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Experiences of an MK - by E Harvey

TCK Life

Third culture kids like MKs, can struggle with the idea of having little or no roots, as they were 'uprooted' when young and, often, taken where neither they nor their parents knew the language, people or culture. It's a sensitive issue for some, being called a third culture kid. They merge at least two cultures and, to belong, must make up a third which adapts to both and strives to fit into both.

When young, the merging of cultures is a process that can occur without even realising it is happening, without having to think or understand why there are two ways of speaking, or two ways of greeting or two ways of cooking, etc. For the TCK, it is one culture rather than two, because that one (the merge of the two) is the only culture a young person has ever known.

Spain

My family moved out to Spain when I was one year old. At that age I didn't know about languages, or people groups, or cultures. I grew up speaking English at home, and Spanish at school. I had an English family, and Spanish friends. However, I had one culture. My own culture was a third culture, which bizarrely I could share with my brother who was 17 months older than me and a fellow MK. We learnt to be polite at meal times at home where 'pleases and thank-yous' were important, and we learnt to be loud and 'impolite' at school because the Spaniards had no need for the 'pleases and thank-yous'. To this day, I could not point out to you all the differences between the British and Spanish cultures, because I grew up with both and in me they merge. It was only once back in the UK, hearing others talk about the Latino culture that I realised the differences – differences that I still am realising.

In a way that concept, of not always clearly differentiating cultures, extends beyond the UK and Spain. When I travel, I first accept a culture and adapt to it as best I can depending on length of stay in that country. Only upon reflection, and gradually, would I notice and fully appreciate the differences in culture. One could say that there is a lag in 'culture shock' or even a blunted culture shock...but that topic would take us off on a tangent!

Returning to the UK

I was 16 when we returned to the UK. Up till then, the UK was where we came during school holidays, where we bought a year's worth of English reading books to take back to Spain, where we went on long road trips, where most Sundays we'd visit a new church and have roast dinners with a new unknown family, where we'd be let loose at summer camps and end up with soggy camping gear but big smiles. Now, this was to be called home. It is hard to say whether it has ever become 'home', instead, it is more like 'home for now'.

The language was no barrier (thanks to all those English reading books!), and at school the people I met on the first day are still my friends today: what was unexpected and challenging was the schooling system. In Spain I'd gone to a Spanish school (Colegio San Gabriel), where my memory and rote learning skills helped me excel throughout primary and secondary school. In the British schooling system I found that, even if I had covered the material in Spain, the way I was meant to learn was by: assimilating, interpreting, understanding, and presenting the information succinctly and clearly on exam papers. This was a tall ask especially in chemistry. All the formulas I had once memorised I now had to try to understand and explain. Well, my marks dropped, and I don't know if it was due to MK upbringing, or my desire to succeed, or a combination of both, but I adapted – I had to. The two years of A-Levels were not long enough to fully adapt to the system, but throughout university the British idea of understanding what one learns became part of my new way of learning, and the Spanish memorisation only came into play when I still had information to cram a day or so prior to exams.

What is home?

Nowhere and everywhere. What is foreign? Everywhere, yet nowhere. One adapts to make what is foreign home, or at least, home for now.

As an MK, the reason why your parents decided to move country and face the unknown can be a mystery, but you see their lifestyle, and you witness their focus and love for Christ. It would be naive to think all MKs decide to respond to the Gospel and follow Christ, yet it is the prayer of every MK parent that God would meet their child where they are at, whether that is in one cultural setting or another, or in fact, in the kid's own third culture.

Who are you? Where are you from?

"I, um well..my family are British, not sure exactly from where and at the moment they're all spread out, some in Australia and New Zealand, USA, but we went to Spain you see, but we aren't Spanish, I have no relatives there whatsoever. And now? Well, now my parents live in Wales.."

"Originally? Born in St Albans, no clue what it's like there, moved away to Coslada in Madrid when small, oh and then to Alcalá and then Camarma, both in Spain...lived just outside London for a bit too, before four years of study in Nottingham and then to Bath. Now in Bournemouth..."

I tend to alter my answer depending on whom I speak to. But the strange thing to explain is that I am not fully British, nor am I fully Spanish.

Thus, for TCKs those introductory questions can prove a little complicated.

Identity

We speak from experience. This is mine. Identity can be found neither in my nationality, nor in my place of residence. It is true that those things play a role in shaping me into who I am today, but they can never explain who I am today, because a third culture is not one that all identify with, and is hard to map onto paper. A third culture has been identified by me because of the upbringing I have had, and been mapped into my life to adjust to the cultures I have found myself in.

Those places, and experiences, help mould my personality and character. There is no fear of 'the foreigner', because I am more often than not the foreigner. There is an acceptance of 'the different', because my life has been an acceptance and acquisition of differences.

There is a flexibility to accept or reject behaviours, because living with more than one culture gives you insight to choose the best and reject the worst. Culture stops existing within the borders of a country, and becomes part of a mobile lifestyle.

TCKs find ways to cement their identity. MKs grow to see their parents cement their identity in Christ.

The God of the Bible is a God of no barriers, of no limits, and as a TCK I glimpsed the possibility of not being defined by nationality, of rejecting the idea that a country and/or culture defines who you are. That possibility for me, frankly, was a relief. To God it doesn't matter where I am from, and because of God, I know who I am.

Autistic Spectrum Disorders: the family in mission

A study has recently been made of families serving in missions who have one or more children affected by Autistic Spectrum Disorders (ASDs). The research paper was written by Deanna Richey in 2016 as part of an M.A. in Member Care awarded by Redcliffe College. It is entitled: *Special Families: Insights into the care and management needs of ASD-impacted mission personnel serving globally*. By kind permission of Deanna and Redcliffe College, we have summarised some of the key content and findings in the study. Those who would like to read the entire document are encouraged to contact Deanna Richey at the following email address:

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All quotations are in italics below and are taken directly from Deanna's work, with any additions or explanations in square brackets: [].

Introduction and Overview

This study identifies awareness and practice that contributes to reducing missionary attrition related to the challenges of special needs in a cross-cultural context...[It seeks to] identify the expressed needs of these families thereby increasing service longevity and enabling them to thrive. The study included twelve cases where people, a mix of singles and families, attempted overseas ministry that was impacted by a special needs diagnosis...[examining] reasons which led to early repatriation or improved longevity of service.

“Should families dealing with the added stress of managing a special need, namely ASD, be sent overseas to serve, and if so, what criteria should be considered to ensure successful service?” While some families become attrition statistics, not all do, which led to the next question, “What is it that causes some special needs families to succeed in mission while others return home much earlier than expected?” Examining the stories of those who have survived the mission process while managing a special need gave insights into consistent practice that aids retention. Finally, when we do choose to send these families, I wondered, “What is it these special families have to offer the broader mission community, and how can we who send them, best support them for effective service?”

[It was] important to gather information from both the sending agencies, and the missionaries managing disabilities who have served with them in mission.

Part One of the dissertation includes information on special needs, especially ASDs; the impact of special needs on the mission team; pre-field challenges and appropriate training, and screening, placement and support concerns for the mission agency. Part Two describes the research methodology used, and Part Three draws some conclusions with recommendations.

Richey observes that a family with special needs children, such as those with an ASD, will have more extensive member care needs than other families. In addition the parents' capacity for work and ministry may be diminished. While this could add to the strain in a missionary team, demonstrating support and acceptance of those who are 'different' provides an invaluable example of Christ's love in host cultures where those with disabilities are hidden away or marginalised.

The educational support required for children with ASDs may be difficult or impossible to access. Staff shortages and a fast staff turnover rate at the local MK school make it difficult to provide both continuity and expertise.

Pre-assignment and on-field issues

Behavioural issues relating to a developmental disorder can be seen by others as a discipline issue. Parents may be blamed for poor management of their children, and the family may experience isolation even in a church context. Where an agency requires the family to visit other churches in order to fundraise, taking children with them to unfamiliar contexts can be very stressful and disruptive.

As many developmental disorders emerge gradually, young children may remain undiagnosed at this stage. When diagnosis occurs, the traumatic effect on the parents should not be under-estimated. There can be an acute sense of loss and bereavement of the expectation of having a 'normal' child. It is important for agency personnel to receive training in order to support their families, and to relate sensitively to the parents, partnering with them in all decision-making.

It is important to consider the needs of the children when placing families. Some environments may not be suitable for an ASD child, particularly if there is a high risk either of over exposure to an unsympathetic culture, or over stimulation due to sensory overload. Stability is crucial for families with autism, and planned changes need to be managed carefully.

Marital stress is generally higher than in non special needs families, and there should be an awareness of the need for support and care throughout the missionary experience.

For the child, an ASD will always result in an ongoing struggle with social skills. However, a loving, supportive environment such as that provided by a mission team can make all the difference. The shared value system of such a team provides stability, and other children of team members can often relate sympathetically to the ASD child if aspects of the condition are explained to them.

Research findings

Section Five of the dissertation sets out the findings from the research. The results are based on data from seventeen completed questionnaires returned by mission agencies, and twelve completed questionnaires from ASD-impacted families working with those agencies. The families were asked questions grouped under headings including family/self, work and ministry, diagnosis and treatment, support and pastoral care. Skype interviews were also conducted with some parents.

The respondents' passport countries were Australia, the UK, South Africa and the USA, and they served in locations in Africa, Europe, South Asia and the Far East. Seven out of the twelve experienced early repatriation as a consequence of coping with a child with an ASD.

All of the families needed access to specialists and support services, and all of them travelled to the passport country to access these. Sometimes help was also available on the field, but travel to a centre would still be required. Occasionally a specialist would be willing to visit a family *in situ*. The growth of Internet resources and development of communication technology in recent years now mean that resources and expertise can be accessed from anywhere in the world, but this is no substitute for face-to-face assessments.

Two families experienced stress as a result of being reassigned to different locations, sometimes several times. Team leaders need to be educated as to the impact this has on ASD children and seek to understand the difficulties involved.

Accurate diagnosis of ASDs can take a long time and it can be several years before a clear picture emerges. Initial parental concerns need to be supplemented by the observation and input of others around the family.

Sometimes a visit home for a child's assessment results in permanent re-entry. (The reviewer's perspective is that a fear of this happening can mean that some parents are reluctant to admit that there is a problem, as they do not want to leave their ministry.) Deanna suggests:

From a member care standpoint, formal diagnosis obtained in the presence of a well-established support system back home seems a favourable option. When redeploying, care should be given to listen to the individual family's desires, establishing a plan for ongoing support requirements with regular follow-up, and the appropriateness of their placement in conjunction with field leadership. The emotional trauma caused by unexpected permanent re-entry in these cases is much more complex when coupled with the added stress of disability and therefore should be monitored.

The emotional impact of a diagnosis may be wide-ranging. Deanna identified grief as the most common response, with a sense of being overwhelmed as a close second. Other significant emotional responses were anxiety, fear and confusion. Some respondents felt that their grief was disenfranchised.

The participants were asked to rank 13 difficult aspects of special needs in mission. Of these, the most significant was marital/family strain, followed by team support [or lack of it], access to services and lack of respite.

Marginalisation was a very significant theme.

...lack of understanding of team members and/or leadership in relation to their child's diagnosis was responsible for many negative experiences.

One respondent commented that

...the field personnel were not generally well-informed about ASD, and not inclined towards being informed.

And another that

... we were never really well-supported by fellow team-mates...

However, some teams were more supportive and responded well once they were given information about the condition. One respondent said that

....once the situation was better understood, there was good support. We did need to explain our son's special needs to new staff each year.

and another:

We put together a cover sheet for all of [our child's] classmates because we felt it was important for the kids to be able to talk to their parents about what autism is and to know more about [her.]

A further participant commented that

...the more people know, the better equipped they are to work with special needs.

Richey states that

...nearly all families noted that they feel the growing understanding of ASD is improving overall in mission compared to even ten years ago.

Recommendations

- *Greater education is needed in order to equip sending and receiving agency workers who are unfamiliar with the diagnosis of autism spectrum disorders.*
- *There was an expressed desire by sending offices to obtain reliable information about overseas placement and support options for potential missionary candidates with special needs.... There was also a desire to be able to respond and know how to provide support when diagnosis occurs mid-service.*
- *Survey responses from individuals revealed a possible lack of willingness by leadership on some fields to be open to or embrace education in, awareness of, and support for, special needs. This was attributed to decreased capacity, team dysfunction, and/or low prioritization. This was recognised to be a contributing factor for attrition...*
- *Limited access to support resources on the field of service was noted by most respondents, and this often resulted in a need to return home in order to receive formal diagnosis and subsequent*

treatment plans. The prescribed treatment plan barred a return to the field for some workers, while others returned equipped to manage their child's needs while continuing effective overseas service. In some cases, the decision to stay or return was a personal choice, but in others, the choice was made by the agency, with little or no regard for the individual, in response to the expressed concerns of the field.

- *All research participants reported experiencing some level of marginalisation from a variety of sources, including: people within their country of origin, schools (at home and overseas), some churches, fellow teammates, agency administration, fellow expats, and more rarely individuals in their host culture despite the fact that indigenous special needs children were often marginalised within their society*
- *The research revealed that the mission context fails to stop and sufficiently consider the struggles faced by those with developmental disabilities and occasionally openly rejects those whom they may not understand or perceive to require too much effort. This is certainly not the majority view, but there continues to be a need for education and sensitivity training for all workers preparing to go into mission and possibly to challenge the task-focused emphasis in mission that may contribute to this. The role of the member care profession may be to help incorporate this into our pre-field preparation processes.*
- *While all families reported ...significant stress related to their experience of dealing with special needs, the majority of workers were able to find encouragement and support on their fields of service. It was noted, however, that intentional ongoing member care ... was often lacking. This was supplemented successfully for several, by relationships outside of their immediate field team, and often included supportive friendships amongst locals, missionary workers from other agencies, and from visiting professionals. Overall, families coped well despite the strain of increased stress, with no report of ongoing significant dysfunction that was directly tied to managing with disability.*
- *A designated pastoral carer on the field team would be [the best way of providing] support during times of significant emotional impact... Additionally, timely member care intervention which offers counselling support, would [be helpful]. This was confirmed by those who reported experiencing significant understanding, support and guidance by member care workers upon their return home. More intentional efforts [are needed to] see this happen on the field...*
- *Finally we must assess the benefits of embracing a robust theology of suffering when making decisions to send workers who we believe will face the known challenges of special needs and ASD in a mission setting. Each case must be handled with the individuality it deserves, seeking to find suitable placements that will best accommodate the family's needs [and the capacity of the team].*

Feedback

Readers are invited to give feedback to the above article and to contribute their own experiences, insights or questions about the important subject of recruiting and supporting families with an ASD child. Please contact us at mk_tck@yahoo.co.uk

Gill Bryant (with thanks to Deanna Richey)

Educare is a free e-magazine geared for third culture families, the organisations that send them and any other supporting groups or individuals. It can be forwarded on freely, but please check first with the receiver. It is a ministry of WEC International; a mission agency committed to reaching unreached people groups across the world.