goes straight to the liver? It's like, no one could wrap their brain around that and really explain it. So we had been planning, Mr. RIP, this trip, a family trip where we were all going away for a few days, not even a week, but a few days to get away, and we were going to go to Palm Springs, and we were planning to do this after dad’s surgery. We felt he needed to get away, and then we get this news about cancer in two places. And so, we were saying we really should still go, but we needed to hear what the doctor was going to say and what the course of treatment was. So dad made an appointment with the oncologist so that he could get further assessed about this cancer. The oncologist decided chemotherapy was the best treatment needed for this type of cancer and possibly a combination of chemo and radiation in order to zap some of the spots, especially in the facial area. The doctor had to do some sort of biopsy and send it out to determine, you know, just how aggressive this cancer was, and it did appear to be aggressive.
Mr. RIP
And so, Darlene, your sister seemed to be the person that stepped up in terms of scheduling or putting a schedule together so that individuals, not only herself, but you and your brother-in-law, and then a couple of members of your church could actually take your dad to these treatments because chemotherapy can be brutal for some people. But he had been through chemotherapy before because your dad had rectal colon cancer about 10 or 15 years prior and was absolutely healed and recovered from that particular cancer....and so he was a very strong man and very strong man of faith, and you know being a pastor, he pretty much stood on his faith and stood on, you know, the word that he preached about.

Darlene
Yeah, what dad always said that he would defy death, you know, through his positive attitude and through his faith, and that he was not ready to die and even at this time he wasn't ready to die. He was actually in the best of health that a person could be in. He never drank, smoked or anything like that. He always ate healthily. His guilty pleasure was sweets, any type of sweets, but he pretty much-loved life, he loved people and loved living, and so he too wasn't ready to go. He wasn't trying to leave here so he was determined to fight it.

Mr. RIP
Yes, Darlene, I know your dad was a fighter. He had served in the military while you were young and you know he was a determined person. A very strong willed person and had come from a family of strong-willed individuals.

Darlene
And so Mr. RIP, I remember going to the treatments with him and .... Well before I get into that, the very first treatment was going to occur right before we were going to leave on our trip to Palm Springs, and I remember it clearly. It was on a Friday and I took him to his appointment and the doctor, the oncologist said, “this should be real easy breezy. It shouldn't have much of an impact on you. You will be able to go on your trip. This is not even the heavy cocktail that you're going to be getting. So this is something that's too difficult for your body to handle.”

Mr. RIP
So I remember, Darlene, you sat there while they put the IV and the different bags of medicine, there hanging while he's sitting in a chair and you're sitting next to him. You're talking and he pretty much wants to lie quietly and you know with his eyes closed and thinking, probably praying at that point. You're there, sitting and watching how everybody is being connected because were just rows and rows of people in this facility that are all connected to these IVs that are getting some sort of medical treatment during this process.
Darlene
Yes and the doctor comes over and introduces himself to dad and makes sure that he is feeling comfortable and connected. You know, during this time you can get extra blankets and so forth because the treatment kind of makes people feel cold while they are taking it. So we had to be there for two-and-a-half hours. There was a pre-treatment and then the actual treatment that he actually got.

Mr. RIP
I remember you saying, Darlene, that the people were very nice and very friendly at the facility where you went.

Darlene
Yes, they were very nice and friendly. The whole place just had a very eerie feeling to it. Many people have said that chemotherapy is like putting poison in your system because you are actually killing your immune system by trying to kill cancer. And so you know that was running through my mind the whole time he was being connected to this, but then at the same time, you think well, this is what man has right now to help prolong another man's life or other peoples' lives in dealing with the dreadful disease, cancer.

Mr. RIP
I remember you said that the first treatment was around August 17th.

Darlene
Yes, that was August 17th, and we were sitting there and it was quiet, and you could watch television if you chose to or do some work at the time.

Mr. RIP
But when treatment was over you all were able to walk down to your car and drive home.

Darlene
Yes, we drove home. It was a quiet drive. My dad didn't say anything. He said he didn't feel any pain or anything like that, but it wasn't until we got home and I started preparing food for him ….. then that's when he had this excruciating headache to the point where he needed to lie down. He said the pain was directly in the temple and in the nasal passage. It was going from the nasal passage area of the top portion of his head, and it was excruciating, so even though I was preparing food, he did not want to eat anything at that time. All he wanted to do was lay down.

Mr. RIP
And so, Darlene, you stayed there with your dad at his place.
Darlene
Yes, I stayed because I didn’t want to leave my dad there by himself. I wanted to make sure that he was okay and that he was comfortable, and that if he needed anything that I could, you know, get it for him. Plus, he had a dog that lived inside and this dog was just as nervous as I don’t know what. He had been that way since my mother passed because he was there in the house when my mom passed away. So he was still reacting to that. He jumped all the time. He would jump and jump all day and all night until he tired himself. So, I had to make sure that he settled down so that he wouldn’t disturb my dad. Even though he had a place to sleep and stay, and you know to eat and so forth, he was not settled in his spirit because my mom was gone. This was really her dog, so to speak, the dog that she purchased for my nieces. When they would come over, they would see him at the house. So with him being there in the house when she died, we were told that dogs using their senses, can sense death in a person. They know that something is wrong with that person a lot better than humans do. And so he had just not settled down and we’re talking about two months after the fact. So, the only way that I figured that he would stay calm because he was not just jumping, but he was also barking….so the way that I figured to get him calm was to bring him in the room where I was and not allow him to roam around the house but just to bring his bed, and his cover and everything in the room where I was. That seemed to settle him down.

Mr. RIP
What I remember, Darlene is this process of chemotherapy was a very brutal treatment process for your dad during this time. This particular treatment that he had literally had a delayed reaction where it did not enable him to get up at one point and you actually had to help provide assistance for him to be able to get on his feet, which was not something that the doctor said could happen to him. This was actually really messing up your family’s trip to Palm Springs. So, you spent the whole weekend coping with different symptoms that dad was experiencing from this awful drug. It was horrific and it put the family definitely in crisis mode again. But it was something that we couldn’t wait to get him back to the doctor to give the doctor a “piece of our mind” because this was not something that we were told that was going to happen to him. So, it was very scary and it was something that everybody got involved with trying to help with some of the symptoms. Well, dad wasn’t nauseous, but there were diarrhea, dizziness and inability to eat and actually he didn’t have pain in the sinus area until he took this drug. So, it was very brutal in trying to wipe out this cancer that had taken over my dad’s nasal cavity and liver.

Darlene
Mr. RIP, it just took us all by surprise. It took me by surprise for sure. I didn’t know what to do and I had to hurry up and get my brother-in-law involved because this was just a total surprise in terms of the way….he was supposed to be normal doing things normally but that didn’t happen. In fact, it prevented him….that particular weekend from going into his pulpit to preach. So, that kind of angered me with the process too. It was supposed to help, not hurt. It was very hurtful to see dad the way that he was.
Mr. RIP
Darlene, what I can’t wrap my brain around is the fact that this was not the major treatment! This was like the treatment before the treatment. So, if you had these symptoms that you were dealing with, what was the main treatment going to be like?

Darlene
Well, what we discovered was, it was more of the same. Just we added more of another type of treatment. So, he went on Monday, for the treatment. On Friday, dad would go to another facility to get hydration, which was putting fluids back into his body that was depleted by the treatment.

Mr. RIP
Yes, I remember Darlene, because one of those days, that’s when you had a personal discovery. You got the phone call that your biopsy confirmed you had breast cancer in the left breast.

Darlene
Yes, that’s right. A phone call…not an office visit.

Mr. RIP
I remember that the chemotherapy treatment process went on for about 13 months where you were…you and the family and other church members were taking your dad to these treatments. And every six weeks he was being radiated to find out if cancer had decreased or if it was wiped out or if it was moving in another area of his body.

Darlene
Mr. RIP, what was so hard about this process was that the doctor’s could not give us anything definitive about his treatment. It was just, okay, more chemo, more chemo, more chemo, more chemo. Then after that, it was radiation in between the chemo and what we were finding out was, cancer in the nasal passages after the first couple of treatment completely disappeared except for the spot on his cheek. That was cleared out through radiation but it was cancer in the liver…the nodules that were in the liver that was of major concern. Now, the chemo decreased those nodules but it did not eliminate them. So, that was a major concern of the doctor. He also had spots right under his rib cage. Those were eliminated. So, we just couldn’t figure out what was going on with the liver piece and why they were taking so long to get eradicated.

Mr. RIP
Also, Darlene, there were three different types of drugs that were being used as well for this process and it seemed like with each change there was almost no change in the symptoms.

Darlene
I just remember my dad becoming very weary of the treatment and the symptoms that were going on in his body. The fact that he couldn’t get rid of…he constantly complained of dizziness and seeing double blind. It was like he had double vision. So, of course, we had ophthalmologists check out his vision. The ophthalmologist said that his eyes were great. So, it wasn’t until later on in treatment that a neurologist was brought in which my dad kept asking for
a neurologist. He said that something has to be going on in my head. The doctor wouldn’t give him a referral for some reason.

Mr. RIP
Later on, you found out why the doctors wouldn’t give you the referral. Well, Darlene, the family, tried once again to plan this trip. It was canceled the year before because of this first round of treatment that your dad experienced, but he seemed to be stabilizing a little bit and doing a little bit better on whatever he was being treated at that time. So, you guys were planning another trip to Palm Springs, like in the midweek…just take off and go for a couple of days.

Darlene
We were going to leave on a Wednesday morning, early, and we knew that our dad had to have another treatment that Monday before. So, we were all planning the trip to gather just a small bag of things to just go up there for a few days, just to get away.

Mr. RIP
But, Darlene, the trip didn’t happen, did it? Because something again went wrong with the treatment process once again.

Darlene
Yeah, Mr. RIP, we ended up going to Bible study that Tuesday night as my dad loved to do. He taught Bible study and was walking very well, not concerned about anything. We left and my brother-in-law followed us home and got him inside and got him comfortable and so forth.

Mr. RIP
And Darlene, something awful happened.

Darlene
Yeah, I got this call from my dad who was…I was in the back room gathering…pulling clothes out to put in a suitcase and he yelled for me to come to his room. When I got to his room, he was lying on his side shaking uncontrollably.

Mr. RIP
Then you went into emergency mode.

Darlene
Yes, I immediately picked up the phone, called 911 and explained to them what I saw, what was going on. My dad was not unconscious. His eyes were open. He was talking to me. I’ve seen people have seizures before, so this was different for me. It was…that’s why couldn’t understand what was going on, that he was just shaking and literally convulsing? So, I had the house phone in one hand, talking to the paramedics and then, in my other hand, I had my cell phone and I just speed-dialed my brother-in-law to come back to the house.
Mr. RIP
Yeah, Darlene, I remember that. That was a very trying time for you. It’s almost like everybody arrived at the house at the same time.

Darlene
My brother-in-law beat the paramedics. I explained everything as much as I could. I tried to keep my dad calm. I was praying for him the whole time out loud. Talking to the paramedics on the phone until they actually walked through the door and it was just one of those crises that I’ll never get out of my head.

Mr. RIP
After all the help arrived and you gave them the information, you literally went outside.

Darlene
I went outside and lost it again. I went into that crying spell…that same crying spell that I had with my mom and it was just devastating. It was devastating. I was so angry at the doctor. I didn’t know what was going on and he was…when they were taking him to the hospital he was still shaking.

Mr. RIP
I remember, Darlene, after you got yourself together, your sister and brother-in-law went to the hospital, followed the ambulance and went to the hospital with your dad. You called your cousin and your best friend again and both of them came over right away. This was what…by this time, it was 11 o’clock at night.

Darlene
A hilarious part of all this is how my cousin showed up and how my friend showed up. Both of them had rollers in their hair. My cousin had her dress on backward. My friend had a T-shirt on that was on backward. Both of them had on pants with their outfits, but none of it matched. So, when I finally realized after crying again and just looking at the two of them, I just busted out and started laughing. They began looking at each other trying to figure out why I was laughing. When they looked at each other then they started laughing. I only wish I had thought to use my phone to take a picture to capture that moment.

Mr. RIP
Even though the time became humorous for a short period of time, you later discovered what happened to your dad.

Darlene
I discovered that he had five tumors in his brain and he was having a seizure. One was enlarged on the cerebellum.

Mr. RIP
With all of this time, Darlene, your dad was being examined, scanned every six weeks, no one ever said anything to you that there was a tumor growing in his brain?
Darlene
Not one doctor ever said there’s a tumor growing on his brain. The radiation doctor, nor the oncologist. Our family had a meeting with the radiation doctor where we specifically asked if cancer had spread to my dad’s brain. And the doctor said, “no”.

Mr. RIP
And he had five, Darlene, five tumors that caused the seizure. On top of that, Darlene, I remember no one even explaining the different stages of cancer that your dad had and you didn’t find this out and discover this until after the fact that. He was actually at Stage IV when they gave him the chemotherapy treatment.

Darlene
I believe, Mr. RIP, if someone had explained that to us, I would not have had my dad go through all of that chemotherapy those 13 months because the treatment was really brutal.

Mr. RIP
Your dad, Darlene, ended up having whole brain radiation after that discovery in hopes that this would help eliminate the tumors in the brain.

Darlene
I can’t say if it helped or made things worse. This was around July when the seizure occurred and the radiation treatments…between July and August of 2010. I just remember that I was just so happy that I was able to be there every day with my dad. Every day that he was in the hospital, every day for all the treatments that he had I was there and able to be there and didn’t have to worry about a job telling me that I could not be there for my dad.

Mr. RIP
So, Darlene, detaching from that job was a good thing.

Darlene
Yes, it was. No regrets there.

Mr. RIP
The other purpose of that whole brain radiation, Darlene, was to be able to reduce the size of that tumor that was on the cerebellum.

Darlene
Yes, it did shrink a little bit. The whole idea was for a neurosurgeon to go in and get it and take it out. But, I think, dad had become too weak for that to happen.

Mr. RIP
Do you think it was the chemo, Darlene?
Darlene
I know it was the chemo. I remember going in to see my dad and helping him with eating….He was right-handed, so he was able to eat with his right hand, you know, and to feed himself. On this particular day, he couldn’t move his right hand. He could only move his left hand. Then the next day, when I went back in he was able to move his right hand but not his left hand.

Mr. RIP
Well, what did you think was going on, Darlene?

Darlene
I don’t know, but I asked the doctors and they couldn’t understand it and all they could probably assume was that it was probably that tumor. But since my dad was able to have movement in his hands and his legs, the doctors decide to move him to a rehab center where he could still get the nursing care that he needed but also work on restoring the use of all of his limbs.

Mr. RIP
Oh yes, Darlene, he was moved to this particular facility and they had a very nice atmosphere to it. The people were very nice and warm and friendly and so forth. The family was pleased to have him there.

Darlene
The only thing I didn’t like, was visitation was somewhat restricted…a little bit more restricted than it would be in the hospital and I couldn’t stay overnight if I wanted to or longer.

Mr. RIP
There was an episode that your dad had at this facility where he was overly medicated from being in the hospital and he ended up having to go back to the hospital.

Darlene
We couldn’t figure it out, he just kept sleeping. One of our relatives went to visit and said that he was asleep the whole time. I know I had left him earlier and he was asleep. So, we immediately got a doctor involved and we readmitted back to the hospital. So, dad ended up having another hospital stay for three days.

Mr. RIP
What I also remember, Darlene, speaking of the hospital, this particular hospital, some of the doctors were not very caring for the elderly in your particular case, your dad had the diagnosis of cancer. I believe the attitude was they felt that he was dying anyway and he either needed to go home and die or be any place else but in the hospital. In fact, one of my dad’s doctors had a bad attitude. In fact, you had a confrontation with him. He said it in so many words. It was disheartening and discomforting at that time to see a medical professional to have that kind of attitude.
Darlene
Well, what I think Mr. RIP is that some of that was related to his culture. You know when you have certain people that are coming from a different background, a different culture, they depend more on their cultural ways than what they are being taught in medicine. So I really strongly believe that's where this particular doctor was coming from. Even some of the nurses, I had to follow up and check on them. A lot of times, I would go in dad’s room and there would be paper and trays all around the room from the previous shift. It was as if there was no pride or respect, in caring for my dad and even, doing their job. So much so, I had to report the whole nursing staff, go straight to the top, and report them to the director of nursing. A family that is going through this type of trauma with their loved one shouldn't have to deal with these issues. But the harsh reality was, this is the way that medicine is being practiced now.

Mr. RIP
I remember those individuals came to dad's room. It was about three of them, they were all hospital administrators. They were all apologetic and spoke with the supervisors on three different shifts, and so forth. They gave you their business card to contact them. But how did that go?

Darlene
It didn't go. So, basically if I wasn't there or a family member wasn’t there my dad didn't get the care that he needed. Even though no one said this to me, but I think because of his diagnosis and his illness, they felt that dad was already gone.

Mr. RIP
And so, Darlene, it was around mid-September when you all decided to have dad go back to the rehab center. He was able to go back and basically stay there for the remainder of his life.

Darlene
What was so interesting about the way my father during his illness, he had his full mental capacity. He was still making decisions. He could communicate to us through his eyes, even though at this time in his life he was not able to speak. We didn't realize that this tumor was actually preventing him from swallowing and when he would eat he was not able to do because the tumor was controlling that particular motor activity. And so, he was still, like I said, pretty mentally alert, and was able to communicate things, make decisions, especially about his health. We just honored, whatever dad wanted.

Mr. RIP
But Darlene, your dad was still fighting and he was determined he was not going to die.

Darlene
Yes, that's correct. He was not giving up at all and did not to the very end.

Mr. RIP
And so Darlene what I remember about the day that he died, you had a meeting with your cohorts, two members of your cohort, you all met at the library. You came together with your
game plan because you were focusing on the dissertation piece at this time. And then right after
that, you went home, you decided to ride with your brother-in-law because he wanted to visit dad
at the rehab facility.

**Darlene**
I felt like my meeting went well with my cohort. So I wanted to visit with dad along with my
brother-in-law.

**Mr. RIP**
So when you arrived dad was there in a room by himself and he was being cared for by the
nursing staff at the rehab center.

**Darlene**
Yes Mr. RIP, which was definitely much better than the care that he was getting in the hospital.

**Mr. RIP**
That's so unfortunate, but I'm glad he was able to get that care in the rehab facility. And so, you
guys were there talking to your dad and he was making gestures and responding to a lot of what
you were saying and then he would go into a type of sleep state.

**Darlene**
Mr. RIP, when I saw him asleep, it just sounded like he was gasping for breath. And I asked my
brother-in-law, about that. It just seemed like he was breathing harder.

**Mr. RIP**
Yes, I remember that Darlene and so you asked your brother-in-law what was going on with
dad’s breathing.

**Darlene**
And he told me that his organs were, you know, shutting down. I didn't say anything else at that
point and just walked outside again. I didn't break down at this time, but I just kind of thought
about what he was saying, and shortly afterward we left to go home.

**Mr. RIP**
And Darlene, I remember you started that conversation again about the organs and your brother-
in-law talked to you at that time.

**Darlene**
Yeah. I kind of wanted to know what was he meant by all of this shutting down stuff.

**Mr. RIP**
And so he told you basically what was happening to your dad.
Darlene
Yeah. Basically, dad was slowly making his transition. He was going to die, but I wanted to know how long did he have?

Mr. RIP
Well, I don't think your brother-in-law was going to tell you exactly how long he had. He said, “it could be a matter of days, it could be a matter of weeks. We just have to wait and see.”

Darlene
Well, this information, Mr. RIP, was very upsetting to me because I wasn’t thinking dad was going in that direction, at least not right away.

Mr. RIP
But, once you got home and you got ready for bed, you ended up getting a call and this was about 12 o'clock, early the next morning, which would have been Thursday morning. The rehab center said that dad was taking very long breaths and that the family needed to come back to see him. And so, I remember you calling your brother-in-law and sister and telling them what the rehab center had said. They picked you up.

Darlene
I remember Mr. RIP driving down La Cienega and getting ready to make the turn toward the rehab center, and getting that phone call saying dad was gone. We rushed upstairs to his room. Dad’s body was still warm. But the most interesting thing, he had a smile on his face and he looked so very peaceful. The nursing staff told us, it was the most unusual incident, they had experienced in preparing a body. They said that dad must have been a godly person because they felt that coming through him as he was making his transition. And so, it was October 14, 2010, when dad passed away, 17 months after mom.

Mr. RIP
Well, I also remember, Darlene, that you all had a wonderful service. We had a wonderful service for dad and his casket was covered with the American flag because he was a veteran. There was such a beautiful turnout of people, wonderful flowers, and just a royal type of funeral or home-going for him.

Darlene
The bishop of the Church, oversaw the service. He and dad were friends. So, it was a personal type of message and very upbeat service which was the type of service my dad would have wanted to have. Lots of relatives that I hadn’t seen in years flew out for the service. So, it was good to see them and just to be around family during this time. There were family members that came from my mom’s side of the family as well.

Mr. RIP
I remember, Darlene, you took off from work for the service and then shortly, maybe a couple of days, after that you went back to work.
Darlene
I did because of the individuals that I was working with were so supportive. They even came to the service and that was just a surprise for me. I hadn’t worked with these individuals, but only a short period of time and they took time off to come to the service just to support me and that was overwhelming. I mean, it was just really, really nice of them to do.

Mr. RIP
There are also a couple of friends you had from your old job that came to the service as well, Darlene.

Darlene
Yes, Mr. Rip, and that was nice of them to do, but there were other people from the old job who were trying to come too. But I made it very clear that they were not welcome. The nerve of them!

Mr. RIP
Well, this was all going on in the month of October but there were still some trying days ahead for us. Mainly because November, would have been your father’s 77th birthday.

Darlene
Yes, and that was difficult to get through that period as well as Christmas which was the following month. So it was a heavy end of the year of 2010. Our family was holding it together, holding each other up and pressing forward and just making sure that we were all just…we had our heels dug in the ground at that point because this was a really big loss.

Mr. RIP
Well, another thing that made the loss so difficult was this was also your pastor. Your dad and mom were your pastor and first lady of your church, therefore; it was like a double whammy. It’s not just mom and dad, but now it’s your pastor so now you have a whole congregation that is feeling this overwhelming loss. So, I know how tough it was but you were able to continue to hang in there and go to church every Sunday. How were you able to do that, Darlene?

Darlene
Well, I just knew that if I went I would get stronger and so I just did it.

Mr. RIP
And then one of the family members that flew out from your Mom’s side had been planning a family reunion that was going to take place sometime in July 2011. So you were really looking forward to that and planning ahead for that.

Darlene
Yes, the whole family was and we pretty much counted the days down and looking forward to seeing family that we hadn’t seen since we were younger and…well, I take that back. I have seen them because I use to live in Tennessee and most of the people were in Alabama. So, when I lived down there, I made sure I passed through those states and saw the family. So I had seen
some of them as an adult, but it was exciting because other family members such as my sister and her children had not seen them.

**Mr. RIP**
Darlene, I think the family reunion was a thing that kind of helped solidify or began the healing process because everyone was still pretty much grieving. It was such a joy to actually family members during that time.

**Darlene**
Yes, it was.

**Question 2- Mr. Rip, what were the indicators that the setback of losing family became a challenge from May 2009 to July 2011?**

**Mr. RIP**
Well, I think the biggest indicator was the fact that the family came together and we were closer. Granted, my family is small but we have extended family members and some of those family members belong to the church where dad was the pastor and we all came together to support each other and for some reason during this whole period when dad was going through the chemo I had the idea to set up a Skype. So basically up until the time that…even up until the time my father had the seizure episode in July when he was in and out of the rehab, going from rehab to hospital and so forth I was able to set up a Skype and Skype him into the service. So dad literally was still in the pulpit, even though he was in rehab or he was in the hospital because he was being Skyped into his church service. There were times dad was able to… actually speak to the members of the congregation to give them hope. I was with him most of the time with him going back and forth for treatment and being in and out of the hospital. During this time, it was not only a joy for the congregation to be able to see his face and to hear him during this period it was also helping him and it also helped me.

Dad was a very strong person and he demonstrated that his whole time of being sick and dealing with this cancer and the chemo. So watching how he led his life and how he was definitely warring against this issue it looked like a setback. However, you had to reframe it as a challenge because he was demonstrating that he wasn’t giving up. I remember when you had your breakdown; you were able to pull it together. I helped you pull it together because you had to pull it together. I mean, you are the oldest of the family and there is the expectation of leadership that you have to exhibit. Basically, there is a time and place for everything. After you’ve had your breakdown, then you pull it together and come out with a united front because your nieces were emotional at this time. They were very, very connected to your parents. They saw them every day, and so you really had to be strong for them.

**Darlene**
Well, Mr. Rip that’s the way you may have seen the whole process and outcome, but I think there is still a lot of strength in being vulnerable. It’s not a weakness. I think it’s just being real and expressing your feelings. I mean, you only get one mother and one father. I know people that would give all their limbs just to have individuals like my parents in their lives. So to say to
someone “just get over it” or “well you know it’s time for you to move past this” is just rude. You don’t tell me when it’s time to move past my grieving process. I mean, my parents have known me all of my life and actually were the vehicles for me to get here. So, to say something like that to a person, you were really asking for a tongue lashing. That was a setback that I clearly had to refrain as a challenge.

**Mr. RIP**
I thought, Darlene, that you handled things very well.

**Darlene**
I did handle things very well, but I think there were some things I didn’t handle well. I remember distinctly that there were a few people that belonged to our church and there was an incident which I am not going into…

**Mr. RIP**
Well, Darlene, I think I know where you are going, but I do know that you thrived through this process of coping with the loss of your family members, especially so close one behind each other and that’s devastating.

**Darlene**
Yeah, it was devastating and still is, so it hasn’t really gone away. I miss the conversations. If you’ve never had a relationship, especially with your dad and you never had a relationship with your mom or the relationship wasn’t good then I can understand. But I really had a great relationship with both parents and I loved them dearly. I knew I was loved as a child and even as an adult. So, to not have them here anymore or, to not be able to physically hear their voices that’s a setback. It’s trying to cope with that and it’s a day-to-day task.

**Mr. RIP**
But I think, Darlene, the challenge was moving forward and to see what was that going to look like.

**Darlene**
Well, Mr. Rip, the biggest challenge was the church and trying to keep the flock together and keep services going, keep activities going during this time of bereavement and grieving and so forth. Then dealing with individuals that were coming into the church who we thought were going to be interim leaders. That was just…well, that was more traumatic than losing them.

**Mr. RIP**
I know, Darlene, you often quoted the scripture that states “beware of wolves in sheep’s clothing”…

**Darlene**
Yeah, that’s exactly what we were dealing with, individuals who were “wolves” coming to prey on people’s emotions, pretending like they were really close to my parents, and trying to persuade and manipulate. It seemed like these wolves were trying to destroy the congregation. It
was just ridiculous! At that point, that was the setback, but then I had to come out and say, “Look, I see what you guys are doing”. You can take that somewhere else. That’s not going work here.”

Mr. RIP
Oh yes, Darlene, I do remember that. We were real, assertive/aggressive with some of the individuals that came through there because it was obvious what they were looking for. They didn’t come to comfort us as a congregation or to help us, but it was another way to get…

Darlene
The meal ticket they needed. Just think, of all the places to go, Mr. Rip, the church.

Mr. RIP
That was an extra added burden on the family.

Darlene
Yeah, it was an extra added burden on the family. The fact that we really had…you really had to be watchful, not only watchful but prayerful at the same time.

Mr. RIP
Darlene, I know that you thought that a lot of your father’s friends who were also ministers and pastors would be coming around to be supportive and encourage the congregation...

Darlene
You mean so called friends. Yeah, they turned out to be a wash. We had one or two individuals to come by and check on us and to make sure that we were okay, but for the most part they were pretty much distant.

Mr. RIP
And so, Darlene, you made a decision to not have expectations of people.

Darlene
Right, therefore, you won’t be disappointed.

Question 3- Mr. Rip, what enabled you to manage what was going on from the period of May 2009 to July 2011?

Mr. RIP
What I remember, Darlene is we actually took one thing at a time. That’s all you could deal with at that time. One issue at a time, whatever we were dealing with we were going to do it together as a family. We could not crack. At one point, when you have death, sometimes family members, separate and go in various ways, but your family stuck together because that’s all there was. That’s all you had and so you had to stick together as a family. The core unit, I am talking about the individual core unit which is me, my sister, brother-in-law, and her children. On the other hand, we also had friends, who helped out and supported us.
Darlene
We had other family members, extended family members, although some of them got caught up with some of the deceptions that were going on with some of these leaders that were coming into the congregation. Even though we got through that, it took a whole lot of prayer. It took a whole lot of fasting. It took a whole lot of reading The Word. It took a whole lot of praying for wisdom to see the deception that was coming our way, so it could be revealed. We would then know exactly what to do and what decision and strategies would be needed.

Mr. RIP
Well, Darlene, right after your mom’s death, there was really no time to even think or strategize about anything because you went right into your dad’s treatment, surgery, first and then chemotherapy. Then we had to move. It was a lot to juggle during that time, but you were able to manage it. You were focused on taking care of one issue at a time and then it was really interesting how you chose not to deal with your health issue and put that on the back burner. The choice was to focus only on dad and to help him get through what he was dealing with.

Darlene
As I look back on it now, it was very overwhelming or it should have been overwhelming. I’ll put it that way. I couldn’t feel the overwhelmingness of it all but taking it all in now and looking at it in retrospect, it really should have been like a huge avalanche and just snowballed me down the road actually. But if I really want, to be honest about the whole process, I was not really taking care of anything. I was floating because it was a lot to deal with and a lot to juggle in and out of rehab, in and out of the hospital, in and out of treatment, weekly treatment for 13 months, that was a lot to deal with. Then making a decision about my health and then taking care of that and getting well miraculously afterwards. It was still…we are still moving. We were still moving forward. It was like we were saying, “If we could just get out of 2009-2010. If we could just get out of these years…move time a little faster”, were what we said to help each other get through. “Let’s just get past this. Let’s see what 2011 is going to be about.”

Mr. RIP
And of course, Darlene, you had no idea that this was going to be the year of you actually grieving and healing because everything you applied for job wise didn’t come through. Absolutely, nothing came through. You were solely supported through unemployment and it was just a time to… You were also waiting for the decision on your old job. The first eight months were like a holding pattern. The only thing that helped sustain you during that time was the decision you made. You were going to take care of yourself physically. You focused on strengthening the physical body because you were already going deeper spiritually. So the whole premise was to focus on strengthening the physical body. You got into the changing your eating habits and just tweaking a whole lot of things. You kind of let things go. So, I think that helped a lot. You were able to get enough rest to ward off whatever the stress that may have been there which rejuvenated you.

Darlene
I agree, Mr. Rip, that it did. That was a rejuvenating period. I believe 2011 was a whole year of grieving the loss of both parents. I wasn’t able to really do that in 2009 and 2010 but 2011 gave
me that opportunity. Then when I actually saw my relatives that I hadn’t seen at the family reunion, in July, it was another shot of rejuvenation. A great-aunt I hadn’t seen and I didn’t realize I was going to see my mom’s sister’s for the last time. She passed shortly after the reunion and so it was really a great time to just embrace those that were alive during that time.

Question 4-Mr. Rip, how did you demonstrate your life’s activities were more important from the period of May 2009 to July 2011?

Mr. RIP
Well, what I remember is, a schedule was created so there was something for you to do every day during that period. We were already on the schedule for dad’s treatments for chemo. You were on schedule for your medical appointments that you were going on. Everything was scheduled out. So, it was extremely well organized. Communication was tight with family members. When one couldn’t follow through, another one picked up and said “I’ll do it”. Even friends were involved in the process, especially during the treatment process. Everything was tight. Basically, we were almost operating as if we were robots. We were all analytic machines as opposed to feeling machines. We weren’t operating out of emotions.

Darlene
We really were operating somewhat robotic except, Mr. Rip, when issues started popping up at the hospital where doctors were saying things like “we need this bed and he’s too sick to be here and he needs to be in a rehab facility” Oh wow, and the first rehab facility that we went to was trash. My dad got very sick there and we ended up taking him back to the hospital because the rehab facility, recommended by the hospital staff was the pits! It should have been shut down and put out of operation. So, it was just a horrible thing for a person to experience! I am just glad that we were there. We were focused not necessarily on life’s activities, but the activities that were necessary to keep life going. So, my sister and I and brother-in-law, all focused together. We weren’t afraid to speak up and be advocates for my dad, especially during his illness. We did the same thing with my mom while she was going through her treatment of getting her defibrillator recalibrated.

Mr. RIP
Oh yes, Darlene, because I remember prior to her death you stayed at the hospital with her. When you were in the hospital with her, at one point the nurse came in and didn’t know how to draw blood properly. They were sticking mom in the wrong area. Now Darlene I know that you can be a very nice person at times, but I know there are times when you can be pretty assertive when you have to be.

Darlene
That’s right, and this was one of those times because normally you are not supposed to stick a patient more than twice. If it’s the third time, then you have to go get a supervisor. So, I was already watching for the best place to draw blood from mom. I happened to mention it to the nurse that was drawing the blood. But because of all these HIPAA laws, medical personnel don’t have to talk to the relative even if the relative is there. So they direct their conversation toward the patient. So, what I said to mom was, “ask for a supervisor or send a Phlebotomist to
come in here and draw my blood”. I had to say something because I learned if you didn’t be assertive or if you didn’t have a relative or someone with an elderly patient the medical staff would take advantage of them.

**Mr. RIP**

And so at that time, Darlene, life’s activities were the activities of whatever the treatment process was for your parents. Whatever the treatment was, when it came down to the funeral services that was a life activity and planning that and then after you had the funeral then dealing with the business. So those were the activities. Again planning, strategizing, being very organized was the order of the day at that time. On the other hand, when it was time to have fun and rejuvenate, as we did at the family reunion, we immersed ourselves in that activity and sucked up everything we could. We weren’t able to do anything like that in the prior years.

**Darlene**

As I said before, Mr. Rip, that sleep was definitely a life activity. We needed it. I needed it. The family needed it and so it was imperative to get it. Eating properly was an activity. Getting physical exercise, I definitely made sure that I was involved in some sort of physical activity during that time. It was a necessity in order to keep stress out of our lives or out of my life. Most importantly, finding ways, such as watching movies and roller skating just to have fun.

**Question 5- Mr. Rip, what were the indicators that you were growing during the family loss process from the period of May 2009 to July 2011?**

**Mr. RIP**

Well, Darlene, I think one of the indicators was and this is a huge indicator, the fact that I have not been hospitalized. In other words, not for medical reasons, but for mental health issues, I think that was a huge factor. I didn’t see anybody during that time. I didn’t talk to anyone, not even a therapist. No one took any medication during that time. So that is a huge indicator! I must have been growing through that process with every event that was occurring with my parents because at the same time I didn’t mention this before but I was still in school. So, that was another factor that helped to support and help take my mind off of what was going on with my parents. Even during the chemotherapy sessions with my dad, I took my school work with me. I took my laptop with me, whatever papers, projects, and things that I had I took them with me. My cohort, especially those that I worked with and those that knew me and those that knew what I was going through were very, very supportive of me. They were not only helping but kept me informed of what my assignment was and what I was supposed to do on a particular project. I felt I was growing, Darlene, every time I walked into that church. Even after my mom passed and after my dad passed. Every week that I was able to go in that church building I was growing and it was amazing because you could see other family members falling apart but I wasn’t. I flipped what I was experiencing into a joyous and happy occasion every time when I went to church because I knew that my parents were in a better place. They weren’t suffering, but their bodies became very weary with the amount of medications and the disease that had riddled them.
Darlene
I think that was comforting, Mr. Rip, in order for me to get the meaning of the whole process that they went through with their illness. They were actually teaching me something during their illness. They were teaching me to fight. They were teaching me to stay strong. They were teaching me to hold fast to your faith, especially every time my dad showed his face to the congregation while he was in a rehab center. So, they were teaching me a lot about faith during that time and helped me to grow deeper and stronger in God. Even though I had a few episodes of emotional breakdowns and there were some things that I said to people that I later apologized for, I was still able to get back on track through the process. There was really no one to, other than family and friends, no other shoulder to really lean on. I think my behavior was appropriate for what was going on with me during this time period and I think I grew after recognizing things that weren’t good. I understood some of the things I used to cope were things I taught others in therapy. When I was a therapist and people experienced loss in their lives, they were given tools to help them get through their loss through the therapeutic process. So it was interesting to see how I was able to use those tools.

Mr. RIP
Darlene, I think another thing that helped you grow during this time was after the funeral services for both parents. You and others went to the internment where your parents are in a mausoleum. Having gone through that service, I think that solidified it for you. I think it was an ‘ah-ha’ moment…well, at least, it was for me. You had to stand or sit there and watch the men actually seal up the tomb. The men take the cement and you watch the casket go slowly in the crypt area. You watch the men take the cement and seal up the area. This big plated block is placed over it. It is sealed and your parents are one behind the other. Their breath is gone. Their life is gone and it’s over. It is finished, at least, the physical man. Because of what you believe, that they are absent from the body but present with the Lord. Their spirit is with the Lord, so, but having witnessed that, it’s okay. So there’s no reason to go and visit them at the mausoleum because they are not there. It’s just so final and I think that helped you grow and to get past what other people didn’t get past or reason that they have to keep going back to visit that area.

Darlene
Absolutely, Mr. Rip, because once that happened I just said, “that’s it” and when I rode away from there in the limousine back to the church where the repast was it’s like that’s it and I have not been back since. I drive by there. I don’t go in. Its’ just like they are not there. My parents are not there and so I know that their spirit lives on in me, my sister, and others whose lives were impacted by them. For example, there are a lot of things that I see my sister do that remind me of either my mom or my dad and the same with my brother in law and even my nieces. They are living through us in a lot of the teaching that they left us along with the great morals and values that so many people are not going to be able to experience. So, I totally get what you are saying.

Mr. RIP
Another thing that helped you grow, Darlene, was the fact that you just don’t hold on to things like you used to and you just let it go. You are freer and you don’t become too attached to material things because they really don’t matter. Material things don’t matter as much as people do. I mean, you can get more material things and you can lose them in the same day. So I think
in striving to get them, that’s not as important either. I know people lose their lives over trying to do things like that, but it’s just not that important.

**Darlene**
You are dead-on again, Mr. Rip. I don’t get attached to a lot of material things and I am not sure if this growth is because of the job loss if it's because I have had breast cancer if it’s because of lost parents all around the same time or all of it together. I just...people to me are more important than things and I cherish family. I cherish the friends and friendships and I make sure I am in contact with people more. I check on them. If they are not checking on me, I check on them. I use all the forms of communication through texting and social media and emailing, whatever it takes to connect. I make sure I do it because I think that’s important. That helps people live longer. It stimulates people and it helps me grow.

**Question 6- Mr. Rip, what positive changes were made in your life from the period of May 2009 to July 2011?**

**Mr. RIP**
Well, Darlene, I think some people may not see this as a positive, but I see it as a positive. During that time I have had a couple birthdays and so I am in a place where I am very confident of who I am and feeling very comfortable about what I say. Sometimes I feel like Wendy Williams, “I say it like I mean it”. Sometimes that can come off pretty harsh to people, but they are not in the place I am in right now. I feel like that is a positive change because I feel way more assertive than I have felt in the past. I only wished I had used this amount of assertiveness on my job because I wasn’t that assertive on my job. I was subservient on my job because I wanted to keep my job. I am definitely not attached to jobs and that’s one thing I used to do, attach myself, my personality to a job. I don’t do that anymore because I know who I am. I am very confident of who I am and I am very confident in the place that I’m in right now.

**Darlene**
I would agree that we are comfortable and we are very determined and we are very positive. We are also very spiritual and very God-referencing and God-oriented at this point because I am very much aware that at some point I may make my transition and I want to be able to leave a legacy and purpose for being here. I know what my purpose is for being here and I need to continue to make sure that I am doing my purpose. So you don’t know how much time you have to do what you are supposed to do here on earth. That’s one of the things that you kind of look at because I want to make sure that I get everything done. I want to make sure I get everything done before I leave here.

**Mr. RIP**
Another positive thing, Darlene, is the fact that you’ve said that you probably won’t retire. You will just continue to work.
Darlene
Well, I’ve noticed, Mr. Rip, that a lot of people start getting into their retirement mode and do retire and very shortly thereafter sickness settles in. Then they tend to die a lot quicker. I want to continue to work as long as I can and help individuals and help students. That’s what I think my purpose is, to be a positive motivator, an encourager, and coach individuals through life. I think that’s what has come out of this whole process. When I tell part of my story to students, I get all kinds of reactions from them because they begin crying. Some even say, “Wow, how did you survive all of this”? “My stuff is not nearly as bad as what you went through”. When I hear the reactions then I understand a little bit better about why I went through some of the things I went through. Basically, it was to help people pull their lives together.

Mr. RIP
Darlene, you were able to really quickly detached from the job when you did as well as deciding to change eating habits, change your lifestyle, become more of a spiritual person, become more of a health-conscious person, focus a lot on what’s good for the body to have. You eliminated things like soft drinks from your diet and were determined to drink more water, even though you were still holding on to your coffee. But now you drink nothing but water or green tea. If you are not drinking green tea, you are drinking maybe one cup of coffee at the beginning of the morning. For the most part, you eat more leafy foods, more vegetables and fruits and so forth. You try to get as much exercise as you can. So these are positive changes. This is the commitment that I’ve seen you make in order to preserve your health. You make sure you get two to three servings of fish. Hopefully those servings include wild salmon. Also, you eat dark green, leafy foods at least once or twice a week. So it’s a decision to eliminate salt and sugar as well. So, it’s about getting my life in order and making good decisions.

Darlene
I recognize that my body is getting older. So, if I want to live longer I have to make better health choices and take care of the body that I do have for now. Another thing, Mr. Rip, that when there is a disagreement or there is something that comes between me and another person I try to make the first effort to resolve it, let it go and move on. I don’t let it linger because, again, festering things like that create illness within the body. I am not trying to create problems or issues or things like that. I am just trying to be supportive and offer an opinion. If you don’t want my opinion, then don’t ask me, is my attitude right now.

Mr. RIP
So, Darlene, that means you have to take care of yourself physically, emotionally, spiritually, and everything and so those are the things that I have seen you deliberately make changes and make more positive changes in your life. I think after being rejuvenated at the family reunion, Darlene, you had a totally different outlook on life and that was the beginning of the healing process to start making changes in your life and that’s when you made changes. When you came back, you started making changes even in your job search, your skills. You focused on skills that you weren't using or hadn’t used in awhile. Another positive change, Darlene, that I think is very good is the fact that you don’t have a problem being by yourself. Basically, your personality is one of a deep thinker anyway. So you spend a lot of time alone and you feel comfortable with that. Although you aren’t totally alone because you have your dog. But you are alone in this
process and it gives you a lot of time to think, a lot of time to dream, a lot of time to plan for the future, and to strive for goals that you want to complete in the future. These are all positive things that have come out of this whole process as well.

**Darlene**

Well, Mr. Rip, I realized with the two individuals that I loved the most in my life, not being here, that my life has automatically changed. Initially, I couldn’t really see the positiveness in that because I just felt this is just so hurtful, but then I started to see that there is a plan. There is a reason that unfolds later on. We don’t have a choice in whether people stay here on earth or not. They pretty much make that choice within themselves and decide whether they have the will to live. We can pray to God and ask for them to stay, but there is no way I would have wanted mom or dad to stay on earth in the condition that they were in. They were both two very lively people. Mom worked up until the time that she got sick. Dad was still working at the church as pastor and they were both very lovely people who loved life. However, when illness struck, I would not want them to be here not being able to be the individuals that they were before they became ill. So, I am happy they have made their transition. On the other hand, I am sad they are not here to communicate with me. I can’t show them some of the things I have been involved in or my successes in life. This is what I used to do on a daily basis. So, the positive thing is, I am learning to share with others a lot more.

This concludes the Mr. RIP dialogue.