

# TOWARD A PASTORAL THEOLOGY OF TRAUMA

by

Janet May Howden, B.A., M.T.S.

A thesis submitted to  
the Faculty of McMaster Divinity College  
in partial fulfillment of the requirements  
for the degree of Masters of Arts (Christian Studies)

McMaster Divinity College  
Hamilton, Ontario  
2015

Master of Arts  
Hamilton, Ontario

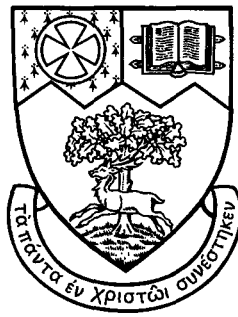
McMASTER DIVINITY COLLEGE

TITLE:                      Toward a Pastoral Theology of Trauma

AUTHOR:                 Janet May Howden

SUPERVISOR:           Dr. Phil Zylla

NUMBER OF PAGES:    vii + 141



## McMASTER DIVINITY COLLEGE

Upon the recommendation of an oral examining committee,

this thesis by

**Janet May Howden**

is hereby accepted in partial fulfillment of the requirements for the degree of

**Master of Arts (Christian Studies)**

Primary Supervisor: \_\_\_\_\_

Phil C. Zylla, D.Th.

Secondary Supervisor: \_\_\_\_\_

Lee Beach, Ph.D.

Academic Dean Designate: \_\_\_\_\_

Mark J. Boda, Ph.D.

Date: March 31, 2015

## ABSTRACT

### “Towards a Pastoral Theology of Trauma”

Janet May Howden  
McMaster Divinity College  
Hamilton, Ontario  
Master of Arts, 2015

Trauma is a devastating consequence that affects the human identity resulting in the shattering of basic trust in oneself, others, and God. Often people suffering the effects of trauma turn to the Christian community for answers and assistance. Through understanding how trauma affects a person the Christian community is better equipped to walk along side those who are in the recovery process. Compassion creates a safe place for an individual to reveal the depths of emotional pain. The attribute of resilience enables the traumatized individual to continue moving through the recovery process. Six narratives were examined using constructive narrative theology as the methodology. From weaving these narratives together it became apparent that the Christian community can best aid a traumatized person by listening to their story, entering into their lament, drawing out their metaphorical and symbolic language, lifting them up in prayer, and leaving them in God’s hands.

## ACKNOWLEDGEMENTS

Completing a work of this nature involves many people, both directly and indirectly. I would like to take this opportunity to express my appreciation for their encouragement and support as I journeyed along each step of the process.

Thank you to McMaster Divinity College and all the committed professors for the opportunity to study and learn more about Jesus Christ and the Church. Thank you to the staff for all their assistance.

Thank you to my first reader Dr. Phil Zylla, for believing in my ability to complete this task long before I did. His patience and mercy were tremendous assets.

Thank you to my second reader Dr. Lee Beach, for his willingness to be involved in the final stages of this process.

Thank you to my friends who listened, inquired, and prayed that I would keep moving forward during the completion of this thesis. A special thanks goes to Leslie Makins and Caroline Cutler, fellow students and thesis buddies, who shared the burden through the gift of laughter and companionship in the wee hours of the night.

Thank you to my family for their encouragement and prayers throughout the journey. I am grateful for their support and willingness to endure my nose in books and the computer for hours on end.

Most of all, I desire to acknowledge and thank my friend and saviour Jesus Christ, who gave me the strength to continue to move forward until I reached the end of my goal.

## TABLE OF CONTENTS

CHAPTER ONE: Experiences of Trauma—A Theoretical Framework	
1.1. Introduction .....	1
1.2. Definitions and Concepts of Trauma .....	6
1.3. An Overview of the History of the Study of Trauma .....	11
1.4. Research Methodology .....	14
1.5. Types of Emotional Trauma .....	17
1.5.1. Displacement Trauma .....	18
1.5.2. Identity Trauma .....	21
1.5.3. Traumatic Loss .....	23
1.6. Conclusions .....	26
CHAPTER TWO: Identity Formation	
2.1 Introduction .....	27
2.2 Identity versus Self .....	28
2.3 The Formation of a Healthy Identity .....	33
2.4 True Self versus False Self .....	41
2.5 Spiritual Growth and Faith in God .....	47
2.6 Conclusions .....	52
CHAPTER THREE: Exploring Displacement Trauma and Components for Recovery	
3.1 Introduction .....	53
3.2 Components for Recovery.....	53
3.3 Displacement Trauma .....	59
3.4 A Creative Reflection of the Displacement Trauma Narratives .....	72
3.5 Conclusions .....	74
CHAPTER FOUR: Exploring Identity Trauma and Traumatic Loss	
4.1 Introduction .....	76
4.2 Identity Trauma .....	76
4.3 A Creative Reflection of the Identity Trauma Narratives .....	92
4.4 Traumatic Loss .....	94
4.5 A Creative Reflection of the Traumatic Loss Narratives .....	106
4.6 Conclusions .....	107
CHAPTER FIVE: Toward a Pastoral Theology of Trauma	
5.1 Introduction .....	109
5.2 Review of Herman's 3 Stages of Recovery.....	109
5.3 An Overview of McBride's Trauma Recovery .....	115
5.4 Five Movements of Emotional Trauma Recovery .....	119
5.5 Strength and Weaknesses .....	127
5.6 Summary and Conclusions .....	129
APPENDIX 1 .....	132
BIBLIOGRAPHY .....	133

## **Chapter 1: Experiences of Trauma—A Theoretical Framework**

### **1.1 Introduction**

Emotional trauma is an uninvited experience that affects individuals regardless of age, gender, race, or religious affiliation. A traumatic event has the ability to shatter a person's identity, creating instability on an emotional, psychological, spiritual, and/or physical level.<sup>1</sup> Documentation reveals that the outcome of a traumatic event can leave an individual feeling "disconnect[ed] from self, others and God."<sup>2</sup> Experiences of trauma occur frequently, with research indicating "at least 60% of men and 51% of women report experiencing at least one traumatic event in their lives."<sup>3</sup> The restoration process is characteristically arduous and complex making recovery difficult.

Those within the Christian community who have been traumatized emotionally often turn to others within their community for emotional and spiritual support during the recovery process.<sup>4</sup> Even individuals who do not normally profess a faith in God sometimes turn to the Christian community for support after experiencing a traumatic event.<sup>5</sup> When one's faith is being shaken, even if that faith is not in God "a supporting, nurturing environment may be the only thing that holds it together."<sup>6</sup> Yet, according to theologian Lynn Bridgers, the ecclesial response has often been to refer individuals to mental health practitioners, psychologists, psychiatrists, or therapists.<sup>7</sup> Bridgers believes that the Christian community "fails to respond effectively or even directly to those most

---

<sup>1</sup> McBride, *Spiritual Crisis*, 2–3.

<sup>2</sup> Herman, *Trauma and Recovery*, 56.

<sup>3</sup> D'Andrea et al., "Physical Health Problems After Single Trauma Exposure," 378.

<sup>4</sup> Glenn, "A Bridge Over Troubled Waters," 45.

The terms "recovery" and "healing" are often used interchangeably in the Christian community. For the purpose of this thesis the term "recovery" will be used almost exclusively to denote that it is a process one goes through.

<sup>5</sup> McBride, *Spiritual Crisis*, 76.

<sup>6</sup> McBride, *Spiritual Crisis*, 77.

<sup>7</sup> Bridgers, "The Resurrected Life," 38.

in need of faith, hope, or human connection.”<sup>8</sup> The Christian community fails to respond to traumatized individuals often due to lack of knowledge concerning the effects of trauma as well as the lack of knowledge concerning the aids currently available within the ecclesial community to help traumatized individuals.

In *Mighty Stories, Dangerous Rituals*, practical theologians Herbert Anderson and Edward Foley describe how individuals turn to their community to share life experiences through narratives to create “shared meaning” which helps to process a traumatic event.<sup>9</sup> North America witnessed this first hand during the days following the Sandy Hook Elementary School shootings in Newtown, Connecticut. On December 14, 2012 a young man shot and killed twenty children and six adult staff members at this school. North America went into shock over the horror of such an atrocity. For many their way of coping with the trauma was to sit in one of Newtown’s churches seeking solace and answers to an event that made no sense.

While many ministers desire to help individuals once again flourish after experiencing a trauma, the reality is that most ministers “have received very little training in seminary” to know how to support people during their recovery process.<sup>10</sup> In *Spirit and Trauma*, Shelly Rambo recounts Deacon Lee’s story of struggling spiritually after hurricane Katrina destroyed his property in New Orleans. Lee found the religious community failed to allow sufficient time to work through emotions—after all life would never be the same again. Instead, those seeking to help Lee impatiently rushed past the reality of the trauma to talk about the power of the gospel.<sup>11</sup>

---

<sup>8</sup> Bridgers, “The Resurrected Life,” 38.

<sup>9</sup> Anderson and Foley, *Mighty Stories, Dangerous Rituals*, 7.

<sup>10</sup> Lyon, “The Spiritual Implications,” 240.

<sup>11</sup> Rambo, *Spirit and Trauma*, 2–3.



Unfortunately, those seeking help often have a similar experience, resulting in disillusionment with the ecclesial community.<sup>12</sup> Those offering help frequently become discouraged as well due to the absence of sufficient understanding and training concerning the dynamics of trauma.<sup>13</sup> Both parties would benefit from more education concerning the effects of emotional trauma on individuals, as well as learning skills to aid in the recovery process.

When traumatized Christians seek support outside of the church they often encounter obstacles there as well. For example, those who want to include spiritual elements such as prayer or scripture reading in their trauma recovery often find the secular counsellor is not familiar with these spiritual elements. Another deterrent for those seeking help outside of the church is the costly fees private counsellors charge. Some insurance companies will cover a portion of the fee but often only for a designated number of sessions. The Christian community has the ability to assist individuals to locate their personal story of trauma and weave it in with the sacred text resulting in sifting out of the meanings, the redemptive agency, and the implications of the gospel for their lives.

Traumatized individuals need to know that God's love is constant and available even when there are feelings of disconnectedness from one's self, others, and God. The reality is that "the broken and weary find comfort in the presence of Christ."<sup>14</sup> The constancy of God's love is conveyed through the compassionate actions of the Christian

---

<sup>12</sup> Bridgers echoes the words of many other authors and counselors, that far too often traumatized individuals "seek comfort and meaning in the church, but are left deeply disappointed by the response" ("The Resurrected Life," 38).

<sup>13</sup> Bridgers verifies that the church has traditionally "offered various responses to human suffering, but there have been few significant changes in pastoral care in light of what is now almost three decades of development in the field of traumatic studies. ("The Resurrected Life," 40).

<sup>14</sup> McMinn, *Psychology, Theology, and Spirituality*, 95.

community. Considering the aforementioned, the Christian community is left with important questions to consider: How does trauma affect individuals? How can the local congregation assist the traumatized to flourish once again? What pastoral knowledge is required to aid a person in his or her recovery process? What role does faith play in the recovery process? This thesis will attempt to answer the above questions.

Chapter I will explore specific aspects of emotional trauma such as; defining trauma, neuroscience of trauma, factors influencing emotional response to trauma, and the history of the study of trauma. This chapter will also examine three specific types of trauma; *displacement trauma*, *identity trauma*, and *traumatic loss*. A biblical and contemporary narrative will be discussed briefly in the section on the types of trauma. The premise of this thesis is that emotional trauma has the potential to adversely affect the stability of an individual's identity. As such, establishing a means of restoring the traumatized identity is imperative.

Chapter 2 will present information regarding the formation of a healthy identity. First, the concepts of identity, self, and the *imago dei* will be briefly examined. Then, three theorists of personality development, Freud, Jung, and Erikson will be considered to aid in understanding the development of a healthy identity. Chapter 2 will also consider the formation of a False Self due to trauma. This concept comes from Donald W. Winnicott's extensive research of the mother-infant dyad. According to Winnicott, when trauma occurs a False Self is formed to function as a shield protecting the traumatized identity from further trauma.<sup>15</sup> The chapter will conclude by briefly examining Fowler's theory of faith development.

---

<sup>15</sup> Winnicott, *The Maturation Processes*, 144.

Chapter 3 will explore the components for recovery as well as displacement trauma. The components for recovery are compassion, resilience, and posttraumatic growth. This chapter will reveal how compassion from the caring community of faith can model the constancy of God's love, through a willingness to remain in relationship for the duration of the recovery process. Compassion is one of the keys to unlock the protective shield from around the False Self.<sup>16</sup> Compassion from the caring Christian community creates a metaphorical holding environment, which enhances the recovery process. The topic of resilience will also be discussed, as it is one of the primary elements traumatized individuals require to work through the process of recovery. Exploring the above topics will reveal how the Christian community can assist those who have experienced emotional trauma. The concept of displacement trauma will also be explored in this chapter. Two narratives depicting displacement trauma, one biblical and one contemporary, will be woven together to discover the deeper magnitude of human experiences within the two stories.

Chapter 4 will explore identity trauma and traumatic loss. Again, biblical and contemporary narratives depicting the two types of trauma will be examined and woven together for creative reflection upon the similarities and discontinuities. Attention will be placed on discovering if and where trauma, compassion, resilience, and posttraumatic growth are evident.

Chapter 5 will explore how the Christian community can assist those who have been traumatized. Two models of recovery will be examined briefly: Herman's three stages of recovery and McBride's eight phases of recovery. The "Five Movements of

---

<sup>16</sup> Winnicott, *The Maturation Processes*, 146. In Winnicott's material the term compassion is not used directly but it is in essence what an emotionally healthy mother displays toward her infant.

Emotional Trauma Recovery” will be examined in greater detail. These movements entail: listening, lamenting, learning symbolic and metaphorical language, lifting one up in prayer, and leaving one in God’s care.<sup>17</sup> Material from the six narratives explored in chapters 3 and 4 will be drawn into each of the five movements. Attention will be on how these movements aid in cultivating caring faith communities, also known as holding environments.

## 1.2 Definitions and Concepts of Trauma

The first section of chapter 1 creates a framework that briefly explains emotional trauma. This framework consists of definitions and concepts of trauma, followed by a brief history of the study of trauma. The next section will focus on the research methodology for this thesis, which is constructive narrative theology. The final section of this chapter will outline three types of emotional trauma: *displacement trauma*, *identity trauma*, and *traumatic loss*. To illustrate each specific type of trauma three biblical narratives and three contemporary narratives will be reviewed.

### 1.2.1 Trauma Defined

The form of trauma addressed in this thesis is classified as *emotional* and/or *psychological trauma*. These two terms are used interchangeably in the research data but for this thesis the term *emotional trauma* will be used almost exclusively.<sup>18</sup>

The dictionary defines trauma as “a very difficult or unpleasant experience that causes someone to have mental or emotional problems usually for a long time.”<sup>19</sup> Bessel

---

<sup>17</sup> The movements of emotional trauma recovery consist of material drawn from “*Compassion*”, “*Reaching Out*”, and “*Wounded Healer*” by Nouwen, “*Suffering*” by Soelle, and “Using Therapeutic Metaphor” by Marty Bibits.

<sup>18</sup> The term “emotional trauma” is being used throughout this project instead of “psychological trauma” as this thesis comes under the umbrella of pastoral theology.

<sup>19</sup> Merriam-Webster Dictionary, “Trauma,” No pages.

van der Kolk defines trauma as "...the loss of faith that there is order and continuity in life. Trauma occurs when one loses the sense of having a safe place to retreat within or outside oneself to deal with frightening emotions and experiences."<sup>20</sup> Van der Kolk sees trauma as "an inescapably stressful event that overwhelms people's coping mechanisms."<sup>21</sup> Research indicates that traumatic events can cause "a loss of a sense of self, a breakdown in normal knowing and feeling, and a paralyzing lack of agency in the threat of the harm suffered."<sup>22</sup> Rambo states that, "Trauma is distinguished from other experiences of suffering in that a person's capacity to respond to and integrate the experience is severely impaired."<sup>23</sup>

Louis Cozolino explains why a traumatic experience is not easily integrated, by looking in the field of neuroscience. When a manageable event occurs, the hippocampus and cerebral cortex regions of the brain compare the new event with past events.<sup>24</sup> The ability to compare the current event with past events allows an orientation to time and space resulting in the memory being stored in the "explicit memory," which can be easily recalled. However, when a traumatic event occurs the brain becomes overwhelmed with fear and blocks the hippocampus.<sup>25</sup> When this occurs the traumatic memories are stored in the "implicit memory" which is "processed by the limbic system and stored in the body along with the unprocessed emotions."<sup>26</sup> The failure to integrate the traumatic experience, according to neuroscientist Joseph LeDoux, is due to two neural processes:

---

<sup>20</sup> Van der Kolk, *Psychological Trauma*, 31.

<sup>21</sup> Van der Kolk et al., *Traumatic Stress*, 279.

<sup>22</sup> Jones, *Trauma and Grace*, 15.

<sup>23</sup> Rambo, *Spirit and Trauma*, 18.

<sup>24</sup> Lyon, "The Spiritual Implications," 238.

<sup>25</sup> Lyon, "The Spiritual Implications," 238.

<sup>26</sup> Lyon, "The Spiritual Implications," 238; Implicit memory is also known as "procedural" memory which is where the mind stores the "memories of skills and habits, emotional responses, reflexive actions, and classically conditioned responses," (Van der Kolk, *Traumatic Stress*, 281).

“one system is associated with the amygdala which is involved with regulating the emotional systems of the body,” and the “hippocampus and cerebral cortex . . . assesses the signals it receives from the amygdala’s crisis-level response.”<sup>27</sup>

Memories stored in the implicit memory are not easy to recall due to being stored in a section of the brain where there is no language.<sup>28</sup> The problem with this storage system is that when a traumatized individual is “triggered” by something that is similar to his or her trauma, the implicit traumatic memory surfaces uninvited.<sup>29</sup> Since the emotions connected to the implicit memory were not processed through the hippocampus, when the individual is triggered, the emotions are at the same level of intensity as when the trauma originally occurred.<sup>30</sup> Therefore understanding and compassion from the Christian community are needed when the memory is recalled for the emotions create the sensation implying that the event just occurred.<sup>31</sup>

Cozolino studied traumatized individuals and discovered the neurons in the brain had changed due to trauma.<sup>32</sup> The change in the neurons remained into adulthood resulting in ongoing residual effect in adults due to childhood trauma. At first researchers believed that the adult brain of a traumatized individual was incapable of changing, thus creating a lack of hope.<sup>33</sup> However, further research discovered that the plasticity of the brain was capable of changing in every stage of life.

In the 1960s additional research was done to determine what would encourage the change in the neural stem cells. After rats were placed in an “enriched environment”

---

<sup>27</sup> LeDoux, “Emotions,” 57.

<sup>28</sup> Lyon, “The Spiritual Implications,” 238.

<sup>29</sup> Lyon, “The Spiritual Implications,” 238.

<sup>30</sup> Lyon, “The Spiritual Implications,” 238.

<sup>31</sup> Lyon, “The Spiritual Implications,” 238.

<sup>32</sup> Cozolino, *The Neuroscience of Psychotherapy*, 26.

<sup>33</sup> Lyon, “The Spiritual Implications,” 237.

which consisted of being handled frequently by human beings and given toys and mazes in which to interact, the rats were able to solve more complex problems and their brains were five percent heavier than other rats who had remained isolated in cages.<sup>34</sup> Then in the 1990s further research was done which revealed that when rats were given the freedom to play on running wheels for as long as they desired, twice as many neural stem cells were generated.<sup>35</sup>

LeDoux deduced from this research that an “enriched environment” along with moderate levels of stress could produce a release of neurohormones to assist in the recovery process for human beings who had been traumatized.<sup>36</sup> Cozolino believes that there is one setting, which is ideal for creating a moderate level of stress in an enriched environment to aid in trauma recovery—voluntary involvement in psychotherapy.<sup>37</sup> Cozolino proposes that four elements are necessary to create an enriched environment: (1) The establishment of a safe and trusting relationship; (2) mild to moderate levels of stress; (3) activating both emotion and cognition; (4) the co-construction of new personal narratives.<sup>38</sup>

The Christian community also creates a type of enriched environment, which Winnicott refers to as *the holding environment*. This thesis will argue that Winnicott’s holding environment is experienced through the emotional connection with other human beings, and the freedom to express emotions through sharing of narratives. Experiencing an enriched environment results in personal emotional and spiritual growth. Emotional

---

<sup>34</sup> LeDoux, “Emotions,” 57.

<sup>35</sup> LeDoux, “Emotions,” 57.

<sup>36</sup> Lyon, “The Spiritual Implications,” 238.

<sup>37</sup> Cozolino, *The Neuroscience of Psychotherapy*, 26.

<sup>38</sup> Cozolino, *The Neuroscience of Psychotherapy*, 26.

trauma affects the body, mind, and soul of an individual—therefore, all three aspects need to be considered when doing recovery work.

### **1.2.2 Factors Influencing Emotional Response to Trauma**

An emotional response to a traumatic event is influenced by a myriad of factors that are unique to each individual circumstance.<sup>39</sup> An important aspect in assisting traumatized individuals is to understand the various factors that influence the emotional response toward trauma. Due to the complexity of each human being and the factors influencing the response, what is a healthy response for one individual may be a very unhealthy response for another. When dealing with trauma recovery, one of the difficulties is the uniqueness of individuals. Therefore, individuals cannot be expected to fit one specific pattern or mold. An individual's personal needs and experiences must be considered to ensure successful recovery.<sup>40</sup>

In *Treatment of Complicated Mourning*, Therese Rando outlines numerous factors which influence one's emotional response to loss: age, level of maturity, and intelligence of the traumatized individual; the quality of the relationship between the traumatized individual and the other party; and the number of previous stresses.<sup>41</sup> These factors can also be applied to emotional trauma. Since trauma always involves some degree of loss, this must also be included as a factor influencing emotional responses to trauma.<sup>42</sup> All of the above elements will affect how the traumatized individual responds to a traumatic event.

---

<sup>39</sup> Rando, *Treatment of Complicated Mourning*, 30.

<sup>40</sup> Rando, *Treatment of Complicated Mourning*, 30.

<sup>41</sup> Rando, *Treatment of Complicated Mourning*, 30.

<sup>42</sup> Rando, *Treatment of Complicated Mourning*, 31–32.



Understanding the history of the study of trauma enhances one's perception regarding the factors concerning trauma recovery. The following section will outline a brief history of trauma studies.

### **1.3 An Overview of the History of the Study of Trauma**

The history of the study of emotional trauma is quite expansive. However, due to limitations in size and scope, an overview of only four major movements in the study of emotional trauma will be looked at: women and hysteria in the late 19<sup>th</sup> century, traumatized individuals during World War I, trauma as a result of the Vietnam War, and trauma uncovered by the Women's Liberation Movement associated with domestic violence and sexual abuse.

The first movement in the study of emotional trauma began in the late nineteenth century in France with the neurologist Jean–Martin Charcot regarding women suffering from hysteria.<sup>43</sup> Pierre Janet, William James, and Sigmund Freud all received training from Charcot on the subject of hysteria and trauma. By the mid 1880s Freud came to the conclusion that hysteria was caused by emotional trauma.<sup>44</sup> It was discovered that hysteria could be treated effectively when the details and the emotions of the traumatic memories were verbalized. Freud coined this practice *psychoanalysis*.<sup>45</sup>

The second movement was due to the effects of World War I on the soldiers, which caused the psychologists of the time to acknowledge the reality of emotional trauma once again. During the early 1900s the term “combat neurosis” was coined to describe a soldier's reaction to combat through displays of mutism, paralysis, and

---

<sup>43</sup> Herman, *Trauma and Recovery*, 11; Hunter, *Dictionary of Pastoral Care*, Hunter believes that “a person suffering with hysteria lives with a great deal of anxiety and often exhibits physical symptomology for which no physiological etiology could be established.” (*Dictionary of Pastoral Care*, 445).

<sup>44</sup> Freud, *A Case of Hysteria*, xxii..

<sup>45</sup> Freud, *The Basic Writings of Sigmund Freud*, 160.

outbursts of crying.<sup>46</sup> It was traditionally viewed that soldiers were to be emotionally strong and not exhibit any sign of emotion. According to Canadian psychologist Lewis Yealland, men who displayed the above symptoms were simply demonstrating moral weakness and therefore, should be coerced back to the combat zone.<sup>47</sup>

Contrary to Yealland, Freud endorsed psychotherapy, a more progressive form of treatment. He believed that a soldier's emotional outburst was much more than a matter of moral character—these men were truly suffering from a psychological condition.<sup>48</sup> Through his work, other psychologists began to understand that trauma affected time, specifically, that past memories were being catapulted into the present through flashbacks and dreams.<sup>49</sup> W.H.R. Rivers (1864–1922) an English physician, introduced a new form of psychotherapy that extended dignity and respect to the soldiers suffering from combat neurosis.<sup>50</sup> Soldiers were encouraged to use multiple forms of expression (e.g., talking, writing, drawing) in order to release the traumatic events stored deep within their psyche. Psychotherapy treatment began to change as a result of River's methods.<sup>51</sup>

The third movement to impact the study of emotional trauma was the Vietnam War. United States veterans formed groups to provide a safe environment where soldiers could share their stories and give comfort to one another.<sup>52</sup> In the mid 1970s the term post-traumatic stress disorder (PTSD) was coined in recognition that psychological

---

<sup>46</sup> Herman, *Trauma and Recovery*, 20, 24–25.

<sup>47</sup> Yealland achieved his objective through threatening soldiers with inhuman medical threatment such as electric shock to their vocal cords until they talked (*Hysterical Disorders of War*, 12).

<sup>48</sup> Ferenczi et al., *Psycho-Analysis and the War Neuroses*, " 2–3.

<sup>49</sup> Freud, *Beyond the Pleasure Principle*, 407.

<sup>50</sup> Herman, *Trauma and Recovery*, 22.

<sup>51</sup> Herman, *Trauma and Recovery*, 25.

<sup>52</sup> Herman, *Trauma and Recovery*, 27.

trauma was an inevitable outcome of war that affected soldiers for extended periods of time throughout their lives.<sup>53</sup>

The fourth advancement in the study of emotional trauma came out of the women's liberation movement in the 1970s. It was during this time that researchers "recognized that the most common post-traumatic disorders are those not of men in war but of women in civilian life."<sup>54</sup> In a society dominated by educated white males, women rose up to expose the prevalence and destructiveness of domestic abuse.<sup>55</sup> Their efforts brought the study of emotional trauma back into the forefront for women once again.<sup>56</sup>

Yet, even with in-depth trauma studies and the validation of PTSD through the Diagnostic and Statistical Manual (DSM-III) in 1990, there remained a lack of understanding and information for those assisting the traumatized. The Christian community has followed in the footsteps of society, for there have been "few significant changes in pastoral care in light of what is now almost three decades of development in the field of traumatic studies."<sup>57</sup> The Christian community needs a more comprehensive understanding of the effects of trauma to effectively assist traumatized individuals seeking help.

---

<sup>53</sup> Herman, *Trauma and Recovery*, 27; According to van der Kolk two of the main characteristics of PTSD are the mind continually replaying the memory while the body relives the event through the corresponding emotions. Some of the symptoms of PTSD are: hyperarousal, hyper-reactivity to events that bring up the memories of the trauma, as well as avoidance and emotional numbing ("Approaches to the Treatment of PTSD," 1,3).

<sup>54</sup> Herman, *Trauma and Recovery*, 28.

<sup>55</sup> Schechter, *Women and Male Violence*, 23.

<sup>56</sup> Herman, *Trauma and Recovery*, 28–32.

<sup>57</sup> Bridgers, "The Resurrected Life," 40.

### 1.4 Research Methodology: Constructive Narrative Theology

Constructive narrative theology begins with the premise that all stories have creative power to “forge an authentic witness”<sup>58</sup> of God’s actions in our lives. The tendency to separate the sacred from the mundane may be rooted in the expectation that only canonical biblical texts can bear witness to God’s actions. However, the constructive narrative theological approach to theological reflection actually merges God’s story with our stories – allowing deeper insights to emerge regarding the important experiences that happen in our lives and in our communities of faith. This thesis recognizes that it is important, in pastoral theology, to encourage people to tell their stories and relate these stories with the sacred text of scripture. Anderson and Foley, key advocates of this methodology of theological reflection, call this interplay between sacred text and human stories, “weaving”—a process of integrating our own experiences of God with the redemptive stories of God’s action in history recorded in the bible. They state, “When we are willing to admit the possibility of God’s presence in ordinary human events we will be more likely to fashion our human narratives—composed of many such events—in the light of that presence.”<sup>59</sup> These practical theologians are convinced that such *weaving* of narratives will have a profound effect on how faith communities think about God’s action in their own context. The personal growth, transformation, and generative healing that comes from the expression of our stories as they critically engage scripture offers persons in faith communities a path for reconciliation and healing. As pastoral theologian Donald

---

<sup>58</sup> Elaine Graham et. al., *Theological Reflection: Methods*, 49.

<sup>59</sup> Herbert Anderson and Edward Foley, *Mighty Stories, Dangerous Rituals*, 40.

Capps states, "...there is a fundamental need for systematic attention to the ways that we story our experiences so that new understandings of our situation may occur."<sup>60</sup>

This thesis seeks to employ this methodology by linking human accounts of traumatic experiences with biblical accounts that share in common the traumatic elements embedded in those stories. Anderson and Foley recognize that when it comes to traumatic experiences, the challenges of developing a coherent story need to be accounted for. As they state in their work, "It is still difficult to fashion stories that include the presence of abuse or violence in human life without camouflaging evil or promoting premature reconciliation."<sup>61</sup> Not all stories are redemptive or even comprehensible even to those who have gone through the traumatic experiences. For this reason, this thesis will concentrate on narratives where there has been a degree of trauma, but not to the extent that the experiences are clouded by fragmented memory or broken stories. There are elements of constructive narrative theology that require further development in order to engage these more severe traumatic experiences. As Elaine Graham et al, state,

The unease that Anderson and Foley express about bringing some human experiences into close conjunction with the divine story leads us to acknowledge a serious problem that faces constructive narrative theologians when they seek to weave together the sacred tradition and contemporary life narratives.<sup>62</sup>

Having acknowledged some of the limitations of this methodology, there is still much promise to this approach to theological reflection and the narratives that will be explored in this thesis. The weaving of narratives as employed in this thesis, seeks to move beyond comparison or sermonic illustration to employ what Rowan Williams refers to as the testimony or manifestation of an alternate vision that comes from the creative

---

<sup>60</sup> Donald Capps, *Living Stories*, 202.

<sup>61</sup> Herbert Anderson and Edward Foley, *Mighty Stories, Dangerous Rituals*, 148.

<sup>62</sup> Elaine Graham, et. al., *Theological Reflection: Methods*, 70.

interplay of the text and the human story. Commenting on Paul Ricoeur's approach to texts Williams states, "It [the text] displays a possible world, a reality in which my human reality can find itself, and in inviting me into its world the text breaks open and extends my possibilities."<sup>63</sup> This thesis will aim to reveal the deeper dimensions of human experiences through intentional engagement with biblical texts that bear a close proximity to such experiences. By weaving the biblical (sacred) text and the human stories portrayed in the various accounts this thesis hopes to contribute to the pastoral intervention of those who are traumatized by similar situations. The pastoral implications of these reflections will be drawn out and expanded for the caring community to come alongside those who have such experiences in the church.

In order for this methodology to function at this level the 'weaving' of the text with the human account will need to be a creative reflection. That is why this methodology is considered in pastoral theology under the rubric of theological reflection. Constructive narrative theology is a particular type of theologizing that takes seriously the experiences of people as they are expressed and weaving those with the biblical witness. Such a task calls for a creative pause with each narrative. Very often pastors and pastoral counselors will use scripture to support persons in their disorientation by life's challenges. This methodology goes beyond this illustrative or comparative approach by examining how the experiences and the sacred texts might inform each other. In this way constructive narrative theology can be understood as a *critical correlational method* of pastoral theology.<sup>64</sup>

---

<sup>63</sup> Rowan Williams, 'On Ricoeur', *Modern Theology*, 2 (3), 199.

<sup>64</sup> Swinton and Mowatt, in *Practical Theology* state, "...David Tracy (1975) expanded the critical dimension of Tillich's [correlational] model and incorporated a dialectical element which enabled the

The primary contribution of this thesis is to explore the usefulness of the constructive narrative approach to theological reflection for pastoral theology. Rather than simply articulating stories by using therapeutic intervention, the constructive narrative approach has the promise of cultivating caring faith communities<sup>65</sup> (holding environments) that will allow persons not only to tell their story but to help them sift out the meanings, the redemptive agency, and the implications of the gospel for our lives. The final aim of this thesis is to contribute, by creative reflection on three key biblical texts and corresponding stories, to the advancement of compassion in the life of our faith communities.

### 1.5 Types of Emotional Trauma

In the past, emotional trauma work focused primarily on those who had suffered trauma due to severe incidents such as war, physical or sexual abuse, life-threatening accidents, and natural or man-made disasters. This thesis intends to take emotional trauma work in a slightly different direction by addressing isolated events of emotional trauma that are less extreme in nature yet occur more frequently in life: for example; leaving a church due to interpersonal conflicts, infertility, or the death of an adult sibling.<sup>66</sup>

The above events are examples of specific types of emotional trauma namely *displacement trauma, identity trauma, and traumatic loss*. A brief overview of one biblical and one contemporary narrative will be used to help illustrate each specific type

---

correlation between scripture, tradition, experience and reason to be mutually correlative and critical.” (emphasis theirs, 79).

<sup>65</sup> Donald Capps argues convincingly that the community of faith is the forum within which the ‘living stories’ are recounted and interpreted. He states, “Much of this new literature [storytelling in family therapy] can be very useful to the pastor for pastoral counseling purposes, especially in clarifying what it means to say that pastoral counseling in the congregational context involves locating personal stories within a constructive interpretive framework.”, (*Living Stories*, 20).

<sup>66</sup> These three specific examples are traumas that are less severe in nature yet they frequently occur in life.

of trauma. These six narratives will be addressed in greater detail in chapters 3 and 4, revealing the concepts of trauma, compassion, resilience, and posttraumatic growth.

### 1.5.1 Displacement Trauma

The definition for *displacement trauma* being used for this thesis is: “the sudden or unexpected removal of an individual or a people group from a position of authority or relationship.”<sup>67</sup> Individuals who experience the above lose “the sense of having a safe place to retreat within or outside oneself to deal with frightening emotions and experiences.”<sup>68</sup> Throughout history people groups as well as individuals have suffered physically, emotionally, psychologically and spiritually from being displaced. There are various reasons why displacement occurs, ranging from natural disasters or political unrest forcing individuals from their homes and communities, to interpersonal conflicts between family members or friends resulting in the termination of meaningful relationships.

The opposite of displacement is belonging or inclusion. God created human beings to exist within the confines of social interaction.<sup>69</sup> The main form of social interaction for those who believe in the triune God is the Christian community, found often but not exclusively, within the local church.<sup>70</sup> When a person believes in God and his son Jesus Christ a “covenant with God in Christ”<sup>71</sup> is formed as well as a “covenantal relationship”<sup>72</sup> with others who profess to be Christians. Becoming a member of a

---

<sup>67</sup> Merriam-Webster Dictionary, The word displacement comes from the root word ‘displace’ which is defined as “to remove from a job or position.”

<sup>68</sup> Van der Kolk, *Psychological Trauma*, 31.

<sup>69</sup> Grenz, *Theology for the Community of God*, 481.

<sup>70</sup> Grenz, *Theology for the Community of God*, 481.

<sup>71</sup> Grenz believes that the covenant Christians enter into with Christ and each other “is greater than all other human bonds.” This bond links believers as “one unified people” who agree “to walk together” and to “be in relationship with one another” (*Theology for the Community of God*, 480–81).

<sup>72</sup> Grenz, *Theology for the Community of God*, 480.



Christian community involves a “process of resocialization by which an individual’s identity is revised and knit together with the identity of the group.”<sup>73</sup>

Many join a Christian community for the purpose of social interaction, however, church attendance is much more than just a social experience—it includes the concept of belonging. Relationships within a local church community develop into what is called *fictive kinship*. Fictive kinship exists when a group of people, not related through genetics or marriage, chooses to adhere to beliefs and function in roles similar to that of a close-knit family.<sup>74</sup> As such, members of the group become part of a new family, which uses terms such as spiritual mother, father, brother, and sister with one another.<sup>75</sup>

What happens though when an individual or an entire family chooses to leave their local church or Christian community due to an interpersonal conflict? Often the one leaving feels displaced from the group, which can evoke deep emotional pain.<sup>76</sup> Some describe this experience as being similar to the death of a loved one or the end of a marriage.<sup>77</sup> To leave a Christian community is traumatic—a deep grieving over the loss of personal relationships often occurs. Consequently, choosing to no longer fellowship

---

<sup>73</sup> Meeks, *The First Urban Christians*, 86.

<sup>74</sup> According to DeSilva, in the early church when individuals converted to Christ they took on “common devotion to a particular set of ideals and way of life” which was sufficient to make them kin. Those who followed Christ formed a community by adhering to the roles of a biological family. This community of believers enters into a spiritual family with God as their father (*An Introduction to the New Testament*, 137–38, 142–43).

<sup>75</sup> DeSilva states that in the Hellenistic and Roman periods many Jewish and Gentile philosophers “regarded common devotion to a particular set of ideals and ways of life as sufficient basis to make people kin.” (*An Introduction to the New Testament*, 142–43).

<sup>76</sup> Many Christians have a closer emotional connection with their spiritual brothers and sisters than with their own biological family due to the common bond of faith in the Christian community and the frequency of contact through regular weekly services.

<sup>77</sup> Parish, *Changing Churches*, 31.

with a specific Christian community leaves an individual feeling like they have lost their family as well as a place to belong—two key elements within the Christian community.<sup>78</sup>

### **1.5.1.1 Biblical Narrative: Barnabas and Paul's Disagreement**

Barnabas and Paul, two significant figures in the New Testament, experienced displacement trauma due to a serious disagreement which resulted in the termination of their ministry partnership (Acts 15:36). These two men worked together for approximately three years teaching at the church in Antioch, as well as travelling throughout Asia Minor preaching and ministering before they parted company.<sup>79</sup> The disagreement revolved around Paul asking Barnabas to go on a second missionary trip to Asia Minor. While Barnabas agreed to go on this trip, he asked that John Mark, the young man who had gone with them for part of their first missionary venture, accompany them once again.<sup>80</sup> Paul strongly disagreed with Barnabas' proposal. Barnabas, however, was so convinced that John Mark should assist them on the journey that he ended his relationship with Paul over this dispute.

This thesis will argue that both Barnabas and Paul were traumatized by the termination of their ministry partnership. Barnabas lost more than Paul, for he was displaced from his position as one of the main leaders at the church in Antioch as well as one of the spiritual fathers to the new believers in Asia Minor. Paul was also traumatized due to losing a long-standing relationship with the first Christian who believed in him and welcomed him into the Christian community.

---

<sup>78</sup> Vanier and Whitney-Brown, *Jean Vanier—Essential Writings*, 160; According to Nouwen human beings are created with a need to belong and to feel included. (*The Inner Voice of Love*, 57).

<sup>79</sup> According to Hoefer, Barnabas and Paul ministered in Cyprus, Paphos, Pisidian, Antioch, Iconium, Lystra, and Derbe. (Hoefer, "Principles of Cross-Culture," 141).

<sup>80</sup> Gangel, On the first missionary trip John Mark went only to Perga in Pamphylia before returning to Jerusalem (Acts 13:13). (*Acts*, 195, 260).

### 1.5.1.2 Contemporary Narrative: Dottie and Mike Parish's Story

Mike and Dottie Parish felt compelled to leave the congregation where they had attended for more than ten years due to three major changes in the church. In their book *Changing Churches: A View from the Pew* Dottie describes the emotional pain they went through as they made the decision to leave the church and then the process they went through to find another congregation with which to worship. In this narrative, Dottie walks the reader through how difficult it is to leave friends who have become like family.<sup>81</sup> The result of this lengthy process ended with Dottie grieving for years over lost relationships. This thesis will argue that it was traumatic for Dottie and Mike to go through the process of leaving their church and finding a new church to attend.

### 1.5.2 Identity Trauma

Identity formation entails a person exploring who they are within the context of their society. Eric Erickson believes that “the concept of identity is located in the core of the individual and yet also in the core of his [sic] communal culture.”<sup>82</sup> The forming of an identity according to Erikson is an unconscious process that involves self-critiquing derived from perceived judgments from others.<sup>83</sup>

For the purposes of this thesis, identity trauma is defined as: any event that shakes the foundation of a person's identity. To define *identity trauma* one must factor culture into the definition. For example, a woman's identity has been linked to motherhood ever since Adam called the woman God created for him Eve, which means, “the mother of all the living” (Gen 3:20). After creating Adam and Eve, God established that humanity was to “be fruitful and increase in number” (Gen 1:28; 9:1,7).

---

<sup>81</sup> Parish, *Changing Churches*, 21.

<sup>82</sup> Erickson, *Identity, Youth and Crisis*, 21.

<sup>83</sup> Erickson, *Identity, Youth and Crisis*, 22–23.

In the Old Testament the Israelites believed that God owned a woman's womb and rewarded a couple's obedience with the conception a child (Gen 30:1–2).<sup>84</sup> The early Christian community also embraced this cultural belief resulting in the ancient Hebrew and Christian communities teaching the young girls that their destiny was to marry and have children.<sup>85</sup> Once married, a woman gained her identity based on how many children she had, therefore fertility and childbirth were important issues.<sup>86</sup>

What happens to a Christian woman's identity, though, when she is unable to conceive a child? The inability to conceive a child often affects the woman's sense of self, her identity, and how society views her. Based on this premise, the biblical and contemporary narratives used to illustrate identity trauma will both address the issue of infertility. The biblical narrative is the account of Hannah and her successful appeal to God for a child. The contemporary narrative is the story of Randy and Lois Flower's painful journey of unsuccessfully conceiving a child.

#### **1.5.2.1 Biblical Narrative: Hannah's Story**

This biblical narrative is about a barren woman named Hannah who was loved by her husband Elkanah; however, his love for her was not enough to comfort her aching heart and her empty arms. The trauma of being barren drove Hannah to “pour out [her] soul before the Lord” while she was in the temple.<sup>87</sup> Hannah's pericope is a powerful story of a woman crying out to God for a child and she receives her heart's cry—a son whom she names Samuel (1 Sam 1:1–18). This thesis will argue that even though Hannah

---

<sup>84</sup> Kroeger and Evans. *IVP Women's Bible Commentary*, 156; Schroer and Staubli, “Bodily and Embodied,” 12.

<sup>85</sup> DeSilva, *Honor, Patronage, Kinship and Purity*, 189.

<sup>86</sup> Several Old Testament narratives reveal women who struggled with the shame of barrenness; Sarah (Gen 11:27–30, 16:1, 21:1–7), Rebekah (Gen 25:20–21), Rachel and Leah (Gen 29:31–30:24), Hannah (1 Sam 1:1–2, 4–6, cf. 1 Sam 1:19–20), and Elizabeth (Luke 1:5–7, 18, 24, 57).

<sup>87</sup> Tsumura, *The First Book of Samuel*, 121.

eventually received a son, the lengthy process leading up to the conception and birth of this child was traumatic.

### 1.5.2.2 Contemporary Narrative: The Randy and Lois Flower's Story

Randy and Lois Flowers' journey of unsuccessfully trying to conceive a child caused them to suffer from *identity trauma*. The Flowers' book *Infertility—Finding God's Peace in the Journey* describes just how much shame and emotional pain is involved when a couple is unable to conceive a child. As a young child and through her teen years Lois dreamt of the day she would become a mother—never imagining this would not happen.<sup>88</sup> Just before marriage Lois underwent surgery to remove a large cyst from one of her ovaries and later discovered that she was unable to conceive.<sup>89</sup> Their dreams were shattered and their faith in God was shaken. Lois struggled with her identity as a woman and as a Christian in a culture where having children is extremely important. This thesis will argue that it was traumatic for Randy and Lois to discover they could not conceive a child.

### 1.5.3 Traumatic Loss

The definition for the concept of traumatic loss is “the loss of assumptions about belonging and fitting into the social world, and the loss of diverse expectations about one's self and one's life.”<sup>90</sup> This definition of loss concerns three areas of life: self-worth, meaning, and safety.<sup>91</sup> Often people equate traumatic loss with more severe issues in life such as the murder of a loved one, living through the horrors of war, or a natural disaster such as a tornado—and indeed these are events which do incur traumatic loss. Yet, events

---

<sup>88</sup> Flowers, *Infertility—Finding God's Peace in the Journey*, 17.

<sup>89</sup> Flowers, *Infertility—Finding God's Peace in the Journey*, 18.

<sup>90</sup> Kauffman, *Loss of the Assumptive World*, 206.

<sup>91</sup> In Kauffman's book the term safety is referring to “safety of the self” which comes from “the belief that the world is good,” (*Loss of the Assumptive World*, 207).

that appear to be less severe in nature also result in traumatic loss, such as the death of a loved one, divorce, or the loss of a valued job. Each of these events has the potential to shake a person to the core of his or her identity due to the loss of expectation concerning life and identity, as well as the unexpectedness of the event.<sup>92</sup> For the purpose of this thesis, the focus will be on the trauma of losing an adult sibling.

Author T.J. Wray and others discovered that in general the belief system in society is that once an individual reaches adulthood, marries, and has children of his or her own, the relationship between siblings diminishes.<sup>93</sup> Therefore when an adult sibling passes away, others do not typically view it as a traumatic event for the remaining siblings.<sup>94</sup> When a parent or child passes away, greater value appears to be given to the significance of the trauma and loss. The two narratives shared in this section will reveal the exact opposite: that it is indeed traumatic to lose an adult sibling.

#### **1.5.3.1 Biblical Narrative: The Martha, Mary, and Lazarus Story**

The story of Lazarus, found in John chapter 11, is a well-known biblical narrative. While the emphasis of the story is typically placed on Lazarus, for this thesis, the main focus will be on Martha and Mary—Lazarus' two sisters. When Lazarus became ill, Martha and Mary sent word to Jesus in the hope that he would come and heal their brother (John 11:3). Jesus received their request but did not respond immediately (John 11:6). By the time he arrived in Bethany, Lazarus had already been dead for four days (John 11:39).

Martha and Mary went through an intense and complicated experience. They lost their brother whom they loved. The sisters experienced a vast array of emotions from

---

<sup>92</sup> Kauffman, *Loss of the Assumptive World*, 205.

<sup>93</sup> Wray, *Surviving the Death of a Sibling*, 4.

<sup>94</sup> Wray, *Surviving the Death of a Sibling*, 72.

fear, anger, frustration, sadness, and shock all within four days. This thesis will argue that Mary and Martha experienced a traumatic loss when Lazarus died.

### **1.5.3.2 Contemporary Narrative: The T.J Wray's Story**

Wray describes her journey into a very dark emotional place due to the loss of her older brother VJay. Her book puts into writing what few will talk about, yet many experience in their lifetime—the emotional trauma connected with the death of an adult sibling. The author was very close to her brother and even though they had separate lives in different parts of the United States, his death still affected her very deeply.<sup>95</sup> She knew he was going to die, she had even said her goodbyes, yet the reality of life without him became unbearable after he was gone. It took her several years to work through the grief that was attached to the trauma. This thesis will argue that it was traumatic for Wray to lose her brother.

The above six narratives have been chosen due to the fact that these types of trauma occurs regularly in the Christian community, yet seldom are these topics discussed in a Sunday morning sermon or in a Bible study. The aim of the remaining chapters is to present information revealing how trauma affects individuals as well as how the local Christian community can help those who have been traumatized from issues such as: leaving a church, infertility, or losing an adult sibling. Arguably, the local church is in need of a “more comprehensive response” for those who have been traumatized.<sup>96</sup>

Trauma has been defined as “an inescapably stressful event that overwhelms people’s coping mechanisms which affects individuals physically, emotionally,

---

<sup>95</sup> Wray, *Surviving the Death of a Sibling*, 4–5.

<sup>96</sup> Lyon, “The Spiritual Implications,” 233.

psychologically, and spiritually.”<sup>97</sup> The local church is able to address each of these areas through the tools of compassion, listening, lamenting, lifting others up in prayer, and leaving people with their pain in God’s care. The first step in acquiring these tools is to understand how the human identity is formed, which will be explained in chapter 2.

#### 1.5.4 Conclusions

This chapter presented a theoretical framework of trauma. It was established that trauma affects individuals emotionally, psychologically, spiritually and physically. Traumatized individuals may seek support through the Christian community, but are often referred to mental health practitioners due to lack of education concerning how trauma affects individuals and how the community of faith can help. Research proved that recovery occurs when an “enriched” or “holding” environment is provided. Both of these terms were explained in this chapter and will be discussed further in the subsequent chapters. Factors such as age, level of maturity, the quality of relationship and number of previous stresses were identified as some of the factors contributing to the emotional response to trauma. A brief history of the study of trauma was presented outlining how the medical field addressed trauma. The research methodology “constructive narrative theology” was presented along with three biblical and three contemporary narratives. These narratives represent the three forms of trauma: *displacement trauma*, *identity trauma*, and *traumatic loss*.

Chapter 2 presents how the human identity is formed. Personality development theories by Sigmund Freud, Carl Jung, Erik Erikson and James Fowler will be examined. An understanding of how the “True Self” and the “False Self” is formed due to trauma is presented as well as Donald Winnicott’s theory of the “holding environment.”

---

<sup>97</sup> Van der Kolk et al., *Traumatic Stress*, 279.



## **Chapter 2: Identity Formation**

### **2.1 Introduction**

An individual's sense of safety, security, and self-confidence is rooted in their identity. When an individual has been traumatized his or her identity is shattered, resulting in a disconnection from self, others, and God. Restoring the shattered identity involves understanding how a healthy identity is originally established. Comprehending the formation of a healthy identity involves: (a) an understanding of the psycho-social development of the early child, as well as an understanding of the differentiated self (a concept related to the process of successful negotiation of the early stages of this development) as explained by Sigmund Freud, Carl Jung, Erik Erikson; (b) an evaluation of the life experiences of early childhood and their relevance to the formation of an interior/exterior self-awareness as described by Donald Winnicott and Donald Capps; (c) an understanding the development of spiritual growth and faith in God as expressed by James Fowler.

To explain the formation of a healthy identity, this chapter will be divided into four sections. The first section will explore the issue of "identity versus self" by defining the concepts of identity and self. This section will also present the concept of being created in the image of God or *imago dei*. The second section will identify the formation of a healthy identity, by presenting a brief overview of Freud, Jung, and Erikson's theories of personality. The third section will explore Winnicott's concepts of the "True Self" and the "False Self" as well as "the good-enough mother" and the "holding environment." The fourth section will present an overview of Fowler's theory of faith development.

## 2.2 Identity versus Self

The terms *self* and *identity* are often used interchangeably, but what do these terms really mean? Even after years of research on human identity no clear distinction has emerged between these two concepts.<sup>1</sup> The following pages will present what several researchers and theologians have offered as credible definitions and concepts of these two terms.

### 2.2.1 The Concept of Identity

In *Identity, Formation, Agency, and Culture* James E. Cote and Charles G. Levine propose that the term identity is traditionally used in the field of psychology when referencing a human being, whereas the term self is referenced in the field of sociology.<sup>2</sup> Exploring the concept of identity involves an interdisciplinary study of three aspects of life: “the social identity which reveals a person’s place in society, the personal identity which depicts a person’s experiences with others, and the ego identity which denotes the essential core characteristics of the personality.”<sup>3</sup> There is a blending together of the inside and the outside, which then becomes “the social and agentic aspects of life.”<sup>4</sup>

Historically, psychologists and sociologists worked side-by-side sharing views on identity according to the early writings of Erikson. Over time, researchers from these two disciplines developed distinct ideologies on identity resulting in the field of developmental psychology, which studied identity formation, and social psychology that examined the self.<sup>5</sup> Erikson, however, believed that elements from both psychology and

---

<sup>1</sup> The authors state that in the psychological and sociological literatures there are only general definitions of the terms identity and self (Cote and Levine, *Identity, Formation*, 68–71).

<sup>2</sup> Cote and Levine, *Identity, Formation*, 9.

<sup>3</sup> Cote and Levine, *Identity, Formation*, 9.

<sup>4</sup> Cote and Levine, *Identity, Formation*, 10.

<sup>5</sup> Cote and Levine, *Identity, Formation*, 15.

sociology should be embraced since the identity of a person is “located in the core of the individual and yet also in the core of his [sic] culture.”<sup>6</sup> The strength of a healthy identity is dependent upon forming a social identity within a society that is welcoming as well as “stable and structured” which in turn creates a sense of belonging.<sup>7</sup> Furthermore, a solid social and ego identity provides a base for an individual to venture out into life feeling “buffered and protected from the vicissitudes of social conflicts and tensions.”<sup>8</sup>

### 2.2.2 The Concept of Self

The concept that “every human being is a self” is widely accepted in the twenty-first century, yet few can truly identify what the term self means.<sup>9</sup> Rom Harre, a prolific writer in the field of social science, sees the self as “the personal sense of identity through which a persona conceives of him or herself as a singular being with a continuous and unique history.”<sup>10</sup> Stanley Grenz, theologian and ethicist, states that “the self as we know it today is characterized by interiority—that is, the distinction between ‘inside’ and ‘outside’—together with a sense of personal identity as a unified being.”<sup>11</sup> Theologian Jan-Olav Henriksen believes that the self revolves around the desire for love.<sup>12</sup>

In *The Saturated Self: Dilemmas of Identity in Contemporary Life* the author Kenneth Gergen explains that the study of the self has gone through “three distinct periods in history: the romantic,<sup>13</sup> modern, and postmodern periods.”<sup>14</sup> According to

---

<sup>6</sup> Erickson, *Identity: Youth and Crisis*, 22.

<sup>7</sup> Cote and Levine, *Identity, Formation*, 17.

<sup>8</sup> Cote and Levine, *Identity, Formation*, 16.

<sup>9</sup> Grenz, *The Social God*, 58.

<sup>10</sup> Harre, *Personal Being*, 27, 29.

<sup>11</sup> Grenz, *The Social God*, 60.

<sup>12</sup> Henriksen, “The Erotic Self and the Image of God,” 257.

<sup>13</sup> According to Gergen, in the 1800s during the Romantic period, people viewed the self as a “passionate and volatile fixed inner core.” The romantic mindset continued into the 19th century, but as each new generation came forth this style of self became more and more extinct (*The Saturated Self*, 6, 247).

Gergen, North America is still in the postmodern era, which embraces a “relational self” while rejecting the concept of a personal identity, which consists of “a stable inner core and a reason-governed personality.”<sup>15</sup> The concept of the inner core is being replaced by a “belief in a ‘relational self’—all is played out in relation to others.”<sup>16</sup> This social identity is best described as a “narrative self” since the human identity is revealed through narratives which are often shared on social media.<sup>17</sup> Theorists such as Winnicott, Erickson, and Capps would oppose discarding the inner core in order to embrace the social media relational self since they deem the inner core as sacred and worthy of protection.<sup>18</sup>

### 2.2.3 The Concept of the *Imago Dei*

In the above pages the concepts of identity and self were explored from the disciplines of psychology and sociology. This section would not be complete however, without addressing this issue from a biblical perspective. One of the basic tenets of the Christian faith declares that humanity is created in the image of God, also known as *imago dei*. It is this assertion that gives human beings value, worth, and dignity.<sup>19</sup> The *imago dei* is “a universal reality”<sup>20</sup> which began with the “seminal narrative”<sup>21</sup> depicting the creation of Adam and Eve and continues to be present in every human being created

---

<sup>14</sup> In the early 1900s the Modernist period was being formed through a “view of self...being machine-like and governed by reason, where passions were harnessed and volatility treated as a mental problem.” The modernist believes that “normal persons are predictable, honest, and sincere,” valuing “educational systems, a stable family life, moral training, and a rational choice of marriage partners” (Gergen, *The Saturated Self*, 6, 201).

<sup>15</sup> Cote and Levine, *Identity, Formation*, 26.

<sup>16</sup> Cote and Levine, *Identity, Formation*, 26.

<sup>17</sup> Grenz, *The Social God*, 135.

<sup>18</sup> Cote and Levine, *Identity, Formation*, 29.

<sup>19</sup> Robinson, *Understanding the ‘Imago Dei,’* 7.

<sup>20</sup> Grenz, *The Social God*, 185.

<sup>21</sup> Robinson, *Understanding the ‘Imago Dei,’* 7.

since the fall.<sup>22</sup> Key scriptures denoting this principle are found in the book of Genesis (Gen 1:26-28; 5:1-3; 9:5-6) and in the book of Psalms (Ps 8).<sup>23</sup> The concept of the divine image can also be found in the New Testament (1 Cor 11:7; Jas 3:9). The apostle Paul declares Christ to be the true image of God (1 Cor 11:7; 2 Cor 4:4; Col 1:15) with human beings participating in the *imago dei* through their union with Christ (1 Cor 6: 15; 2 Cor 3:18; Rom 8:17, 12:5).<sup>24</sup> Those who partake in the *imago dei* form a new humanity – a humanity that bears the divine image in the present day, as well as one that creates the eschatological community in the future with Christ as its head.<sup>25</sup>

The concept of being created in the image of God has brought comfort to many throughout the ages, yet “exegetes and theologians have not been in agreement as to what this concept truly entails.”<sup>26</sup> Part of the confusion derives from the fact that there are three central concepts to the meaning of *imago dei*: structural, relational, and goal.

The concept of *imago dei* as structural is the most well-known view of the three. The main hypothesis of the structural view is that there are “certain characteristics inherent in the structure of human nature that resembles corresponding qualities in God.”<sup>27</sup> Two of these qualities, reason and will, are central to the structural view and are deemed fundamental to being human—they are present in every individual, whether God is acknowledged or not.<sup>28</sup> The relational view of *imago dei* adheres to the principle that humanity is in relationship with creator God, which results in the creature “imaging” or

---

<sup>22</sup> Westermann, *Genesis 1–11*, 148.

<sup>23</sup> Grenz, *The Social God*, 184.

<sup>24</sup> Grenz, *The Social God*, 240.

<sup>25</sup> Grenz, *The Social God*, 12, 17.

<sup>26</sup> Grenz, *The Social God*, 141–142.

<sup>27</sup> The primary theologians for the structural view are Irenaeus, Augustine, and Aquinas. (Grenz, *The Social God*, 142).

<sup>28</sup> The concept of reason and will being connected to the *imago dei* has remained a central concept in the Christian tradition since the structural view was presented (Grenz, *The Social God*, 142–44).

“reflecting” the Creator in his or her actions and deeds.<sup>29</sup> This concept promotes the idea that “the divine image is similar to a mirror” shining through all of creation, with humans showing forth God’s glory as the “brightest mirror.”<sup>30</sup> Loving God and one another is a key element of the relational view—for God is love.<sup>31</sup> The goal view of *imago dei* believes that there will be a divine reunion with God at a future time.<sup>32</sup> This view promotes the concept that human beings must go through a process of interacting with their culture and their community in order to form the divine image.<sup>33</sup>

Regardless of which view is accepted—structural, relational, or goal, the concept of *imago dei* is an important issue to the Christian faith and for this thesis. This principle is what motivates the Christian community to help one another, whether they are part of the Christian community or not and whether they have been traumatized or not.

The theory of being made in the image of God is an important concept for those who have been traumatized as well. Many believe that experiencing a traumatic event diminishes their value and worth, due to the shame associated with the incident. Yet, being formed in the image of God is what determines value and worth for a human being, not the absence of trauma, or the ability to suffer well. Some individuals even believe that rejoicing is possible while going through the recovery process, due to being made in the image of God.<sup>34</sup> The Christian community needs a clear understanding of how the human identity is formed to ensure adequate aid is offered to emotionally traumatized individuals. As such, Winnicott, Freud, Jung, Erikson, and Fowler’s material on

---

<sup>29</sup> Several of the key contributors of the relational view were Martin Luther, John Calvin, Søren Kierkegaard, and Emil Brunner (Grenz, *The Social God*, 162).

<sup>30</sup> Grenz, *The Social God*, 166.

<sup>31</sup> Kierkegaard, *Works of Love*, 74.

<sup>32</sup> Johann Gottfried Herder and I.A. Dorner are the two main theologians who contributed to the concept of *imago dei* as goal (Grenz, *The Social God*, 177).

<sup>33</sup> Grenz, *The Social God*, 180.

<sup>34</sup> McMinn, *Psychology, Theology*, 71.

personality development will be presented as an overview of the development of a healthy identity.

### **2.3 The Formation of a Healthy Identity**

A healthy identity is a complex and multi–leveled structure that consists of “the social identity which reveals a person’s place in society, the personal identity which depicts a person’s experiences with others, and the ego identity that denotes the essential core characteristics of the personality.”<sup>35</sup> When all three aspects of the identity are joined together the end result is a healthy identity. Due to the limitations in scope and length of this project, only certain theories contributing to the formation of this multi–leveled structure will be examined briefly to aid in understanding the formation of a healthy identity.

A basic premise of this thesis is that a human being requires positive interactions with his or her environment (primary caregiver) to promote the development of a healthy identity or—the True Self.<sup>36</sup> When an individual does not receive positive interactions with the environment (primary caregivers) the results are the development of a False Self, which functions as a shell or shield hiding the fractured (true) self.<sup>37</sup> The False Self can be created in early childhood due to the primary caregiver failing to meet the child’s physical, emotional, or psychological needs. Trauma occurring later in life can also cause the formation of a False Self.<sup>38</sup> Once the False Self has been formed, in infancy or later in life, it affects all three aspects of the human identity: social, personal, and internal ego.

---

<sup>35</sup> Cote and Levine, *Identity, Formation*, 9.

<sup>36</sup> Winnicott, *Maturation Processes*, 43.

<sup>37</sup> Winnicott, *Playing and Reality*, 41.

<sup>38</sup> Capps, *The Depleted Self*, 87.

The focus of this thesis will be on adults who have suffered due to a traumatic event, which may result in the formation of a False Self. The work of theorists, Freud, Jung, and Erikson, will be explored briefly in this section in order to better understand the formation of the human identity. Freud's psychosexual theory of personality will be examined first as his work is "the seminal theory of personality" as well as the foundation for the developmental theories addressed in this thesis.<sup>39</sup>

### **2.3.1 Freud's Psychosexual Theory of Personality Development**

The focus of Freud's research was in the area of the psychosexual development of the ego identity. He believed that an individual could only be psychologically healthy if he or she progressed successfully through five psychosexual stages from infancy to adulthood.<sup>40</sup> The basis of his theory was that the identity was formed as one responded to their sexuality, and failure to do so resulted in a neurosis.<sup>41</sup> A brief overview of Freud's psychosexual stages will aid in understanding Jung and Erikson's work.

Freud proposed that the self is divided due to unconscious conflicts that need to be resolved.<sup>42</sup> This division exists on two levels: the super-ego is the representative of the internal world and the ego is the representative of the external world.<sup>43</sup> The id's function is to encourage the personality to strive for basic survival and instant gratification.<sup>44</sup> Based on Freud's theory "the ego evolves out of the id and acts as an intermediary between the id and the external world."<sup>45</sup> The ego maintains equilibrium between the moral side of the person and their idealistic goals by using the reality principle, which

---

<sup>39</sup> According to Lester, Freud's work was "the first major modern theory of personality and many others adapted or modified Freud's work" (*Theories of Personality*, 7).

<sup>40</sup> Engler, *Personality Theories*, 67.

<sup>41</sup> Breuer and Freud, *Studies on Hysteria*, 6.

<sup>42</sup> Breuer and Freud, *Studies on Hysteria*, 12.

<sup>43</sup> Freud, "The Ego and the Id" 1659.

<sup>44</sup> Engler, *Personality Theories*, 47.

<sup>45</sup> Engler, *Personality Theories*, 47.



involves assisting the id to express itself in an acceptable fashion within society.<sup>46</sup> The superego is similar in nature to a ruler providing guidelines for judging and assessing situations.<sup>47</sup> To obtain a healthy personality the ego must control both the id and superego.<sup>48</sup>

Freud assigned five stages of sexuality to personality development, occurring between birth and adulthood: *oral, anal, phallic, latency, and genital*.<sup>49</sup> During each stage the individual works through a sexual conflict striving to receive pleasure while avoiding pain. Freud's concepts were revolutionary and caused much controversy, which is still ongoing today.<sup>50</sup> Yet, these concepts are foundational, for Freud was a pioneer in personality development and the psychosexual theories have been taught to students training in personality development. Throughout the years there are those who have remained true to Freud's psychoanalytical perspective but many others reacted to the theories by creating their own. Jung is one of the theorists who was trained by Freud but subsequently rejected many of the Freudian concepts and created his own theory called Analytical Psychology. His theory will be explored in the following section.

### **2.3.2 Jung's Analytical Theory of Personality Development**

After spending more than six years working with Freud, as one of his star pupils, Jung left the Vienna Psychoanalytic Instituted due to differing opinions.<sup>51</sup> One of the

---

<sup>46</sup> Engler, *Personality Theories*, 47.

<sup>47</sup> According to Engler the superego aims for perfection. (*Personality Theories*, 47–48).

<sup>48</sup> Freud, "The Ego and the Id," 1652.

<sup>49</sup> Lester, *Theories of Personality*, Freud was the first person to imply that children could have sexual feelings. 11.

<sup>50</sup> Engler, *Personality Theories*, 41.

<sup>51</sup> According to Roedkelein, Freud referred to Jung as his 'crown prince.' When Jung left in 1913 the two men were never to see each other again (Roedkelein, *Elsevier's Dictionary*, 328); According to Engler, Freud looked upon Jung with the affection that a father has for his son. It was a great loss for Freud when Jung went out on his own. For Jung their parting was so upsetting that he went through a period of "extensive inner disorientation in which he could not read or write" (Engler, *Personality Theories*, 70).

main disagreements between these two men was that Freud believed individuals continually looked to the past in an attempt to fix what was wrong, whereas Jung contended that individuals were future focused. Jung's response was to develop Analytical Psychology, a treatment approach that focused on "integration or balance within the self."<sup>52</sup> This balance or integration is accomplished through individuation.<sup>53</sup> According to Jung "individuation is a philosophical, spiritual, and mystical experience, which in metaphysical terms amounts to God's incarnation."<sup>54</sup> The individuation process gives room for the True Self to emerge.<sup>55</sup>

Jung perceived the "structure of the personality as a complex network of interacting systems that strive toward eventual harmony."<sup>56</sup> The centrality of these systems is the ego according to Jung, consisting of the personal unconscious with its complexes, and the collective unconscious with its archetypes.<sup>57</sup> The complexes, found in the personal unconscious, consist of "organized groups of perceptions, thoughts, feelings, and memories" about a particular concept.<sup>58</sup> These organized groups have been stored in the unconscious and can be retrieved if needed at a later time.<sup>59</sup> The complexes contribute to how individuals interact with one another, in a positive or negative fashion.<sup>60</sup>

The collective unconscious contains numerous archetypes, according to Jung, such as: *persona*—the social role or mask; *anima*—the feminine side of the male psyche; *animus*—the masculine side of the female psyche, and, *self*—the ultimate unity of the

---

<sup>52</sup> Engler, *Personality Theories*, 70.

<sup>53</sup> Jung, *Memories, Dreams, Reflections*, 209.

<sup>54</sup> Jung, *Psychology and Religion*, 157, 294.

<sup>55</sup> Jung, *Symbols of Transformation*, 433.

<sup>56</sup> Engler, *Personality Theories*, 71.

<sup>57</sup> Engler, *Personality Theories*, 71.

<sup>58</sup> Engler, *Personality Theories*, 72.

<sup>59</sup> Engler, *Personality Theories*, 72.

<sup>60</sup> Engler, *Personality Theories*, 72.

personality.<sup>61</sup> Two of these archetypes, the persona and the self, pertain to this thesis. The persona is the social role an individual assumes in society, whereas the self, who is the central archetype, works towards “unity of all parts of the personality.”<sup>62</sup>

The true person begins to emerge in middle adulthood as one who is flexible and adaptable while existing on the “boundary between conscious and unconscious, reason and unreason.”<sup>63</sup> The complexity of the human personality or “the true person” consists of “the unconscious, the mind and the body, the persona and the shadow, overt sexual characteristics and complements.”<sup>64</sup> Balancing the contents of the human personality is a difficult task, yet it is necessary according to Jung, for if the personality fails to develop in a balanced manner, then neurosis occurs.<sup>65</sup>

Jung and Freud both studied personality development through analyzing dreams and unlocking the hidden aspects of the unconscious with adults. Others, such as Erikson thought that studying children at different developmental stages was a more effective methodology to understand personality development. Erikson’s theory of personality development will be examined in the next section.

### **2.3.3 Erikson’s Psychosocial Theory of Personality Development**

Like Jung, Erikson was trained in psychoanalysis at the Vienna Psychoanalytic Institute.<sup>66</sup> While there he studied child analysis and how the human identity is formed. From his research he coined the terms *identity* and *identity crisis*, which have since become household words. According to Capps, to obtain a complete picture of the human

---

<sup>61</sup> Engler, *Personality Theories*, 78.

<sup>62</sup> Engler, *Personality Theories*, 76.

<sup>63</sup> Engler, *Personality Theories*, 76–77.

<sup>64</sup> Engler, *Personality Theories*, 82.

<sup>65</sup> Jung, *The Theory of Psychoanalysis*, 7.

<sup>66</sup> Hoare et al., “Chapter 2, Erikson’s Thought in Context,” *Erikson on Development*, 9.

identity Erikson believed that one must consider the social, cultural, and historical realities of life.<sup>67</sup> His psychosocial theory was that human beings resolve conflicts and form an ego identity as they go through eight distinct stages of development.<sup>68</sup> As an individual encounters and resolves a crisis in each stage psychological growth occurs, resulting in a more genuine identity.<sup>69</sup> Erikson believed that even though an individual moves through each stage chronologically, he or she does not necessarily move through each stage psychologically, therefore any one of the stages can be revisited when necessary to establish new grounds for trust, autonomy, initiative, and industry.<sup>70</sup>

According to Donald Capps, Erikson focused on orientation in the three major stages: infancy, adolescence, and mature adulthood.<sup>71</sup> In the midst of the disorientation and disorder of life, Erikson believed that individuals need a solid image of their past and an understanding of where the future is leading. The mother's task was to help her infant "to feel at home in the world," while the adolescent assumes "responsibility for fitting into" the world.<sup>72</sup> Then, as a mature adult in the last stage of Erikson's life cycle the individual is willing to relinquish his or her place in the world.<sup>73</sup> According to Capps, "the themes that Erikson puts forth of being 'at home,' 'fitting in,' and 'completing life,' in the world are three fundamental ways of being oriented in our world, of knowing our place."<sup>74</sup> At each stage the ego develops either positive or negative emotional components, which affects the forward growth of an identity.<sup>75</sup> Erikson believes the ego

---

<sup>67</sup> Capps, *Life Cycle Theory*, 20.

<sup>68</sup> Engler, *Personality Theories*, 139.

<sup>69</sup> Erikson, *Childhood and Society*, 255.

<sup>70</sup> Erikson, *Childhood and Society*, 271.

<sup>71</sup> Capps, *Life Cycle Theory*, 30.

<sup>72</sup> Capps, *Life Cycle Theory*, 30.

<sup>73</sup> Erikson, *Childhood and Society*, 270.

<sup>74</sup> Capps, *Life Cycle Theory*, 30.

<sup>75</sup> Engler, *Personality Theories*, 139.

has the ability to “anticipate inner as well as outer dangers” which viewed the ego as “a defensive and adaptive core in the center of the person” which has the ability to “reconcile discontinuities and ambiguities.”<sup>76</sup> The sense of an ego identity is imperative for one to feel alive.<sup>77</sup>

The first of the eight stages addresses the psychological conflict of “basic trust versus basic mistrust.” The desired goal in this stage is for the infant to develop basic trust towards others and self.<sup>78</sup> If the mothering relationship is unreliable and unpredictable then the infant learns that the world is not a safe place, resulting in basic mistrust being established.<sup>79</sup> The second stage, which occurs in early childhood, addresses the psychological conflict of “autonomy versus shame and doubt.” In this stage the child tries to establish freedom to do things on his or her own.<sup>80</sup> When others express disapproval, feelings of shame and doubt begin to form in the child’s identity.<sup>81</sup> The third stage, which occurs in the play age, addresses the psychological conflict of “initiative versus guilt” During this stage a sense of purpose emerges with direction and focus.<sup>82</sup> The fourth stage occurs when the child goes to school and addresses the psychological conflict of “industry versus inferiority.” In this stage the child masters new skills through production.<sup>83</sup> If the child is not able to master a skill then he or she feels inferior.<sup>84</sup> The fifth stage, which occurs in adolescence, addresses the psychological conflict of “identity versus identity confusion.” The primary struggle during these years is learning to “be

---

<sup>76</sup> Erikson, *Life History*, 19, 257.

<sup>77</sup> Erikson, *Childhood and Society*, 240.

<sup>78</sup> Erikson, *Childhood and Society*, 85.

<sup>79</sup> Capps, *Life Cycle Theory*, 24.

<sup>80</sup> Capps, *Life Cycle Theory*, 25.

<sup>81</sup> Erikson, *Childhood and Society*, 253.

<sup>82</sup> Erikson, *Childhood and Society*, 255.

<sup>83</sup> Erikson, *Childhood and Society*, 258.

<sup>84</sup> Capps, *Life Cycle Theory*, 26.

somebody.”<sup>85</sup> Relationships formed in peer groups enable the adolescent to be affirmed by peers.<sup>86</sup> The first group was the family, but as the individual matures the focus shifts to peer groups. The sixth stage, which occurs in young adulthood, addresses the psychological conflict of “intimacy versus isolation.” This stage involves letting go of self in order to form shared identities while being with others.<sup>87</sup> The opposite side of this stage is isolation, which can occur if there is “an inability to develop deeply committed relationships.”<sup>88</sup> The seventh stage, which occurs during middle adulthood, addresses the psychological conflict of “generativity versus stagnation.” In this stage the individual is to invest through productivity and creativity into the next generation.<sup>89</sup> If an individual does not learn to take care of others he or she will become stagnant and bored.<sup>90</sup> The eighth stage occurs when one is a mature adult, and addresses the psychological conflict of “integrity versus despair and disgust.”<sup>91</sup> In this stage an individual must come to terms with three aspects of life; where his or her life is at currently, what happened in the past, and a willingness to help usher in the next generation.<sup>92</sup> To accomplish the above one must be able to integrate “fellowship with leadership” according to Erikson.<sup>93</sup> If an individual fails to come to terms with his or her current situation, then despair and disgust may surface towards self or others.<sup>94</sup>

Erikson’s first psychosocial stage of development focuses on basic trust versus mistrust. The primary human encounter that provides the elements necessary for either

---

<sup>85</sup> Capps, *Life Cycle Theory*, 27.

<sup>86</sup> Erikson, *Childhood and Society*, 262.

<sup>87</sup> Capps, *Life Cycle Theory*, 28.

<sup>88</sup> Engler, *Personality Theories*, 144.

<sup>89</sup> Erikson, *Childhood and Society*, 266.

<sup>90</sup> Engler, *Personality Theories*, 144.

<sup>91</sup> Capps, *Life Cycle Theory*, 29.

<sup>92</sup> Erikson, *Childhood and Society*, 268.

<sup>93</sup> Erikson, *Identity and the Life Cycle*, 105.

<sup>94</sup> Capps, *Life Cycle Theory*, 29–30.

basic trust or mistrust to develop is the mother–infant relationship. Winnicott’s holding environment, created by the good-enough mother and her infant, produces the correct atmosphere physically, emotionally, spiritually, and psychologically for basic trust to develop. The following section will look at Winnicott’s theory of the mother-infant relationship, which includes the formation of the True Self and the False Self.

## 2.4 True Self versus False Self

Winnicott defines the term True Self as “a spontaneous gesture” expressing “feelings of being alive and feeling real”<sup>95</sup> When an individual is living from his or her True Self, there is an ability to experience life without feeling exposed.<sup>96</sup> Simon Groninick, author of *Work and Play of Winnicott*, believed that Winnicott had an “almost political desires to free the True Self . . . from the tyranny of the dominating demands of the False Self.”<sup>97</sup> Other writers in the fields of psychology and pastoral theology have used Winnicott’s concepts of the True Self and the False Self as well.<sup>98</sup> Henri Nouwen defines the True Self as “the original self made in the image of God” and advocates that to become more human one must rediscover their True Self.<sup>99</sup> Thomas Merton defines the True Self as being “the person we are before God.”<sup>100</sup> Even though it is a challenge to become that person before God, Merton believes it is achievable.<sup>101</sup>

---

<sup>95</sup> Winnicott, *The Maturation Processes*, 148.

<sup>96</sup> Winnicott, *The Maturation Processes*, 149.

<sup>97</sup> Groninick follows Winnicott in capitalizing “True Self” and “False Self” (*Work and Play of Winnicott*, 12).

<sup>98</sup> Due to limited space in this thesis only a few theorists will be looked at concerning the subject of the True and False Self.

<sup>99</sup> Hernandez, *Henri Nouwen and Self Care*, 10.

<sup>100</sup> Martin, *My Life with the Saints*, 387.

<sup>101</sup> Martin, *My Life with the Saints*, 387.

If the self feels exposed, then the creation of the False Self occurs to hide and protect the True Self.<sup>102</sup> Winnicott postulates that this results in individuals retreating from creative self-expression.<sup>103</sup> The False Self according to Merton is,

The man [sic] I want myself to be but who cannot exist, because God does not know anything about him. And to be unknown of God is altogether too much privacy. My false and private self is the one who wants to exist outside the reach of God's will and God's love—outside of reality and outside of life. And such a self cannot help but be an illusion.<sup>104</sup>

Capps sees the False Self as part of “the divided self” which consists of an ideal self and a real self. According to Capps, when shame appears “the real self—the one who acted or was acted upon—has failed to live up to the expectation of the ideal self” also known as the False Self.<sup>105</sup> Brennan Manning calls the False Self “The Impostor” for it is the one who strives to appear perfect so others will think well of him or her and no one will know the real person living inside.<sup>106</sup> This division of the True Self and the False Self is due to serious interruptions in an individual's life.<sup>107</sup> The next section will look at how the true and False Self are formed outlining some of the interruptions leading to the development of the False Self.

#### **2.4.1 Formation of the True Self**

After years of working with mothers and children Winnicott believes that an infant requires a “good-enough mother,” a “holding environment,” “a potential space,” and “the ability to play” in order to develop what he calls the “True Self.”<sup>108</sup> Winnicott sees the good-enough mother as an emotionally secure woman who devotes herself to

---

<sup>102</sup> Winnicott, *The Maturation Processes*, 47.

<sup>103</sup> Winnicott, *The Maturation Processes*, 152.

<sup>104</sup> Manning, *Abba's Child*, 37.

<sup>105</sup> Capps, *The Depleted Self*, 87.

<sup>106</sup> Manning, *Abba's Child*, 34.

<sup>107</sup> Winnicott, *The Maturation Processes*, 149.

<sup>108</sup> Winnicott, *Playing and Reality* (Routledge Classics), 12; Winnicott, *Maturation Processes*, 43.



her newborn infant.<sup>109</sup> This mother knows “instinctively what to do for her infant” for she understands that her baby is totally dependent on her.<sup>110</sup> When the good-enough mother gives maternal care to her infant she creates what Winnicott terms a *holding environment*, which is both physical and emotional in nature, to sustain the immature ego.<sup>111</sup> Winnicott feels that “the main function of the holding environment [is] the reduction of impingements on infants.”<sup>112</sup> Impingements “are the result of a mother doing too much or too little, which can lead to trauma.”<sup>113</sup>

The emotional development of the infant due to the holding environment moves the relationship into what Winnicott calls the potential space. Here the infant learns how to play on his or her own while the mother is near by.<sup>114</sup> While in the potential space the infant also learns that he or she is accepted in the midst of silence.<sup>115</sup> Once a child can “play independently, creatively, and spontaneously” in the potential space, then the child has “an authentic sense of being alive and feeling real,” which Winnicott refers to as the True Self.<sup>116</sup>

#### 2.4.2 Formation of the False Self

As stated earlier, Winnicott’s understanding is that the True Self is formed through loving interactions between a good-enough mother and her infant, but not all

---

<sup>109</sup> Winnicott’s use of the term ‘mother’ denotes both female or male caregiver (Winnicott, *The Maturation Processes*, 43).

<sup>110</sup> Winnicott believes that the very first contact between mother and infant is when the illusion of omnipotence begins. This illusion is the baby’s experience that the need (hunger) creates the breast (food) thus he or she is omnipotent, for food appears as wanted (Winnicott, *The Child and the Outside World*, 7).

<sup>111</sup> Winnicott, *The Maturation Processes*, 145; Winnicott, *The Child and the Outside World*, 7.

<sup>112</sup> Winnicott, *The Maturation Processes*, 47.

<sup>113</sup> Palombo, *Guide to Psychoanalytical*, 151.

<sup>114</sup> Tuber, *Attachment, Play, and Authenticity*, 75.

<sup>115</sup> Tuber, *Attachment, Play, and Authenticity*, 68.

<sup>116</sup> Palombo, *Guide to Psychoanalytic*, 152.

infants have a good-enough mother.<sup>117</sup> When a mother is unable to meet her infant's needs Winnicott refers to her as the "not good-enough mother."<sup>118</sup> This mother is insecure regarding who she is as a person and as a mother; therefore she is not able to adapt to her infant's needs.<sup>119</sup> Instead, her interaction with the infant causes impingements, for the infant is unable to determine what is going to happen next.<sup>120</sup> Since the mother is unable to attune to her infant through sensing his or her needs, the infant will try to attune to the mother by becoming compliant.<sup>121</sup> According to Palombo, Winnicott describes this lack of attunement as, "[a]n infant who has had no one person to gather his [sic] bits together."<sup>122</sup>

If the mother is not able to meet her infant's needs this becomes the very first trauma the child goes through.<sup>123</sup> When the infant's needs are not met he or she believes death is imminent—yet life continues on but it is a false living.<sup>124</sup> The child then begins to move back and forth between the True Self and the False Self, fulfilling the "important function to hide the True Self...through compliance."<sup>125</sup> There are degrees of compliance that one can enter into which will give the appearance of being fully present. These degrees begin with the "healthy polite self" and end at the "truly split-off compliant False Self."<sup>126</sup> When an infant has a high degree of splitting, according to Winnicott, he or she

---

<sup>117</sup> Winnicott believes that most mothers know how to give their infant proper care; physically, emotionally, and psychologically (*The Child, the Family, and the Outside World*, 238).

<sup>118</sup> Winnicott, *The Maturation Processes*, 145.

<sup>119</sup> Winnicott, *The Maturation Processes*, 147.

<sup>120</sup> Palombo, *Guide to Psychoanalytical*, 152.

<sup>121</sup> Winnicott believes that when an infant complies with the mother that he or she had just entered into the earliest stage of the False Self (*The Maturation Processes*, 145.)

<sup>122</sup> Palombo, *Guide to Psychoanalytical*, 150.

<sup>123</sup> Winnicott believes that the first real trauma an infant experiences is during the birth process. This trauma is short lived though if the infant is "quickly swaddled, warmly held" as this addresses the distress ("The Theory of the Parent-Infant Relationship," 593).

<sup>124</sup> Winnicott, *The Maturation Processes*, 146.

<sup>125</sup> Winnicott, *The Maturation Processes*, 147.

<sup>126</sup> Winnicott, *The Maturation Processes*, 150.

is unable to use symbols in a healthy way as well as being unable to enter into the space between “the dream and the reality.”<sup>127</sup> A child living out of the False Self presents as being very restless, unable to concentrate, and has a deep need to “collect impingements from external reality” which must be responded to.<sup>128</sup>

The True Self and False Self are elements that develop beyond infancy, for an adult also forms a False Self as a form of self-protection. Suffering the trauma of losing an adult sibling through death, losing the relationship of a close friend, or losing the dream of having children, are all events that are traumatic enough to cause a split in the identity of an individual, resulting in the formation of a False Self.

#### **2.4.3 Additional Uses of Winnicott’s Concepts**

Winnicott concepts can be seen in adult behavior as well, such as engaging in the arts or religious practices.<sup>129</sup> Another way Winnicott’s concepts have been used with adults is as “metaphors” in the therapeutic relationship between therapist and client.<sup>130</sup> Analysts such as Michael Balint (1896–1970), Rene Spitz (1887–1974), Hans Loewald (1906–1993), and Maxwell Gitelson (1902–1965) viewed the analytic setting as “an open system. . . in which the ego must be considered in relation to its human environment.”<sup>131</sup>

Winnicott endorsed “the term ‘holding environment’ as a metaphor for certain aspects of the analytic situation and the analytic process” knowing that this metaphoric term “has a much broader application and extends beyond the infantile period.”<sup>132</sup>

Winnicott explained this process as “the analyst is *holding* the patient” through words

---

<sup>127</sup> Winnicott, *The Maturation Processes*, 150.

<sup>128</sup> Winnicott, *The Maturation Processes*, 150.

<sup>129</sup> Winnicott, *Playing and Reality*, 4.

<sup>130</sup> Chescheir, “Some Implications of Winnicott’s Concept,” 220.

<sup>131</sup> Modell, “The Holding Environment,” 289.

<sup>132</sup> Modell, “The Holding Environment,” 289.

spoken revealing that the analyst perceives the emotional distress within the patient.<sup>133</sup> In psychotherapy, Winnicott promotes the idea that two people play together when possible, but if not, then the therapist helps the patient move from “a state of not being able to play into a state of play.”<sup>134</sup>

The metaphoric holding environment is used in a variety of therapeutic and pastoral situations. Some of the settings are: to aid pediatric staff who work with traumatized and grieving children and parents,<sup>135</sup> in residential child care facilities,<sup>136</sup> to aid students while working on doctoral programs and in the dissertation process,<sup>137</sup> and to aid therapists working with anxious individuals.<sup>138</sup> For the purpose of this thesis Winnicott’s metaphors of a good-enough mother, a holding environment, and a potential space will be adapted to that of the caring faith community–traumatized individual relationship.

The holding environment and potential space can be formed in various ways. Three methods will be used in this thesis: (1) metaphorical language that the traumatized individual names,<sup>139</sup> (2) the physical structure of the building used for worship, (3) and compassion from the caring faith community. The premise is that as the traumatized individual encounters any one of the above three venues, he or she will begin to reconnect to self, others, and God once again.

Being able to reconnect to God after a traumatic experience is very important to those in the Christian community. Yet, this has been identified as one of the areas that is

---

<sup>133</sup> Winnicott, *The Maturation Process*, 240.

<sup>134</sup> Winnicott, *Playing and Reality*, 38.

<sup>135</sup> McCoyd, “A Different Kind of Holding Environment,” 5.

<sup>136</sup> Steckley, “Containment and Holding Environments,” 120.

<sup>137</sup> Fletcher et al., “Getting Connected,” 90.

<sup>138</sup> Huh, “Non-anxious Presence of Jesus,” 586.

<sup>139</sup> Babits, “Using Therapeutic Metaphor,” 23.

affected when an individual is traumatized. To understand how to help a person reconnect to God one needs to understand how faith in God is first developed. The following section will engage with Fowler's stages of faith to explain how faith is developed through life.

## **2.5 Spiritual Growth and Faith in God**

Spiritual growth and faith in God are important aspects of the formation of a healthy identity as well as important aspects to this thesis. Studies have proven that faith in God or a higher power is "an important predictor of physical and mental health across many societies."<sup>140</sup> Therefore losing faith in God due to a traumatic event affects one's mental health. Research shows that trauma damages an individual's "sense of trust and security in the world."<sup>141</sup> Once trust has been damaged there appears to be two directional responses: either towards God for strength and meaning or away from God in accusatory anger. Either one of these two responses involves the perception of God. Therefore it is crucial to understand how faith in God is developed.

Author James Fowler argues that faith develops as an individual goes through various stages from birth to adulthood.<sup>142</sup> Understanding faith development and how trauma affects one's faith is beneficial when working with traumatized individuals in a faith based community. Exploring Fowler's stages of faith development will enhance an understanding in this area.

---

<sup>140</sup> Smith, "Exploring the Interaction," 231.

<sup>141</sup> Smith, "Exploring the Interaction," 233.

<sup>142</sup> Fowler, *Stages of Faith*, 112.

### 2.5.1 Fowler's Stage Theory of Faith Development

Fowler believes that all human beings are born with “nascent faith” that matures as the child grows physically and emotionally from infancy to adulthood.<sup>143</sup> The maturity process is dependent on how the immediate family welcomes the child and what the environment is like physically, emotionally, and spiritually. Since faith is “interactive and social” according to Fowler, “community, language, ritual, and nurture” are required to ensure maturity.<sup>144</sup> Faith, from Fowler’s perspective, is “a dynamic existential stance, a way of leaning into and finding or giving meaning to the conditions” of an individual’s life.<sup>145</sup>

Seven phases of faith development from birth to death have been identified by Fowler: infancy and undifferentiated faith; intuitive–projective; mythic–literal; synthetic–conventional; individuative–reflective; conjunctive faith; and universal faith.<sup>146</sup> The first phase is classified as a pre–stage due to the fact that infants cannot do participate in empirical research.<sup>147</sup> In the pre–stage, an infant develops trust, courage, hope, and love which enables him or her to ward off any threats of abandonment, inconsistencies and deprivation.<sup>148</sup> The faith development in this phase is that of basic trust along with the “relational experience of mutuality with the one(s) providing primary love and care.”<sup>149</sup>

Stage one involves the inquisitive preschool child, ages two to seven, who continually asks “what” and “why.” At this age, the child is often unable to distinguish

---

<sup>143</sup> Fowler, *Stages of Faith*, xiii.

<sup>144</sup> Fowler, *Stages of Faith*, xiii.

<sup>145</sup> Fowler, *Stages of Faith*, 92.

<sup>146</sup> Fowler drew upon the work of Jean Piaget, Lawrence Kohlberg, and Erik Erikson when developing the stages of faith theory (*Stages of Faith*, 39).

<sup>147</sup> Fowler, *Stages of Faith*, 121.

<sup>148</sup> Fowler, *Stages of Faith*, 120.

<sup>149</sup> Fowler, *Stages of Faith*, 121.

between fantasy and reality.<sup>150</sup> During this time the child forms very basic ideas about God derived from interactions with parents and society.<sup>151</sup>

Stage two involves the school-age child. In this stage, the child learns faith through stories, and develops the ability to narrate his or her own life story.<sup>152</sup> The mind thinks concretely and perceives symbols as being literal.<sup>153</sup> Some individuals never grow past this faith stage through adulthood.<sup>154</sup>

As the child moves into the teenage years he or she enters into stage three, which is highlighted by the loyalty to peers and social groups outside of the home.<sup>155</sup> Faith in this stage “synthesize(s) values and information” to form the young person’s identity.<sup>156</sup> The individual is usually unable to think outside of the parameters established by peer groups or religious groups. Values and ideology are very important in this stage, but these concepts have come from others, and seldom are examined “explicitly or systematically.”<sup>157</sup> Most individuals never grow out of this stage in faith development. Transitioning into the next stage requires breaking the reliance on external authority and specific values.<sup>158</sup>

Stage four primarily involves young adults, but many individuals fail to transition into this stage until the mid-thirties or forties.<sup>159</sup> Typically, a life crisis precipitates the transition, similar to the examples given in this thesis, resulting in an increased maturity

---

<sup>150</sup> Fowler, *Stages of Faith*, 123.

<sup>151</sup> Fowler, *Stages of Faith*, 133.

<sup>152</sup> Fowler, *Stages of Faith*, 136.

<sup>153</sup> Fowler, *Stages of Faith*, 136.

<sup>154</sup> Fowler, *Stages of Faith*, 149.

<sup>155</sup> Fowler, *Stages of Faith*, 150.

<sup>156</sup> Fowler, *Stages of Faith*, 162.

<sup>157</sup> Fowler, *Stages of Faith*, 173.

<sup>158</sup> Fowler, *Stages of Faith*, 162.

<sup>159</sup> Fowler, *Stages of Faith*, 182.

level evident by individuating apart from a group. At this time there is an ability to enter into self-reflection, which often leads to disillusionment with former faith beliefs.<sup>160</sup>

Stage five, seldom occurs before mid-life. In this stage individuals are able to see the complexities of situations for there is an understanding that life can be contradictory and full of mystery.<sup>161</sup> Also, there is an ability to recognize that truth and value can be obtained from traditions other than those currently embraced by the individual.<sup>162</sup>

The sixth and final stage is attained by very few individuals. Reaching this stage in life involves elements such as walking down a difficult path, resulting in the ability to live in a community where life is embraced yet held loosely.<sup>163</sup> Maturity allows liberation from the social, political, and economic ideology.<sup>164</sup> Individuals who arrive at the final stage live an inclusive lifestyle looking beyond the confines of a specific belief system and the ethos of a community.<sup>165</sup>

Understanding the stages of faith development is very important when working with traumatized individuals, as faith plays a role in personality development. As stated in chapter 1, a traumatic event has the power to leave an individual feeling “disconnected from self, others, and God.”<sup>166</sup> Faith in God is an anchor for many; therefore, losing that anchor can be devastating emotionally, psychologically, and spiritually. Part of the recovery process is helping the traumatized individual reconnect back to faith in God and to the knowledge that God’s love remains regardless of what has occurred in one’s life.

---

<sup>160</sup> Fowler, *Stages of Faith*, 182.

<sup>161</sup> Fowler, *Stages of Faith*, 186.

<sup>162</sup> Fowler, *Stages of Faith*, 186.

<sup>163</sup> Fowler, *Stages of Faith*, 200.

<sup>164</sup> Fowler, *Stages of Faith*, 202.

<sup>165</sup> Fowler, *Stages of Faith*, 200.

<sup>166</sup> Herman, *Trauma and Recovery*, 56.



Many individuals will blame God after encountering a traumatic event. Questions about God's provision and protection may come forth as part of the recovery process. Understanding the faith stages enables the caring other to identify what stage the traumatized individual is functioning from, thereby knowing what belief systems are being embraced and what internal struggles are predominant. According to Fowler, most individuals do not move past stage three, as there is an unwillingness to break out of the structure and rules found in this stage. Yet, a crisis or a traumatic event often forces an individual to move outside of the structure of a specific denomination or theology.

This thesis views Fowler's theory as a coherent and credible theory of faith development. However, some scholars have challenged his theory on several different issues. The critical themes of concern are: "the issue of Fowler's understanding of faith; the theory's structural logic of development; its over-emphasis on cognition and consequent lack of attention to emotional/psychodynamic dimensions as processes of transition and transformation; its gender bias and cultural specificity; and its purported difficulty in accommodating postmodern trends in psychology."<sup>167</sup> In the article "Critical Responses to Faith Development Theory: A Useful Agenda for Change?" Adrian Coyle expounds on the criticisms researchers and theologians have brought against Fowler's Faith Development Theory. This thesis recognizes the concerns but also recognizes that Fowler's theory "has been enormously influential in a range of applied religious-related domains."<sup>168</sup> Even though there has been criticism concerning Fowler's faith development this does not advocate discarding "the observation that people construct the meaning of their lives and faith in different ways, that these constructions may change in

---

<sup>167</sup> Coyle, "Critical Response to Faith Development Theory," 2.

<sup>168</sup> Coyle, "Critical Response to Faith Development Theory," 20.

significant ways during the course of their lives, nor that they display regularities which may profitably be compared.”<sup>169</sup> There may be concerns about Fowler’s theory, but the premise that faith changes and evolves as an individual develops physically and psychologically and that trauma has the capacity to affect one’s faith are important elements in this thesis.

## 2.6 Conclusions

This chapter defined the concepts of “identity,” “self,” and “*imago dei*.” Being created in the image of God was established as an important concept when helping individuals recover from trauma. Human beings are valuable because they are made in the image of God therefore they deserve to receive help from the Christian community whether they acknowledge God or not. The formation of a healthy identity was explored by briefly viewing four theories of personality development; Freud, Jung, Erikson, and Fowler. Winnicott’s concepts of the True Self and the False Self were examined. It was discovered that trauma could cause the formation of the False Self as a means of protecting the True Self. Winnicott’s concept of the “holding environment” was explored with the understanding that therapists use this concept as a metaphor for the therapeutic relationship. The idea of the holding environment being used metaphorically for the relationship the caring community of faith enters into when working with traumatized individuals was introduced in this chapter.

The following chapter will explore how trauma affects those who experience displacement. Displacement has the potential to affect one’s faith in God and others. When an individual is shown compassion and exhibits elements of resilience there is a greater chance that his or her faith will recover from the effects of trauma.

---

<sup>169</sup> Heywood, “Faith development theory,” 264.

## **Chapter 3: Exploring Displacement Trauma and Components for Recovery**

### **3.1 Introduction**

This chapter will focus on *displacement trauma*, the first of three forms of trauma. There are three sections in this chapter: the first section will give the definitions of compassion, resilience, and posttraumatic growth and discuss how these components are part of the recovery process. The second section will expound on the biblical and contemporary displacement narratives. The first narrative will be the Paul and Barnabas disagreement. To bring further understanding to this biblical narrative, the cultural, social, economic, and religious aspects distinctive to the historical time in which Paul and Barnabas lived will be considered. The second narrative will share the account of Dottie and Mike Parish—a married couple who co-authored a book about the struggles they faced in their home church, the arduous process they faced when deciding to leave, and the trauma that ensued. The Parish’s account of working through their trauma while finding another church will also be contemplated. The third section will weave the biblical and contemporary narratives together to reveal the creative interplay between the two stories.

### **3.2 Components for Recovery**

Recovery from a traumatic event is a process, which often involves support from others. In this thesis, the support will come from a “caring Christian community.” For recovery to occur members of the Christian community, and the traumatized individual need to possess certain attributes. First, the traumatized individual must have emotional resilience since it is the characteristic that will give him or her the ability to endure the recovery process. For many, the recovery process is difficult and often appears

counterproductive in nature as the individual's ability to function becomes temporarily compromised. Specifically, emotions are left raw and wayward, joy dissipates, and a shroud of silence often surrounds the traumatic event. Despite these challenges, some individuals have discovered that trauma does not always have to be negative—positive elements can develop during the recovery process. Second, the caring Christian community must possess compassion. Compassion enables the traumatized individual to connect with the one offering aid and support. Showing compassion toward someone in emotional distress provides an emotionally safe place for people to express their pain and distress. Lack of compassion, for many traumatized individuals, will cause an unwillingness to risk and to be vulnerable with another. One of the goals of the Christian community is to provide a safe place for those who have been traumatized.

Elements of compassion, resilience, and post-traumatic growth will be explored in the following three sections.

### **3.2.1 Compassion**

The word compassion is derived from the Latin words *pati* and *cum*, which means, “to suffer with.”<sup>1</sup> God is described as “the Father of compassion and the God of all comfort” (2 Cor 1:3). God chooses to suffer with those who have been traumatized. He comes and dwells with those who have been traumatized. God asks those who love him to also suffer with those who have been traumatized. Jesus establishes the standard for his followers by telling them to be compassionate like their heavenly Father is compassionate (Luke 6:36). The apostle Paul reinforces Christ's words by “telling his readers to ‘put on’ compassion, kindness, humility, gentleness, and patience.”<sup>2</sup> One

---

<sup>1</sup> Nouwen, et al., *Compassion*, 4.

<sup>2</sup> Bruce, *The Epistles to the Colossians*, 153.

translation states: “Therefore, as God’s chosen people, holy and dearly loved, clothe yourself with compassion, kindness, humility, gentleness, and patience” (Col 3:12 NIV).

This mandate given to the early church remains valid today; the community of God is called “to enter into the suffering of others with active help.”<sup>3</sup> Active help, which is to “stand firm in the face of the multivalent reality of suffering”<sup>4</sup> goes against human nature, which is inclined to turn away from emotional pain. The God of compassion asks the Christian community to enter into solidarity with those who are frequently viewed as outcasts. Often, traumatized individuals “find their plight to be unbearable without human and/or divine compassion.”<sup>5</sup>

It is to these very people that God asks the Christian community to extend the gift of compassion by entering into “voluntary displacement.”<sup>6</sup> Nouwen defines voluntary displacement as “going directly to those people and places where suffering is most acute and building a home there.”<sup>7</sup> When one builds a home, or in other words when one extends compassion through offering support, giving of time, and aid to the traumatized, solidarity is formed between those who have been shattered and those who want to assist in the recovery process. Pastoral theologian Phil Zylla states that, “solidarity is ... a posture of identification with those who suffer.”<sup>8</sup> Christ entered “into the conditions of human suffering” to identify with those who have been traumatized.<sup>9</sup> He invites the

---

<sup>3</sup> Zylla, *The Roots of Sorrow*, 105.

<sup>4</sup> Zylla, *The Roots of Sorrow*, 106.

<sup>5</sup> Zylla, *The Roots of Sorrow*, 110.

<sup>6</sup> Voluntary displacement refers to members of the caring community choosing to enter into the pain of the traumatized individual’s world while he or she is recovering. This is a different form of displacement than “displacement trauma” which is being addressed in this chapter. (Nouwen et al., *Compassion*, 27.)

<sup>7</sup> Nouwen et al., *Compassion*, 27.

<sup>8</sup> Zylla, *The Roots of Sorrow*, 107.

<sup>9</sup> Zylla, *The Roots of Sorrow*, 109.

compassionate community of God to “share in the path of downward love”<sup>10</sup> by “participating in...a self-emptying, humiliating movement”<sup>11</sup> of solidarity with the traumatized. Compassion needs to be extended to traumatized individuals but it is not all that is needed for recovery to occur. The traumatized individual needs resilience to provide endurance as recovery is taking place.

### 3.2.2 Resilience

Resilience is the capacity that enables a traumatized individual to move out of deep emotional pain into recovery. Psychiatrist Paul Blenkiron describes resilience as “the bridge between illness and wellness—from emotional distress into emotional health.”<sup>12</sup> Gill Windle believes resilience is “the process of effectively negotiating, adapting to, or managing significant sources of stress or trauma.”<sup>13</sup> Resilience results in one “having a sense of purposeful living.”<sup>14</sup>

There are at least three characteristics that aid in the development of resilience: a supportive family, a supportive community, and “a positive and meaningful view of life.”<sup>15</sup> When an individual does not have a supportive family from which to draw support, the spiritual community often becomes a surrogate family offering care to the traumatized, as well as providing an environment to develop a positive and meaningful view of life.

The terms “spirituality” and “religion” are often associated with the concept of resilience.<sup>16</sup> Recently, a longitudinal study on resilience indicated that individuals named

---

<sup>10</sup> Zylla, *The Roots of Sorrow*, 109.

<sup>11</sup> Nouwen et al., *Compassion*, 29.

<sup>12</sup> Blenkiron, *Stories and Analogies*, 300.

<sup>13</sup> Windle, “What is Resilience?” 152.

<sup>14</sup> Glenn, “A Bridge Over Troubled Waters,” 39–40.

<sup>15</sup> DuMont, et al., “Predictors of resilience,” 265.

<sup>16</sup> Glenn, “A Bridge Over Troubled Waters,” 40.

spirituality as a protective element in developing a positive response to the difficulties of life.<sup>17</sup> Traumatized individuals “search for God” out of a deep desire to discover “God’s love and justice despite what they have endured.”<sup>18</sup> Many find God through connecting with religious or spiritual communities, which also aids in restoring the fractured interpersonal relationships caused by trauma.<sup>19</sup>

Resilience, while commonly referenced to an individual, can also be displayed through a family unit, a church body, or a community. A resilient congregation consists of reliable relationships that form a community of trust.<sup>20</sup> Trusting and caring others are needed to share in the journey. As an individual shares a painful narrative with the resilient congregation a reframing of the situation occurs.<sup>21</sup> Tim Shapiro, president of the Indianapolis Center for Congregations, states that a resilient congregation coaches people concerning life issues since “the religious life holds much wisdom about resiliency,” wisdom that can be shared “within the context of congregational life.”<sup>22</sup> Therefore, a traumatized individual will find resources in a resilient congregation.

### **3.2.3 Posttraumatic Growth**

The outcome of emotional trauma is normally viewed as damaging,<sup>23</sup> yet it also has the potential to be a catalyst for transformation and growth.<sup>24</sup> Literature in the last few decades suggests that positive elements often emerge during the recovery process.<sup>25</sup>

---

<sup>17</sup> Glenn, “A Bridge Over Troubled Waters,” 42.

<sup>18</sup> Glenn, “A Bridge Over Troubled Waters,” 46.

<sup>19</sup> Glenn, “A Bridge Over Troubled Waters,” 45-46.

<sup>20</sup> Zylla, “Cultivating the Resilient Congregation,” 111.

<sup>21</sup> Zylla, “Cultivating the Resilient Congregation,” 111.

<sup>22</sup> Shapiro, “Resilient Congregations,” 22.

<sup>23</sup> According to Tedeschi and Calhoun there is strong evidence which verifies that “traumatic events can produce many negative physical and psychological consequences” (“The Posttraumatic Growth Inventory,” 455).

<sup>24</sup> Cane, *Trauma, Healing and Transformation*, 17.

<sup>25</sup> Tedeschi and Calhoun, “The Posttraumatic Growth Inventory,” 455.

These positive elements have been referred to as *posttraumatic growth*, which is defined as “positive psychological change experienced as a result of the struggle with highly challenging life circumstances.”<sup>26</sup>

Posttraumatic growth is evidenced in the areas of self-perception, interpersonal relationships, and philosophy of life.<sup>27</sup> Richard G. Tedeschi and Lawrence G. Calhoun state that “cognitive processing and disclosure” are two necessary elements that facilitate posttraumatic growth.<sup>28</sup> For example, once a safe place has been established, and time is given for an individual to process a traumatic event, then disclosure of the trauma becomes easier. It is through this process that two elements of posttraumatic growth often emerge—inner strength and increased self-assurance.<sup>29</sup> In turn, inner strength and increased self-assurance create a healthier self-perception, which promotes better interpersonal relationships.

Increased self-assurance and inner strength develops as individuals discover a sense of personal triumph over fears concerning the ability to function after a personal crisis. Frequently, individuals struggle with fear, that should personal tragedy ever occur, they would not be able to continue functioning optimally. However, once the individual discovers that a traumatic event does not result in emotional or psychological destruction, a new sense of power to conquer future crises emerges. Another positive outcome of an emotionally traumatic event is an increased desire to deepen interpersonal relationships

---

<sup>26</sup> Tedeschi and Calhoun, “Posttraumatic Growth,” 1.

<sup>27</sup> Tedeschi and Calhoun, “Posttraumatic Growth Inventory,” 456

<sup>28</sup> Wortman disagrees with Tedeschi and Calhoun’s theory and presents data that cognitive processing does not seem to be involved in growth. Also Wortman believes that when a person discloses others often feel awkward by the distress being expressed. Therefore people will go to great lengths to discourage displays of emotion (“Posttraumatic Growth: Progress and Problems,” 1).

<sup>29</sup> Tedeschi and Calhoun, “Posttraumatic Growth Inventory,” 456.



with family and friends.<sup>30</sup> Experiencing a traumatic event often causes one to realize that family and friends hold more importance than possessions and status, resulting in a desire to no longer take these relationships for granted.<sup>31</sup>

While posttraumatic growth is a phenomena witnessed and acknowledged within secular counselling, it is more so an *expected* occurrence within the Christian community.<sup>32</sup> This expectation arises out of the Christian's knowledge that God's redemptive purpose for humanity involves redeeming traumatic experiences into something of value (Ps 30:11). Expressing the love of God toward those who have been traumatized through compassionate acts of kindness is one way of showing redemption. Members of a caring community of faith can connect with a traumatized individual and facilitate recovery in the areas of self-perception and interpersonal relationships, resulting in a shift in philosophy of life. Examples of posttraumatic growth will be illustrated in the thesis narratives.

### 3.3 Displacement Trauma

The definition for displacement trauma referenced for this thesis is as follows: "the sudden or unexpected removal of an individual or a people group from a position of authority or relationship."<sup>33</sup> In other words, displacement trauma is losing "the sense of having a safe place to retreat within or outside oneself to deal with frightening emotions and experiences."<sup>34</sup> The biblical and contemporary narratives chosen as examples of

---

<sup>30</sup> Tedeschi and Calhoun, "Posttraumatic Growth Inventory," 456.

<sup>31</sup> Tedeschi and Calhoun, "Posttraumatic Growth Inventory," 456.

<sup>32</sup> Hiltner believes that traumatic situations are to be viewed as opportunities for growth and development in the Christian pastoral counseling field (*Pastoral Counseling*, 25).

<sup>33</sup> Merriam-Webster Dictionary, The word displacement comes from the root word "displace" which is defined "to remove from a job or position."

<sup>34</sup> Van der Kolk, *Psychological Trauma*, 31.

displacement trauma involve those who voluntarily chose to leave a position or relationship, due to interpersonal conflicts within the Christian community.

Becoming a Christian involves entering into “covenant with God in Christ”<sup>35</sup> as well as a “covenantal relationship”<sup>36</sup> with others who profess to be Christians. In the covenantal relationship one of the motifs used is that of “family.” In this motif God is viewed as “Father,” Jesus as “the elder brother,” and the Holy Spirit as “the Comforter.” The relationship amongst fellow Christians develops into what is called “fictive kinship,” which is similar in nature to that of a close-knit family.<sup>37</sup> For example, congregants often use kinship language such as “brother” or “sister” when referring to one another.<sup>38</sup> Because of the close emotional bonds that develop, when an individual leaves a Christian community due to an interpersonal conflict, deep emotional pain often occurs. Typically, it is the one leaving who feels displaced from the identity of the group. This experience can be compared to the death of a loved one or the end of a marriage.<sup>39</sup> Members of a Christian community, like all human beings, have a basic need to belong and to feel included,<sup>40</sup> so when an individual leaves a congregation, these two needs are often no longer met easily.<sup>41</sup>

---

<sup>35</sup> Grenz believes that Christians enter into a covenant with Christ and with fellow believers that “is greater than all other human bonds.” This bond links believers as “one unified people” who agree “to walk together” and to “be in relationship with one another” (*Theology for the Community of God*, 480-81).

<sup>36</sup> Grenz, *Theology for the Community of God*, 480.

<sup>37</sup> DeSilva, *An Introduction to the New Testament*, 143.

<sup>38</sup> According to DeSilva, in the early church, when individuals converted to Christ they took on “common devotion to a particular set of ideals and way of life” which was sufficient to make them kin. Those who followed Christ formed a community by adhering to the roles of a biological family. This community of believers becomes a spiritual family with God as their father. (*An Introduction to the New Testament*, 142).

<sup>39</sup> Parish, *Changing Churches*, 31.

<sup>40</sup> Nouwen, *The Inner Voice of Love*, 57.

<sup>41</sup> Vanier and Whitney-Brown, *Essential Writings*, 160.

The narrative of Barnabas and Paul will be examined for the biblical example of displacement trauma. Reflection on the narrative of Dottie and Mike Parish will be for the contemporary example of displacement trauma.

### 3.3.1 Biblical Narrative: Paul and Barnabas' Disagreement

Barnabas<sup>42</sup> was a Levite from Cyprus<sup>43</sup> who loved to encourage and mentor believers.<sup>44</sup> The essence of his character was revealed when he gave money from the sale of a field to the apostles “to meet the needs of those in the church community,”<sup>45</sup> (Acts 4:36–37). Barnabas a respected leader in the Jerusalem church<sup>46</sup> was assigned as “bishop” to oversee the Antioch church (Acts 11:22).<sup>47</sup>

On the other hand, Paul, formerly known as Saul, was a “deeply devout Jew”<sup>48</sup> who persecuted Christians until he encountered Christ through a dramatic conversion experience (Acts 9: 1–9).<sup>49</sup> After encountering Christ he attempted to join the believers at the church in Jerusalem but was rejected until Barnabas testified on his behalf (Acts 9:27). Barnabas’ reputation “built a bridge of trust”<sup>50</sup> between Paul and the Christians in Jerusalem. Later, Barnabas invited Paul to assist him with the Antioch congregation

---

<sup>42</sup> Acts 4:36. The name Barnabas came from the apostles acknowledging his passion to encourage others; The author of Acts refers to Barnabas as being ‘good.’ He is the only man in the book of Acts to be called this (Witherington, *The Acts of the Apostles*, 370).

<sup>43</sup> According to Read–Heimerdinger, Barnabas’s family was Jewish but not Palestinian Jews. Some time before Joseph (Barnabas) was born his family converted to Judaism. Also they were not natives of Cyprus but rather exiles. Heimerdinger believes that Barnabas is the same man mentioned as a possible replacement of Judas, and that his lineage may have been the reason why he was not chosen when his qualifications were superior to those of Matthias (“Barnabas in Acts,” 35–36).

<sup>44</sup> Hoefer, “Principles of Cross-Cultural,” 143.

<sup>45</sup> According to Hoefer, the land that Barnabas sold would have been his ancestral property deemed as part of his family inheritance (“Principles of Cross-Cultural,” 139).

<sup>46</sup> The church in Antioch was the first Gentile church in Christendom (Hoefer, “Principles of Cross-Cultural,” 140).

<sup>47</sup> According to Grenz, the New Testament term ‘bishop’ represents a “supervisory task” of shepherding or guiding the congregation and providing administrative direction (*Theology for the Community of God*, 558–559).

<sup>48</sup> Wright, *Acts for Everyone: Part One*, 139.

<sup>49</sup> Saul was present at Stephen’s death and spoke death threats against the Christians (Acts 7:54–8:3; 9:1).

<sup>50</sup> This event shows the admiration the apostles held for Barnabas even though he was not an official apostle (Tenney and Longenecker, *John and Acts*, 378).

where they ministered together for a year before going to Asia Minor on a missionary trip.<sup>51</sup>

While “spreading the Gospel around the Gentile world”<sup>52</sup> these two men experienced great joy from witnessing new converts as well as strong opposition to the gospel message (Acts 13:6–11; 14:1–6, 20–23). At the end of the missionary trip, Paul and Barnabas returned to their ministry and congregation in Antioch until Paul expressed to Barnabas a desire to return to the new converts in Asia Minor (Acts 15:36). Barnabas agreed to go on the trip only if John Mark,<sup>53</sup> another Christian disciple, was included (Acts 15: 37).<sup>54</sup> Paul strongly disagreed with Barnabas’ idea (Acts 15:39). Unfortunately, the dispute could not be resolved and as a result their ministry partnership dissolved. Subsequently, Barnabas left with John Mark for Cyprus<sup>55</sup> and Paul went with Silas to Syria (Acts 15:39–40).

Before the conflict, Paul and Barnabas lived as brothers for over three years.<sup>56</sup> They ministered as a team during their time in Antioch and in Asia Minor. So, when the

---

<sup>51</sup> Hoefer believes that Barnabas mentored Paul for two years; the first year while at Antioch, and the second year while on the first missionary trip. When the church sent Barnabas and Paul out they were willing to send out two of their most gifted leaders. The cities visited were Cyprus, Paphos, Pisidian, Antioch, Iconium, Lystra, and Derbe (“Principles of Cross–Culture,” 141–143).

<sup>52</sup> Hoefer, “Principles of Cross–Cultural,” 141.

<sup>53</sup> John Mark is a very noteworthy disciple. He was part of Paul and Barnabas’ first missionary venture, but abandoned them before the trip was over (Acts 13:13). He is also mentioned when Peter is released from jail by the angel, as he goes to stay at Mary’s house, the mother of John Mark. He is mentioned elsewhere in the New Testament (Col 4:10; Phlm 2; 2 Tim 4:11; 1 Pet 5:13) and it is believed that he is the author of the second Gospel (Bruce, *The Book of Acts*, 238).

<sup>54</sup> The author believes that Barnabas requested John Mark because he had been mentoring him and wanted to continue to do so (Hoefer, “Principles of Cross–Culture,” 145).

<sup>55</sup> After leaving Barnabas and Paul, John Mark is not heard from again until 1 Peter 5: 13, Col 4:10 and Phlm 24. John Mark appeared much stronger after being with Barnabas in Cyprus. Years later he had a very successful relationship with Peter and eventually he became a member of Paul’s team. His impact upon Paul was so significant that when Paul was nearing the end of his life he requested that John Mark visit him in prison (2 Tim 4:11). Gangel feels that the work Barnabas did with John Mark was the most significant thing that Barnabas ever did (Gangel, *Acts*, 260).

<sup>56</sup> Witherington states that Barnabas and Paul were “recognized as brothers in the Jewish faith” (*The Acts of the Apostles*, 406); Both men were classified as brothers through their Christian faith as well (Hellerman, *When the Church was a Family*, 40).

disagreement occurred, and their long-term ministry relationship ended, there was great potential for trauma to ensue both Barnabas and Paul. Trauma always involves loss, whether it is a physical loss of something tangible like a person or an object, or the psychosocial loss of something intangible such as the loss of a position, status, or a dream.<sup>57</sup> Both Barnabas and Paul experienced loss in the severing of their relationship.

Barnabas lost his friendship with Paul when the relationship was severed, but he lost a lot more than just a friendship. He lost a ministry partner, a position of leadership in the Christian community as well as spiritual sons and daughters from the church in Antioch as well as the churches in Asia Minor.<sup>58</sup> After Barnabas parted ways with Paul there is no mention of him returning to the churches in Antioch or Asia Minor. Paul on the other hand continued to minister to the believers in both of these locations (Acts 15:39). Evidently, Barnabas lost his position of leadership in the Antioch church despite the fact that he was the first to be sent out as a bishop to minister (by the Holy Spirit) to the Gentiles in Antioch—a position that would have given him status and importance within the Christian community. (Acts 11:22; 13:2) Despite this arena of prominence, Barnabas chose to walk away from his position in Antioch due to his disagreement with Paul and his commitment to John Mark.

Paul also experienced loss through the termination of this ministry partnership. His loss centered on his relationship with Barnabas, as he retained his relationships with his spiritual sons and daughters in the churches of Antioch and Asia. Regardless of this fact, however, Paul lost fellowship with the one person who had believed that his conversion was authentic from the beginning. He lost a relationship with his mentor and

---

<sup>57</sup> Rando, *Treatment of Complicated Mourning*, 20.

<sup>58</sup> According to Hoefer, Barnabas and Paul became spiritual fathers to the new believers in Antioch and in Asia Minor (“Principles of Cross-Culture,” 144).

his travelling companion, but most of all he lost a relationship with his brother. These two men were classified as brothers in both the Jewish and Christian cultures.

The evidence that Paul and Barnabas' argument and consequent loss of friendship was traumatic can be seen in several ways. First, Paul became very angry with Barnabas for refusing to return to Asia Minor without John Mark (Acts 16: 39). Anger is one of the characteristics of an individual who has been traumatized and suffering from loss.<sup>59</sup> There is no mention of the two men discussing their different options to see if resolution was possible. Also, Barnabas was never seen holding a public role again; the scriptures reveal that he remained with John Mark in Cyprus (Acts 15:39).

### **3.3.1.1 Recovery from Displacement Trauma for Barnabas and Paul**

According to Nouwen, human beings are "primarily looking for experiences that give [them] a sense of value."<sup>60</sup> Drawing from Nouwen's assessment of human beings, Barnabas and Paul were looking for experiences that gave them a sense of value, such as ministering to others at the church in Antioch, preaching the gospel in Asia Minor, and mentoring new converts there. Once Barnabas left Paul he lost something that had given him value. While mentoring John Mark would also have given Barnabas a sense of value, his ministry with Paul to the churches in Antioch and Asia Minor would have done so on a much larger scale.

Paul on the other hand had many more life-giving experiences than Barnabas. Paul remained at the church in Antioch and went on two more missionary trips with Silas and others. His return to Asia Minor brought him in contact with his spiritual sons and daughters (Acts 15: 41).

---

<sup>59</sup> Rando, *Treatment of Complicated Mourning*, 36, 463.

<sup>60</sup> Nouwen, *The Wounded Healer*, 15.

Another aspect of trauma recovery is experiencing the constancy of God's love through supportive relationships. Judith Herman explains that trauma recovery requires connections with people since traumatic events involve the disconnection from them.<sup>61</sup> John Mark entered into a supportive relationship with Barnabas that enabled him to work through the displacement trauma. At first when Barnabas left with John Mark the original intent was to be his mentor. The relationship had a duality about it though, in that Barnabas benefited from it too, for it provided a sense of purpose and value for him. Secondly, John Mark was attentive to his relative, which enabled Barnabas' soul to heal. John Mark was able to create a type of transitional space<sup>62</sup> for Barnabas to receive God's love. The transitional space is an emotional space where individuals can recover from traumatic experiences of life.

As the traumatized individual spends time with the caring community of faith, a place of emotional safety is created. It is in this place that the narrative of the traumatic event can be talked about. After the emotional pain has been shared, then the individual begins to move out of the place of trauma and pain into a place of peace.

Paul's situation was very different from Barnabas' in that he returned to the Christian community in Antioch as one of their leaders. Paul and Silas also travelled through Asia Minor during Paul's second missionary trip. Therefore, there was a vast array of people that Paul could turn to for support and direction. Silas and the other believers in Antioch and Asia Minor helped Paul to establish a holding environment, which led to the potential space for him to heal.

---

<sup>61</sup> Herman, *Trauma and Recovery*, 135.

<sup>62</sup> This is explained in greater detail in chapters one and two. This thesis is postulating that when a person has suffered a trauma a caring other can help to create a holding environment which moves into a transitional space where the traumatized individual can recover and reconnect with God, self and others. John Mark had the potential of forming a transitional place with Barnabas (Tuber, *Attachment*, 122–23).

Compassion is the foundation of the holding environment and the potential space. Therefore, even though the scriptures do not directly mention John Mark or Silas showing compassion toward Barnabas and Paul during their recovery process, it is understood. The scriptures reveal later Peter and Paul commissioned the first century church to show compassion to others (Eph 4:32; Phil 2:1; Col 3:12; I Peter 3:8).

Active compassion translates into carrying one another's burdens (Gal 6:2). The Christian community is able to come along side those who have been traumatized and offer assistance during the recovery process. Active compassion also creates an enriched environment, where one is emotionally supported while experiencing some tension, which is what Cozolino described earlier in the thesis as a form of recovery work.<sup>63</sup>

Barnabas and Paul both exhibited resilience and posttraumatic growth in this biblical narrative. When Barnabas, in his traumatized state, left with John Mark, he could have chosen to withdraw from those around him, including God; instead, he turned his trauma into something of value—mentoring John Mark—something he believed in.

Like Barnabas, Paul also exhibited resilience in that he embraced a new ministry partner, and continued to minister to those in Asia Minor. Paul had the ability to adjust to ministering with Silas after working with Barnabas for over three years. The fact that Paul was able to step into a position of leadership, as well as mentor Silas and others is evidence of posttraumatic growth.

Barnabas and Paul choose to end their ministry partnership over a harsh disagreement which resulted in Barnabas leaving the congregation where he was loved and received as one of the leaders. What happens, however, when a parishioner chooses to leave their church family as a result of conflict with church leaders? A case study

---

<sup>63</sup> Cozolino, *The Neuroscience of Psychotherapy*, 20.



showing what happens will be in the next section.

### 3.3.2 Contemporary Narrative: Dottie and Mike's Story

Mike and Dottie Parish were loyal and committed parishioners at a United Methodist church for over ten years. One of the elements that originally drew them to this church was the use of the “family” motif—a concept that Dottie and Mike identified with and appreciated as it felt both inviting and nurturing to them.<sup>64</sup> They were active members in their congregation engaging in close friendships with a number of couples. In a letter to the pastor of the church, Dottie refers to having “incredible joy” due to her faith and her relationships with her church family—something that gave her life “meaning and purpose.”<sup>65</sup> For over six years, life in their church was going well for Mike and Dottie—both emotionally and spiritually. Then gradually, changes began to occur that emotionally destabilized them both.

The first trauma was when their senior pastor retired—seven years after they began attending the church.<sup>66</sup> The role this pastor filled for Dottie specifically was multifaceted—he functioned as “a pastor, counselor, teacher, and friend.”<sup>67</sup> Because of the significance this pastor played in Dottie’s life, his retirement was for her a huge loss, leaving her to grieve his departure.<sup>68</sup> The new pastor hired brought about change to the congregation. Specifically, he challenged the people through his messages unlike the previous pastor’s approach of comfort.<sup>69</sup> Despite this change, Dottie and Mike grew to love this new approach. However, two and a half years later this second pastor also left

---

<sup>64</sup> Parish, *Changing Churches*, 6.

<sup>65</sup> Parish, *Changing Churches*, 8.

<sup>66</sup> Parish, *Changing Churches*, 10.

<sup>67</sup> Parish, *Changing Churches*, 11.

<sup>68</sup> Parish, *Changing Churches*, 11.

<sup>69</sup> Parish, *Changing Churches*, 12.

the congregation creating yet another trauma for the couple.<sup>70</sup> The third pastor to fill the pulpit was a female “liberal and process theologian” who brought new concepts and unusual theology into the church.<sup>71</sup> After trying to convey concerns and objections for almost a year to no avail, Dottie and Mike made a decision to leave the church and the congregation they loved.<sup>72</sup>

By the time Mike and Dottie decided to leave the church they had lost a great deal. As previously mentioned, the Parish’s lost the spiritual support of their first two pastors—pastors who had been leading them along with the rest of the congregation into a deeper relationship with Christ. They also lost friends, who over the last ten years had become like family. They missed the warmth they received from others’ hugs, and eating meals with close friends from the congregation. Dottie felt that she lost some of her “self-esteem” as well as her ability to accept and love others as a result of feeling “very critical and untrusting” toward the new liberal pastor.<sup>73</sup>

Mike and Dottie eventually found a new church to attend. They became active members for seven years, until many changes to the structure of the service and worship time caused them to leave once again.<sup>74</sup> The shock and trauma of needing to leave yet another church caused Dottie to fall into a depression laced with both anger and self-pity.<sup>75</sup> As seen in Dottie’s admittance of depression, church life can have a tremendous impact on a parishioner’s emotional well-being.

---

<sup>70</sup> Parish, *Changing Churches*, 13.

<sup>71</sup> Parish, *Changing Churches*, 18.

<sup>72</sup> Parish, *Changing Churches*, 21.

<sup>73</sup> Parish, *Changing Churches*, 22.

<sup>74</sup> Parish, *Changing Churches*, 45.

<sup>75</sup> Parish, *Changing Churches*, 43.

### 3.3.2.1 Recovery from Displacement Trauma for Mike and Dottie Parish

For Mike and Dottie displacement trauma began months before physically leaving the church. Displacement began when the female pastor introduced new doctrines, which they could not embrace. The response to the displacement trauma was to seek help outside of the church. All of the components of recovery listed earlier in this chapter were present in Mike and Dottie's experience: resilience, posttraumatic growth, and compassion.

The first component that Dottie recounts in her narrative is resilience. The Parishes could have chosen to withdraw from the Christian community, Sunday worship, life, and God—instead direction was sought from God through prayer and journal writing.<sup>76</sup> Relationships with others in an ecumenical charismatic prayer group provided a safe place to share emotional pain and to seek prayer.<sup>77</sup>

Dottie experienced compassion from those in her prayer group.<sup>78</sup> The group listened to the laments and encouraged talking with them as well as with God in order to find direction. Posttraumatic growth was also evident through Dottie's journaling. Because of the pain she experienced, she spent more time turning toward God, and journaling. As a result, her relationship with God deepened. Yet, even after receiving compassion from new friends and demonstrating personal resilience, Dottie still suffered grief and sadness over her lost relationships.<sup>79</sup> She referred to the process of finding a new church "like trying to choose a new spouse before the divorce is final."<sup>80</sup>

As time went on Dottie's pain diminished; however, even after five years in a new

---

<sup>76</sup> Parish, *Changing Churches*, 23.

<sup>77</sup> Parish, *Changing Churches*, 23.

<sup>78</sup> Parish, *Changing Churches*, 23.

<sup>79</sup> Parish, *Changing Churches*, 30.

<sup>80</sup> Parish, *Changing Churches*, 31.

church she continued to miss the relationships she enjoyed with her first two pastors.<sup>81</sup>

Recovery for Mike and Dottie was a process that involved time as well as sorting through their emotions by engaging in conversation with others, receiving prayer from others, and journaling to God. The experience of displacement trauma through reluctant departure from one's church family due to interpersonal conflicts is a painful experience as the Parrish's book revealed.

In this postmodern culture, it is not uncommon for individuals and families to leave a church. When departure is due to work relocation, family situations, or other events not involving interpersonal conflicts, the separation appears to be substantially easier. But, when the departure is due to an interpersonal conflict with the church leadership or another member of the congregation then the separation seems to involve a greater degree of trauma.

When an individual becomes a Christian and fellowships with other Christians in a local congregation, he or she enters into a "covenant with God in Christ"<sup>82</sup> as well as a "covenantal relationship"<sup>83</sup> with others. A covenantal relationship involves the individual identifying with and merging into the identity of the group.<sup>84</sup> As such, the Christian community becomes an integral part of the faith walk for each member.

The pastor (or minister) plays a very significant role in the identity of the group. He or she fulfills specific duties pertaining to a Sunday service, such as preaching and presenting the sacraments for communion. Pastors also "educate and advise their

---

<sup>81</sup> Parrish, *Changing Churches*, 33.

<sup>82</sup> Grenz, *Theology for the Community of God*, 480–481.

<sup>83</sup> Grenz, *Theology for the Community of God*, 480.

<sup>84</sup> Meeks, *The First Urban Christians*, 86.

parishioners through stories and images.”<sup>85</sup> Yet, a pastor’s responsibilities also go beyond the duties concerning Sunday service. For example, often pastors act as counsellors and caregivers, offering to guide fearful people to the place where they are able share their pain.<sup>86</sup>

According to Nouwen, “a minister is not a doctor whose primary task is to take away pain. Rather, he [sic] deepens the pain to a level where it can be shared.”<sup>87</sup> Often, the minister is the first person to hear the trauma narrative verbalized. Once an individual shares their personal pain with a minister not only does a bond develop between the parishioner and the minister, but he or she now becomes vulnerable to the minister. After a heart has been opened, trust given, and a bond formed, losing a pastor can cause trauma to the parishioner. Should this occur, opening one’s heart in trust to a new minister can be all the more difficult.

Mike and Dottie endured several traumatic incidents while attending the first church. Trust toward the first two ministers had to develop, and then when each minister left there was a grieving over the loss of relationship. The third minister came with new ideas that were too unsettling for both Mike and Dottie. After much thought and prayer the decision was made to leave, but leaving was painful for this couple, and trusting a new congregation took time. Many individuals go through the same emotional distress that the Parishes did: making the decision to leave a congregation, going through the process of finding a new church to attend, trusting new people, and allowing time to establish friendships.

---

<sup>85</sup> Capps, *Life Cycle Theory*, 114.

<sup>86</sup> Nouwen, *The Wounded Healer*, 93.

<sup>87</sup> Nouwen, *The Wounded Healer*, 92.

### **3.4 A Creative Reflection of the Displacement Trauma Narratives**

In our postmodern society it is commonplace to leave a church after attending for a length of time and join another church, due dissatisfaction with the former church. When an individual or a family leaves the first church it can be traumatic, as revealed in the narratives earlier in this chapter. Research proved that it was traumatic both for Barnabas and Paul to sever their ministry partnership as well as for Dottie and Mike to leave their first church family. Upon reflection these two narratives have several similarities yet there are also discontinuities that will be explored below. The two similarities are “being intentional” and “knowing and following God’s mission.” The discontinuities are “the lack of evidence concerning seeking godly counsel from others when in crisis” and “ the lack of evidence concerning seeking God’s direction when in crisis.”

Barnabas and Paul were both educated Jewish men who heard the good news that Jesus Christ of Nazareth was the son of God and they chose to leave the life they knew with family and friends to follow Christ. For these two men the decision to follow Christ meant that they lost their family and friends. The other men and women who chose to follow Christ now became their family. They counted the cost and were willing to sacrifice family and friends to follow Jesus the redeemer. Mike and Dottie also heard the good news that Jesus Christ of Nazareth was the Son of God and they too choose to leave the life they knew to follow Christ. In both narratives it was an informed decision that they made intentionally. They both weighed the cost and made the decision and never regretted the decision regardless of the emotional and spiritual difficulties they faced throughout their Christian journey.

Being intentional is one of the elements that this thesis is focusing on. When a traumatized individual seeks help in the Christian community there needs to be an intentional response from the caring community of faith to assist. The members of the Christian community need to be educated concerning the effects trauma can have on an individual and the methods of recovery available. Barnabas and Paul were educated as to the choice they made to follow Christ just as Mike and Dottie were educated about the choice they made to leave their former lifestyle to follow Christ.

The issue of mission was also a similarity between the two narratives. Barnabas and Paul recognized that God had chosen them to do a specific mission, which was to train other disciples. They did not allow their disagreement to cause them to lose sight of their mission. Due to their disagreement they no longer carried out the mission together, but they did not deviate from their individual mission of training other disciples. They both put their mission from God above their friendship. The Scriptures reveal that Barnabas trained up John Mark, who is believed to be the author of the Gospel of Mark, and Paul had two additional mission trips to Asia Minor where he continued to train disciples in each of the cities. Paul also continued to train disciples even after his death through the information in his letters to each of the churches and other disciples. Today Paul's words continue to train disciples for his letters fill many of the pages in the New Testament.

Dottie and Mike also felt that God had given them a mission of being spiritual leaders, which they kept in the forefront of their decisions. In each church that Dottie and Mike attended they became involved immediately in leadership positions and were willing to serve those above them in whatever capacity was needed. They took this role

very seriously, so much so, that in the first church they continued to attend many months longer than desired due to a commitment they had as the leaders of a prayer group.

There are also discontinuities between the biblical narrative and the contemporary narrative. The first discontinuity is the lack of evidence in the biblical text concerning whether Barnabas and Paul sought godly counsel concerning their decision to sever their ministry partnership. These two men were key in spreading the gospel in Asia Minor and in training new disciples there and in Antioch. They had been placed in these positions from the leaders of the church in Jerusalem, yet there is no mention of Barnabas or Paul seeking direction from these leaders concerning the decision to end their ministry relationship. In the contemporary narrative Dottie mentions that her and Mike meet with the pastor of the church to discuss their concerns as well as meeting with other people they respected for spiritual direction before they made the decision to leave the church.

The other discontinuity is that there is a lack of evidence in the biblical text as to whether Barnabas and Paul prayed about their decision to end their ministry relationship. In later accounts from Paul he makes reference to praying before making decisions, but there is no mention of this in the Acts account of their argument. In the contemporary narrative Dottie mentions several times that she and Mike prayed about the decision to leave the church before they took action. The decision was not made in anger toward the pastor, even though they clearly did not agree with her doctrine. Yet in the biblical text it appears that the decision to end a successful ministry partnership was due to Paul's anger.

### **3.5 Conclusions**

This chapter began by identifying several components of recovery. The first component to be identified was compassion. The Christian community can offer



compassion toward those who have experienced a traumatic event. The concept of God as the Father of compassion asking his followers to suffer with those who have been traumatized was presented in this chapter. Understanding that individuals require resilience to recover from being traumatized was shared as well. The idea that trauma does not have to result in devastation and destruction was presented along with the idea that posttraumatic growth could potentially be another result of trauma. Displacement trauma was identified through exploring the Barnabas and Paul's narrative along with Mike and Dottie Parish's narrative. Each of the above people suffered trauma due to significant Christian relationships ending. The recovery process identified in this chapter was that of a caring community of faith nurturing and supporting those in the displaced narratives. The idea of the Christian community functioning as a holding environment was presented in this chapter concerning the biblical and contemporary displacement narratives.

As described throughout this chapter, being displaced is traumatic. There are other types of trauma that individual's experience, which result in a disconnection from God, others, and themselves. Chapter four will consider two of these other types of trauma—traumatic loss and identity trauma.

## **Chapter 4: Exploring Identity Trauma and Traumatic Loss**

### **4.1 Introduction**

This chapter will explore identity trauma and traumatic loss. Both types of trauma will be illustrated by one biblical narrative and one contemporary narrative. Attention will be given to the elements of trauma, compassion, resilience, and post-traumatic growth, which have been outlined in previous chapters. There will be a weaving together of the biblical and contemporary narrative for both types of trauma to sift out meanings, redemptive agency, and the implications of the gospel for today.

### **4.2 Identity Trauma**

Cote and Levine believe that identity formation involves the development and merging together of three aspects of life: the social identity, the personal identity, and the ego identity.<sup>1</sup> Subsequently, when an individual experiences trauma in any of these areas, the identity is affected. For the purpose of this thesis the focus will be directed to the issue of identity trauma resulting from infertility, also known as barrenness in the biblical literature. When a woman is unable to conceive a child and carry that child to full term, all three aspects of the identity formation (social, personal, and ego) are affected. The examples of identity trauma for this thesis are the Hannah narrative as the biblical example and the narrative of Lois and Randy Flowers as the contemporary example.

#### **4.2.1 Biblical Narrative: Hannah's Story**

Since creation, a woman's identity has been linked to motherhood. Adam called the woman God created Eve, for "she would become the mother of all the living" (Gen 3:20). The biblical perspective is that God intended humanity to multiply by women conceiving and birthing children (Gen 1:28, 9:1,7). In the Jewish community, a child was

---

<sup>1</sup> Cote and Levine, *Identity, Formation*, 9.

perceived as God's blessing for obedience.<sup>2</sup> The Jewish people held firmly to the concept that God owned the woman's womb and determined whether she would conceive a child or not (Gen 30:1-2).<sup>3</sup> In the ancient Hebrew and Christian cultures, girls were taught from a young age that their primary purpose in life was to marry and have children.<sup>4</sup> Once married, women gained a sense of identity based on the number of children birthed. Therefore, fertility and childbirth was an issue that concerned the ancient Hebrew and Christian's cultures.<sup>5</sup>

What happened in biblical times, though, when a woman was unable to conceive—when fertility eluded her? According to biblical scholars, when “God’s redemptive blessing”<sup>6</sup> was absent, resulting in barrenness, a married woman lived in fear, knowing that a husband could divorce, demote, or discard a barren wife.<sup>7</sup> Biblical writers depict a barren woman as “desolate” (Isa 54:1; Gal 4:27), in “misery” (I Sam 1:11), with a womb that was “never satisfied” (Prov 30:15-16), a “disgraced” woman (Luke 1:25), forced to join “the poor,” “the needy,” and the “widows” of the community.<sup>8</sup> In *Dictionary of Biblical Imagery*, Leland Ryken states, “the image of the barren wife is one of the Bible’s strongest images of desolation and rejection.”<sup>9</sup>

The Hannah narrative is a powerful story of a barren wife who cried out to God for a child, and received a son named Samuel. God used this child, Samuel, to change the

<sup>2</sup> Kroeger and Evans, *IVP Women's Bible Commentary*, 156.

<sup>3</sup> Schroer and Staubli, “Bodily and Embodied,” 12.

<sup>4</sup> DeSilva, *Honor, Patronage, Kinship and Purity*, 189.

<sup>5</sup> Several Old Testament narratives reveal women who struggled with the shame of barrenness: Sarah (Gen 11:27–30; 16:1; 21:1–7), Rebekah (Gen 25:20–21), Rachel and Leah (Gen 29:31–30:24), Hannah (1 Sam 1:1–2, 4–6; cf. 1 Sam 1:19–20), and Elizabeth (Luke 1:5–7; 18, 36; cf. Luke 1:24, 36, 57).

<sup>6</sup> Ryken et al., *Dictionary of Biblical Imagery*, 75.

<sup>7</sup> Walton, *Old Testament*, 28; According to the author the greatest tragedy for a woman in the ancient Near East was to be barren (Clines, *Telling Queen Michal's Story*, 73).

<sup>8</sup> Kroeger and Evans, *IVP Women's Bible Commentary*, 156.

<sup>9</sup> Ryken et al., *Dictionary of Biblical Imagery*, 75.

face of Judaism forever, from “theocracy to monarchy.”<sup>10</sup> Yet, there is little known about Hannah, other than being one of Elkanah’s two wives (I Sam 1:1–2).<sup>11</sup>

The pericope reveals that Hannah was deeply loved by Elkanah, yet in great emotional distress due to the inability to conceive a child (1 Sam 1:4–5).<sup>12</sup> Elkanah and his two wives were devout believers, and as such went to Shiloh once a year to worship and offer sacrifices to the Lord of Hosts (1 Sam 1:3).<sup>13</sup> Each year<sup>14</sup> when it was time to offer the sacrifices, Peninnah, Elkanah’s childbearing wife, would inflict “insufferable cruelty”<sup>15</sup> upon Hannah (I Sam 1: 6). One year while at the temple, Hannah could no longer endure the taunting from Peninnah. So an appeal to the Lord of Hosts for a son was made.<sup>16</sup>

According to author David Calabro, once Hannah sought the Lord for a son, an encounter began between the two, called a “host and guest relationship” that involved

---

<sup>10</sup> Arnold, *1 & 2 Samuel*, 53.

<sup>11</sup> The name Elkanah means “God created.” The narrative lists five generations and the two wives suggesting that Elkanah was a very important and wealthy man (Tsumura, *The First Book of Samuel*, 107).

<sup>12</sup> In the ancient Near East if a wealthy man’s first wife did not produce heirs it was common to take a second wife to ensure an offspring to keep the family going. Having two wives brought with it certain problems like jealousy and strife, which was evident between Hannah and Peninnah (Tsumura, *The First Book of Samuel*, 108, 114).

<sup>13</sup> According to Tsumura the phrase Lord of Hosts (“*YHWH sabaot*”) is a construct chain like “El of covenant” or “El of judgment.” The “hosts” can refer to heavenly bodies (Judg 5:20; Isa 40:26), angelic beings (Josh 5:14), the armies of Israel (1 Sam 17:45), or all creatures (Gen 2:1)” (*The First Book of Samuel*, 119–20); Baldwin, *Haggai, Zechariah, Malachi*, 44–45. Baldwin believes that in 1 Sam 1:3, 11 “the term ‘hosts’ implies worship” (*Haggai, Zechariah, Malachi*, 44–45); According to Tsevat 1 Sam 1:3 is the first place the phrase “Lord of Hosts” is used in the Bible (“*Yhwh Sebaot*” in *The Meaning of the Book of Job*, 119–29).

<sup>14</sup> There is no mention as to how many years Hannah was married to Elkanah or how many years these three went to Shiloh to worship God, but 1 Sam 1:4 makes reference to Peninnah having multiple sons and daughters, which speaks of numerous years of Hannah being barren and tormented by the fertile rival.

<sup>15</sup> Some versions, such as the NIV, interpret the Hebrew verb as “provoking” whereas Arnold identifies it at “insufferable cruelty” to denote the extreme nature of the treatment toward Hannah (*1 & 2 Samuel* 55).

<sup>16</sup> Fuchs, “The Literary Characterization of Mothers,” 117–136. According to Fuchs this is the first time the narrative reveals a barren woman turning to God for help (“The Literary Characterization of Mothers,” 117–36).

Hannah eating a meal God provided.<sup>17</sup> Hannah was unable to eat due to being distraught, which according to Calabro, changed the dynamics between the two, causing a shift in power from God to Hannah.<sup>18</sup> Due to this, Hannah and God entered into a special elite-commoner relationship, requiring the Lord of Hosts to resolve Hannah's problem of infertility, due to the requirements of social justice.<sup>19</sup>

#### 4.2.2 Distinctives in the Hannah Narrative

The Hannah narrative is unique in many ways. There are at least seven 'firsts' in the short narrative. Hannah's appeal to God is the first time a barren woman turns to God directly for help.<sup>20</sup> In the Scriptures, there are no accounts of Sarah, Rachel, or Rebekah turning to God with their issue of barrenness. The Scripture does reveal that Isaac prayed to God for Rebekah to conceive (Gen 25:21). This narrative is the first to report the "direct speech" of a prayer to have children from a barren woman.<sup>21</sup> Also, Hannah was the first person to pray out loud in public, which was "an extraordinary moment in the history of religion" for this model of prayer was used by the Jewish community from that time forth.<sup>22</sup> When Eli invoked a blessing on Hannah it was another first, for this is "the only passage which actually shows a priest blessing an individual worshipper."<sup>23</sup>

---

<sup>17</sup> This "host and guest relationship" takes place between the host, who is God, and the guest, who in this case is Hannah. Normally the host provides food, which allows him to move into a position of power and the guest responds by complying with the standards of purity such as removing footwear, washing feet, and applying spiced olive oil. The guest then eats the food, which allows the host to fulfill his role. The guest leaves, smelling of spices; therefore others know of the encounter with a generous host (Calabro, "The Lord of Hosts and His Guests," 19–21).

<sup>18</sup> According to Calabro, this encounter between God and humans must take place when both parties are within temple space ("The Lord of Hosts and His Guests," 20, 25, 26).

<sup>19</sup> Hannah makes it clear that she is the 'lower-status person,' therefore Yahweh must relieve her distress according to the requirements of social justice. A barren woman would suffer social injustice in the Old Testament era for she would be shunned and perhaps even abandoned by family and friends, thereby forced to live a life of reproach (Calabro, "The Lord of Hosts and His Guests," 25).

<sup>20</sup> Fuchs, "The Literary Characterization," 132.

<sup>21</sup> Fuchs, "The Literary Characterization," 132.

<sup>22</sup> Reimer and Kates, *Beginning Anew*, 95.

<sup>23</sup> Gordon, *I & II Samuel*, 75.

This is also the first time a woman expressed such deep desire for a child.<sup>24</sup> The narrative is also unique in that it is the only account where the mother “actively determines the role of the child before birth.”<sup>25</sup> Sarah, Rachel, and Rebekah all wanted a child, but there is no account of the mothers determining what the unborn child would do. Also, Hannah, as the barren woman is the first victim in a rivalry motif. Usually the wife or maidservant who bore the child became the victim to the jealous barren wife. This is the first narrative where the childbearing wife taunts the barren wife. Hannah’s silent response to Peninnah’s torment is also a first. There was no retaliation physically or verbally to Peninnah, the rival, which is what occurred between Sarah and Hagar as well as Rachel and Leah in the book of Genesis.<sup>26</sup>

#### **4.2.3 Hannah’s Recovery from Identity Trauma**

This thesis is contending that Hannah suffered from identity trauma due to barrenness. The inability to have a child affected Hannah on the three levels of identity formation: ego, personal, and social. First, Hannah’s ego felt great distress over the inability to conceive a child. According to Freud the ego attempts to keep a balance between the id and superego, by pleasing the id’s drive. In Hannah’s situation the ego tried repeatedly to appease the id’s drive to have a child. The ego had failed its mission until Hannah cried out to God in the temple.<sup>27</sup> Secondly, on a personal level, Hannah endured “insufferable cruelty”<sup>28</sup> yearly from Peninnah, the childbearing rival. And third,

---

<sup>24</sup> Callaway, *Sing, O Barren One*, 41.

<sup>25</sup> Callaway, *Sing, O Barren One*, 42.

<sup>26</sup> Callaway, *Sing, O Barren One*, 41-42.

<sup>27</sup> The authors believe that Hannah’s anguish over her inability to have a child is “not only a biblical situation, it also reinforces some modern theories about women’s biological destiny” (Reimer and Kates, *Beginning Anew*, 107).

<sup>28</sup> Some versions such as the NIV interpret the Hebrew verb concerning Peninnah’s treatment of Hannah as being “provoking” which presents a relatively harmless image, whereas Arnold identifies it as “insufferable cruelty” which presents a much harsher image (Arnold, *1 & 2 Samuel*, 55).

the social aspect of her trauma came from the community. In biblical culture, a married woman gained identity by birthing children. Therefore, Hannah would have been looked down on for not conceiving a child. Additionally, there is historical evidence that the community of that day was insisting that married women must have children to populate the land.<sup>29</sup> Consequently, Hannah was unable to fulfill this responsibility due to her infertility.

Recovery from identity trauma involves two elements: compassion and resilience. Compassion is often expressed to the barren woman through her family and community offering emotional and spiritual support. This type of support has the potential to create a metaphorical holding environment, which would lead to a metaphorical transitional space. Winnicott writes about both of these emotional places that are formed through nurturing relationships—but the narrative is silent concerning any family members or women in the community offering support to Hannah.

What is shared in the Scripture, though, is very unique, for Hannah drew comfort and strength from the knowledge that God was dwelling in a physical temple. Hannah felt safe there, welcomed by the God of Abraham, Isaac, and Jacob. Faith in God and in the temple after years of coming to worship there had created a holding environment, which developed into a transitional space. The formation of the holding environment was not created due to the priest Eli's presence, or Elkanah's prayers. Rather, it was created by trust in God and in the symbolism of the physical structure of the temple, where God dwelt.

---

<sup>29</sup> According to Murphy it was mandatory for all women of that day to populate the community due to the high mortality rate (*1 Samuel*, 3).

While Hannah was in this safe place, God heard her desire for a child. God responded by opening the womb that had been shut. This is similar to the mother-infant dyad, where the infant cries out to the good-enough mother for food. Then the good-enough mother responds appropriately to her child's needs by providing the appropriate food. In this scenario, Yahweh functions metaphorically like the good-enough mother and Hannah is the infant crying out for help. The temple became the holding environment for Hannah and God. Hannah calls out to him and he responds by granting her request. Infants usually cry out for physical food but Hannah was crying out to be filled with what Erikson coined the "inner space."<sup>30</sup>

Erikson believes that females are created with an "inner space" that is filled when conception occurs.<sup>31</sup> Therefore, this "inner space" could either be the source of great despair, when it remained empty throughout childbearing years, or the source of great joy and fulfilment when a child filled it.<sup>32</sup> When a woman is unable to conceive a child, each menstruation brings with it deep emotional pain, and when menopause finally arrives the result is a "permanent scar."<sup>33</sup> Hannah illustrates Erikson's theory for "her sense of emptiness and deprivation was only appeased by pregnancy."<sup>34</sup> At the beginning of this pericope, Hannah is portrayed as being lonely and unfulfilled, which seems to confirm Erikson's theory "that the very existence of the inner reproductive space exposes women early to a specific sense of loneliness, to a fear of being left empty or deprived of treasures, as well as remaining unfulfilled."<sup>35</sup>

---

<sup>30</sup> Erikson, "Inner and Outer Space," 596.

<sup>31</sup> Erikson, "Inner and Outer Space," 596.

<sup>32</sup> Erikson, "Inner and Outer Space," 596.

<sup>33</sup> Erikson, "Inner and Outer Space," 596.

<sup>34</sup> Reimer and Kates, *Beginning Anew*, 107.

<sup>35</sup> Reimer and Kates, *Beginning Anew*, 107.



Hannah's husband Elkanah and the prophet Eli both tried to show compassion, but neither man showed true compassion. When one offers compassion it involves acknowledging the depth of pain the individual is experiencing, then staying with the individual while he or she journeys out of the effects of trauma. Elkanah and Eli were unable to emotionally dwell with Hannah in the pain of barrenness, to understand what it meant for a woman living in that culture to not have a child. Elkanah questioned her weeping and felt that his love should have been enough for Hannah, when it was apparent that it was not (1 Sam 1:8). And Eli judged Hannah without determining what the situation truly was (1 Sam 1:13b). After Hannah explained that her behaviour was due to anguish and grief, not drunkenness, then Eli spoke a blessing, but still he failed to determine why this woman was so distraught (1 Sam 1:15–17).

God was the only truly compassionate one toward Hannah. He provided a safe place for Hannah to express the emotions of a distraught barren woman (1 Sam 1:10). Then, God remained with Hannah in the emotions, being present when the bitter tears were flowing and the desperate words were spoken (1 Sam 1:11–12). After Hannah poured out the raw emotions then God set things in motion for a child to be conceived (1 Sam 1:19–20).

This narrative reveals that Hannah was a very resilient woman. First, she continued to go to Shiloh with Elkanah and Peninnah every year to worship God, even though the taunting was a repetitive pattern. Second, Hannah chose to worship the God of Abraham, Isaac, and Jacob even though God was the very one who had prevented conception from occurring (1 Sam 1:5). Third, Hannah chose to seek God for a child,

when many other women of that culture were turning to the fertility goddess, Ashtart, when seeking a child.<sup>36</sup>

Hannah also exhibited posttraumatic growth in the narrative. After Samuel was weaned, Hannah took the child to Shiloh (1 Sam 1:24). Samuel was released to Eli to minister before the Lord (1 Sam 1:25). Hannah's only contact with Samuel from that day forth was once a year when returning to Shiloh to worship God. At that time, Hannah brought a new robe for Samuel (1 Sam 2: 18). It would require great emotional strength for a mother to leave her first-born son year after year. Yet, Hannah had the resilience necessary to do this.

Hannah's narrative is unique in many ways, as there are numerous 'firsts' in First Samuel Chapter 1. Yet, this narrative also uncovered the reality that Hannah suffered from identity trauma due to infertility on three levels: ego, personal, and social. The recovery process was made possible through resilience and compassion. Resilience enabled Hannah to not give up on the desire for a child, to hold onto faith that God would answer the request. God's compassion was evident in that God responded to Hannah's plea by opening her womb. Hannah exhibited posttraumatic growth by continually going to the temple year after year to visit Samuel with the gift of a new garment.

The biblical and contemporary identity trauma narratives chosen for this thesis both take place in very different cultures and each narrative ends differently as well. Therefore, one could wonder what value a biblical narrative can be to a contemporary narrative. Yet, the Old Testament experiences "in many ways transcend time and place and raise issues that are highly relevant today" for women in North America and

---

<sup>36</sup> Gordon, *I & II Samuel*, 106.

globally.<sup>37</sup> The “cultural issues, perspectives, and priorities” biblical women encountered can help individuals of today when considering the best response in their particular situations.<sup>38</sup>

#### **4.2.4 Contemporary Narrative: Mike and Lois’ Issue of Infertility**

In North America, most married couples do not think about the issue of infertility until conception does not occur a few months after attempting to start a family. Then as each month goes by with no signs of pregnancy, attention is turned to the issue of infertility. Infertility is a rising problem in Canada. In 1984, approximately five percent of women in Canada between eighteen to twenty-nine, were infertile.<sup>39</sup> By 2009 to 2010, seven to thirteen percent of women in the same age group were infertile.<sup>40</sup> Currently, sixteen percent of women ranging in age from eighteen to forty-four suffer from infertility. This number has nearly doubled since 1992.<sup>41</sup>

Erikson believes that young women grow from youth to maturity when, care from the parental family is relinquished in order to love and care for a spouse and children born from that relationship.<sup>42</sup> Once a couple decides to begin a family the woman often starts to envision what life will be like with an infant to love. There is excitement and anticipation birthed in the heart of a woman long before conception takes place.

When the process of conception is delayed, the woman begins to experience a “sense of emptiness and deprivation” that is only resolved when the “inner space” conceives a child just as Erikson’s theory states.<sup>43</sup> The “inner space” can be either a

---

<sup>37</sup> Sakenfeld, *Just Wives*, 3.

<sup>38</sup> Sakenfeld, *Just Wives*, 3.

<sup>39</sup> Kirkey, “Infertility on the Rise,” 1.

<sup>40</sup> Kirkey, “Infertility on the Rise,” 1.

<sup>41</sup> Kirkey, “Infertility on the Rise,” 1

<sup>42</sup> Erikson, “Inner and Outer Space,” 585.

<sup>43</sup> Erikson, “Inner and Outer Space,” 596.

source of great despair, when it remains empty month after month, or a source of great joy and fulfilment when it is filled with a child.<sup>44</sup> For the infertile woman seeking to have a child, when menopause finally arrives the lack of filling the inner space results in a “permanent scar.”<sup>45</sup> Erikson’s theory appears to still be valid in today’s postmodern society: “that the very existence of the inner reproductive space exposes women early to a specific sense of loneliness, to a fear of being left empty or deprived of treasures, as well as remaining unfulfilled.”<sup>46</sup>

Lois Flowers found this out personally and wrote about it in a book coauthored with her husband Randy, *Infertility—Finding God’s Peace in the Journey*. The main focus of the book is how Lois suffered and recovered from identity trauma due to infertility. As a young child and through the teen years, Lois dreamt of becoming a mother—never imagining this would not become a reality.<sup>47</sup> Just before marriage Lois underwent surgery to remove a large cyst from one of her ovaries and later discovered that conceiving a child was no longer a possibility.<sup>48</sup> This news shattered Lois and Randy’s dreams of conceiving their own child. It also affected their faith in God, for they believed that God would bless them with children just as he did with other couples. The inability to conceive a child caused Lois to struggle with her identity as a woman and as a Christian in a culture where having children was extremely important.

There are numerous examples of Lois’ resilience throughout the book from discovering the infertility to deciding to adopt a child. There is clear evidence of

---

<sup>44</sup> Erikson, “Inner and Outer Space,” 596.

<sup>45</sup> Erikson, “Inner and Outer Space,” 596.

<sup>46</sup> Reimer et al., *Beginning Anew*, 107; In today’s postmodern society many couples chose to not have children. They do not feel empty or deprived of treasures. Therefore, Erikson’s theory applies only to those who want children but are unable to conceive a child.

<sup>47</sup> Flowers, *Infertility*, 17.

<sup>48</sup> Flowers, *Infertility*, 18.

posttraumatic growth as well throughout the book, and examples from the book will be given in this thesis. Lois also shares instances of receiving compassion through spiritual and natural sources. Each of these will be addressed below. The metaphorical holding environment, potential space, and good-enough community of faith are also present, and will be addressed below as well.

The Christian community views children as a blessing from God. Hence, church life often revolves around children's activities, parenting classes, baby dedications, and celebrations on Mother's Day and Father's Day.<sup>49</sup> Therefore, in the Christian community, when a couple is unable to have children, church life can become an extremely painful place to be. Yet, this is one of the main sources of emotional and spiritual support will come from for the couple as well.

Frequently, members of the church do not understand the effects infertility has on a married couple, particularly the woman. Therefore, words can be spoken with good intentions yet the end result can be emotionally devastating.<sup>50</sup> One of Lois and Randy's friends made a passing comment stating that more prayer was needed for Lois to conceive a child.<sup>51</sup> For Lois this inferred that, "if we just persevered in prayer a while longer, if we just conjured up a little more faith, or if we groaned and cried a bit more while we implored God for a baby, then we most certainly would achieve the result we wanted."<sup>52</sup> The Christian community often lacks understanding how the traumatized

---

<sup>49</sup> Flowers, *Infertility*, 209.

<sup>50</sup> Flowers, *Infertility*, 104.

<sup>51</sup> Flowers, *Infertility*, 59.

<sup>52</sup> Flowers, *Infertility*, 59–60.

woman feels.<sup>53</sup> The friend's words made Lois feel like "an outcast, a misfit, a charter member of a club you would never have joined on your own."<sup>54</sup>

#### **4.2.5 Lois and Randy's Recovery from Identity Trauma**

Recovery from identity trauma involves compassion and resilience. Lois showed strong evidence of resilience while going through this long journey. Anger and frustration was experienced in response to a dream dying—to conceive, carry, and give birth to a live child. Resilience was evident when Lois chose to seek support through the local church and a small group of friends.<sup>55</sup> Withdrawing and failing to disclose to others about a problem shows a lack of resilience, whereas Lois exhibited the exact opposite by joining a group of trusted friends. They prayed for Lois and Randy, inquired as to their emotional and spiritual well being, and shared in their sorrows, thereby making the burden easier.<sup>56</sup> Their friends followed a biblical principle found in Galatians 6:2 which states that Christians are to carry each other's burdens.

Resilience was also evident through Lois's willingness to endure many medical tests, procedures, and surgeries, all in an attempt to correct the medical problem preventing her from conceiving a child.<sup>57</sup> It is emotionally draining and physically taxing on women to endure such invasive medical procedures. Lois expressed her personal concern regarding the success rate of such interventions, as well as the physical discomfort connected to the medically invasive procedures. There is also an enormous financial responsibility when considering the numerous medical interventions.<sup>58</sup> Lois also

---

<sup>53</sup> Flowers, *Infertility*, 22.

<sup>54</sup> Flowers, *Infertility*, 23.

<sup>55</sup> Flowers, *Infertility*, 71.

<sup>56</sup> Flowers, *Infertility*, 71.

<sup>57</sup> Flowers, *Infertility*, 125.

<sup>58</sup> Flowers, *Infertility*, 132.

mentioned her personal financial concern about the medical costs, for not all medical insurances cover the costs for these types of procedures.<sup>59</sup> Yet, Lois was determined to do everything medically possible to allow conception to occur. Resilience enabled Lois to move to the next procedure when one did not work. It was only after many options had been tried that Lois stopped seeking medical aid.<sup>60</sup>

Eventually, when it became apparent that conception was not a viable option, adoption became the next step.<sup>61</sup> Due to resilience Lois was able to move from the original dream of conceiving and carrying a child to being willing to receive someone else's child. Each of the above events reveals that Lois had resilience and knew how to draw upon it during difficult times in life.

Posttraumatic growth was also evident throughout Lois' narrative. As a child, Lois was taught that God had good plans for his children.<sup>62</sup> Yet, the journey of infertility caused Lois to begin to question the theology from childhood. As Lois struggled with spiritual concepts, the understanding that suffering is part of life as a "great tool for spiritual growth" began to grow within.<sup>63</sup> Lois drew strength from childhood spiritual teachings and Scriptures to sustain a relationship with God. Strength was drawn from Scriptures such as:

Consider it pure joy, my brothers and sisters, whenever you face trials of many kinds, because you know that the testing of your faith produces perseverance. Let perseverance finish its work so that you may be mature and complete, not lacking anything. (Jas 1:2-4).<sup>64</sup>

---

<sup>59</sup> Flowers, *Infertility*, 136.

<sup>60</sup> Flowers, *Infertility*, 123.

<sup>61</sup> Flowers, *Infertility*, 48.

<sup>62</sup> Flowers, *Infertility*, 30.

<sup>63</sup> Flowers, *Infertility*, 48.

<sup>64</sup> Flowers, *Infertility*, 50.

Lois' earlier concept of God did not fit life's circumstances.<sup>65</sup> Therefore, Lois' theology had to change, which involved "look[ing] outward and upward, to actively seek for God's truth in the midst of all the spiritual distortions and misguided philosophies—and personal uncertainty—that swirl[ed] around" within.<sup>66</sup> This involved embracing the theological concept that even when people experience traumatic events, God is still good.<sup>67</sup> Faith in God was "transformed from a one-dimensional, intellectual understanding to a deep, heartfelt conviction."<sup>68</sup> Lois's perspective changed to an understanding that God's provision is not always to prevent the traumatic incident from happening, but rather to "provide a refuge in the middle" of the situation.<sup>69</sup> This perspective brought great comfort to Lois and Randy.

According to Fowler, the trauma Lois experienced precipitated spiritual growth; causing her to shift from thinking within the parameters established by a religious group or peers, to a place of self-reflection, understanding that situations in life are complex, contradictory, and full of mystery.<sup>70</sup> Lois understood that infertility was a complex issue, filled with contradictions and mystery on a physical, emotional, spiritual, and psychological level.<sup>71</sup> Lois recognized that couples have numerous choices concerning medical procedures for conception, which are controversial on an ethical and spiritual level. There was a willingness within Lois to allow the Bible to address deeper issues of

---

<sup>65</sup> Flowers, *Infertility*, 30.

<sup>66</sup> Flowers, *Infertility*, 32.

<sup>67</sup> Flowers, *Infertility*, 50.

<sup>68</sup> Flowers, *Infertility*, 30.

<sup>69</sup> Flowers, *Infertility*, 50.

<sup>70</sup> Fowler, *Stages of Faith*, 173.

<sup>71</sup> Fowler, *Stages of Faith*, 186.



the human psyche.<sup>72</sup> All of these changes within Lois validated spiritual growth and maturity based on Fowler's stages of faith.

Secondly, Lois developed empathy for others who struggled with infertility.<sup>73</sup> Due to the medical procedures and the emotional trauma that Lois had experienced personally, an understanding was present concerning what other infertile women were experiencing at a level that childbearing women could never understand. Lois understood that women who were infertile "never really get over . . . this involuntary life sentence"<sup>74</sup> of never conceiving a child, never carrying a baby to full term, and never giving birth to a living child. As time went on Lois broadened her scope of compassion beyond the issue of infertility.<sup>75</sup>

Christians receive compassion from two different sources: spiritual and natural. Spiritual compassion from God comes in a myriad of ways; such as reading specific passages from the Bible, or remembering the work that Christ did on the cross to remove the sting of trauma and emotional pain, as well as experiencing the gentleness of the Holy Spirit bearing witness to the human heart about the God of all compassion. Lois experienced all three of these forms of compassion through attending church, reading the Bible, and reading Christian novels.<sup>76</sup> Many individuals turn away from their spouse, others, and God in anger and pain. Lois chose to turn toward all three sources seeking comfort and strength.

---

<sup>72</sup> Fowler, *Stages of Faith*, 186.

<sup>73</sup> Flowers, *Infertility*, 30.

<sup>74</sup> Flowers, *Infertility*, 178.

<sup>75</sup> Flowers, *Infertility*, 165.

<sup>76</sup> Lois experienced spiritual posttraumatic growth while reading a historical novel by Michael Philips about a woman named Hope who endured great suffering when her husband died and through the trauma of his death she had a miscarriage (Flowers, *Infertility*, 50).

The natural source of compassion came from family and friends. Randy made a point of being with Lois at every doctor's appointment and every medical procedure.<sup>77</sup> He was very attentive to Lois' emotional and spiritual needs. Compassion was also exhibited towards Lois by one of the doctors when he stated that he was not going to do any further medical procedures on her, as she had been "poked and prodded quite enough."<sup>78</sup> By showing compassion the doctor validated Randy's concerns and honored Lois physically and emotionally.

In Lois' situation the love from her husband, extended family, and church friends formed the metaphorical holding environment. Their love and compassion became a type of good-enough caring community,<sup>79</sup> a safe place to express emotions and fears. They listened intently and offered words of comfort and acts of compassion. Their love supported Lois, enabling the move into the transitional place after a while. Evidence of this becomes apparent when Lois talks about developing strategies to handle negative comments from others, as well as extending comfort to others who have been traumatized.<sup>80</sup>

The inability to conceive a child is a trauma which affects the identity of an individual, but it is not the only trauma. The following section will examine how losing an adult sibling affects an individual too.

#### **4.3 A Creative Reflection of the Identity Trauma Narratives**

Children are perceived as being a blessing from God in the Christian community. Church activities revolve around children and their families. Therefore when a couple in

---

<sup>77</sup> Flowers, *Infertility*, 84–88.

<sup>78</sup> Flowers, *Infertility*, 88.

<sup>79</sup> In this narrative the caring other is a team of people who surrounded Lois as she walked through the journey of discovering that she was infertile.

<sup>80</sup> Flowers, *Infertility*, 159–166.

the Christian community are unable to have a child it is very traumatic for them. This thesis explored the Hannah text and a contemporary narrative about Randy and Lois, a couple who were unable to have their own children due to a medical condition. There were several similarities and discontinuities between these two narratives.

In weaving these two narratives together one similarity stands out between the two women. Both Hannah and Lois had a deep yearning for a child, almost to the point of being an insatiable desire or need. Both women went to extreme lengths to have a child. Hannah interacted with God in a way that no woman had ever done before and Lois went to many doctors, spent a large amount of money, and endured extreme physical pain all in an attempt to have a child. When reading these two accounts many may decide that these two women went far beyond what others would view as being normal. That is the result of the cry of the human heart. These two women and their quest for what their heart longed for is something that Christians usually do not ponder, “What is it like to desire something godly so intensely that one will go to almost any length to have the desired thing (or in this case the desired person)?” This question is worth considering and exploring for most people do not know what extent they will go to until they are put in that position. Yet, it is one of the Christian ethics worth considering.

The dissimilarity between these two narratives is that Hannah was willing to give her child to God after she had nurtured and cared for him for several years. She promised him to God and fulfilled this promise before she ever knew that she would have any more children. The narrative suggests that it was enough for Hannah to have given birth and to have cared for this child even for a few years than to not have a child at all. Hannah would forever maintain the status of a mother in her community after Samuel was gone

even if she never had another child. Some would view this as Hannah having extreme faith in God, but others would view it and say that once she had achieved the status of “mother” in her community she could bare to give her child away if need be.

What is in the human heart? What lengths will individuals go to so the longing will be filled? These are ethical matters that one should ponder in their Christian faith journey.

#### **4.4 Traumatic Loss**

The definition of “traumatic loss” used for this thesis is: the sudden and unexpected loss of a loved one or a valuable possession which causes a person to lose “the sense of having a safe place to retreat within or outside oneself to deal with frightening emotions and experiences.”<sup>81</sup> The emotional response to loss varies for each individual. There are psychological, social, and physiological factors that affect how individuals process loss. When the loss involves the death of a loved one, then psychological factors such as how close the relationship was, how the mourner viewed the deceased’s fulfillment in life, the degree of unfinished business between the two individuals, and how many previous losses the mourner has encountered, must be assessed.<sup>82</sup> The mourner’s level of maturity, intelligence, age, as well as social and religious background should be factored in as well.<sup>83</sup> Was the death sudden, or anticipated, or avoidable—these factors should be considered in trauma recovery as well.<sup>84</sup> The physiological factors for the one grieving must be considered also. Prescribed

---

<sup>81</sup> van der Kolk, *Psychological Trauma*, 31.

<sup>82</sup> Rando, *Complicated Mourning*, 31–32.

<sup>83</sup> Rando, *Complicated Mourning*, 31–32.

<sup>84</sup> Rando, *Complicated Mourning*, 31–32.

drugs, poor nutritional habits, lack of sleep and exercise are all factors that will influence how an individual handles trauma.<sup>85</sup>

The death of an adult sibling is a trauma that is not validated by society as a major loss.<sup>86</sup> Many books and articles are written about the death of a child, a parent, a spouse, and even a pet.<sup>87</sup> Yet, very little has been written about the death of an adult sibling.<sup>88</sup> Even bereavement groups, funeral homes, churches, and counsellors focus most of the attention on children who have lost a sibling, leaving the adults who have lost a sibling to cope alone.<sup>89</sup> Silence surrounding the topic of adults losing a sibling is a concern the Christian community needs to address. The traumatized adults may seek help from the church when an adult sibling passes away. Educating the church about the intense pain and trauma individuals go through in silence is one of the goals of this thesis.

The following section will address the biblical narrative of Lazarus' death focusing on the traumatic loss for his sisters, Martha and Mary. Even though Lazarus was raised from the dead, while his body lay in the tomb, his sisters did not know that resurrection was imminent.<sup>90</sup> The contemporary narrative for this section is the account of T.J. Wray's journey of recovery after the death of her brother.

---

<sup>85</sup> Rando, *Complicated Mourning*, 31–32.

<sup>86</sup> Wray, *Surviving the Death of a Sibling*, 2.

<sup>87</sup> Wray, *Surviving the Death of a Sibling*, 3.

<sup>88</sup> Wray, *Surviving the Death of a Sibling*, 3.

<sup>89</sup> Wray, *Surviving the Death of a Sibling*, 3.

<sup>90</sup> According to Brown the Israelites believed in the doctrine of the futuristic resurrection of the dead, since the early second century B.C. (Daniel 12:2) and the doctrine was widely accepted by all while Jesus was alive. (*The Gospel According to John I-XII*, 434); According to Burge the Pharisees believed in the future resurrection of the dead but the Sadducees denied it (Mark 12:18-27; Acts 2:38) (*The NIV Application Commentary: John*, 316); In Roman culture there was another concept of the resurrection of the dead, which was contrary to the Jewish and Christian concept. The belief among Roman culture was that the birth of children formed a resurrection of the dead because the person is renewed in their offspring "as if risen from the dead" (Brown, *The Body and Society*, 9).

#### 4.4.1 Biblical Narrative: The Martha, Mary, and Lazarus Narrative

Lazarus,<sup>91</sup> a resident of Bethany,<sup>92</sup> had two sisters, Martha and Mary. Martha is believed to be the older of the two sisters for her name is mentioned first in the narrative.<sup>93</sup> Theologians believe that Mary, the sister of Martha, is the same Mary mentioned in Luke 10, who sat at Jesus feet.<sup>94</sup> When Lazarus became very ill, his two sisters sent word to Jesus about the state of his beloved friend.<sup>95</sup> Jesus failed to respond immediately; therefore, when he arrived Lazarus had already been in the tomb for four days.<sup>96</sup>

Martha and Mary's encounter with their brother's death was only four days in duration, yet the four days were filled with trauma. Word had been sent to Jesus, the miracle worker, that their brother was ill, in hopes that Jesus would come before it was too late. Yet, when their friend arrived Lazarus was already in the tomb and their lives were severely altered.

According to Rando, various factors influence how an individual will respond to a traumatic event. Factors such as how close one is to the deceased, how much warning the

---

<sup>91</sup> The Hebrew name for Lazarus is Eleazar, which means "he whom God helps" (Keener, *The IVP Bible Background Commentary: New Testament*, 396).

<sup>92</sup> Bethany was located about a mile and a half east of Jerusalem, near the Mount of Olives. Many travellers including Jesus, would lodge in Bethany when they were going to Jerusalem, as lodging was difficult to obtain in the larger city. When Jesus received word that Lazarus was ill he was one days travel from Bethany (Burge, *The NIV Application Commentary: John*, 312–13).

<sup>93</sup> There is no mention of Martha's husband or children, therefore it is assumed by many that she was single, but Kostenberger feels that there is no evidence to support this (Kostenberger, *John*, 326).

<sup>94</sup> Mary is first mentioned in John 11 as the one who anointed Jesus' feet with oil and wiped them with her hair, which actually takes place in the following chapter, John 12. The oil is very expensive, signifying that it was a family heirloom or the family had wealth. Mary's action with her hair denoted her devotion as a servant to Jesus (Keener, *The Gospel of John*, Vol 2, 863).

<sup>95</sup> The phrase "the one Jesus loves" speaks of "friendship and relationship (Carson, *The Gospel According to John*, 406).

<sup>96</sup> Some believe that Jesus waited this long on purpose for "Israel's Rabbinic faith taught that for three days after a person has died the soul lingers near the body, until the fourth day when it leaves the body permanently." Therefore, if Jesus arrived any earlier and raised Lazarus from the dead the skeptics would have said that it was not really a miracle, but rather his soul simply returning to his body (Bruner, *The Gospel of John: A Commentary*, 664).

survivor has, how long the illness was before death, and how much the mourner's anticipated the death, will all affect how the survivor responds.<sup>97</sup> Based on the emotional response of Martha and Mary to Jesus, it appears that the sisters were very close to Lazarus.

Lazarus' illness was evident but death did not seem imminent. The duration of the illness appeared to be short as death occurred soon after Jesus received word of Lazarus illness. Because Martha and Mary were emotionally close to their brother and did not have time to psychologically prepare for his death, it would have been harder psychologically to process the event. Also, the sisters believed the death could have been avoided, which added complicating factors on a psychological level for the women.

#### **4.4.2 Recovery from Traumatic Loss for Martha and Mary**

When an individual suffers from a traumatic loss they often feel numb emotionally and find it difficult to connect to God and others emotionally. One of the goals of recovery in the Christian community is to help the traumatized individual reconnect back to God, others, and him or herself through caring relationships. Martha and Mary were traumatized by the death of their brother, Lazarus. During the four days that his body laid in the tomb his sisters grieved for him. Their trauma was magnified in that they were personal friends with the one who had the ability to heal their brother. Therefore, reason dictated that this tragedy could have been avoided if Jesus had only come sooner (John 11: 21, 32). Yet, the one who had healed countless others failed to come, and consequently their brother died.

Recovery from traumatic loss requires compassion and resilience. Martha and Mary received compassion from two sources in this narrative. The first source of

---

<sup>97</sup> Rando, *Complicated Mourning*, 31-32.

compassion was provided by the group of mourners<sup>98</sup> who came from within the local community and Jerusalem, to take part in *shivah*.<sup>99</sup> The duration of *shivah*, is seven days allowing people to release their grief in a safe atmosphere.<sup>100</sup> The group of mourners created an emotionally safe atmosphere, which is a form of the metaphorical concept of the holding environment. This safe place allowed Martha and Mary to release their pain and begin to reconnect back to self, others, and God.

The second source of comfort came from Jesus himself. He arrived to resurrect Lazarus, yet he took time to mourn with Martha and Mary first. In doing this, Jesus revealed the importance in the Jewish culture of entering into the grief with loved ones, which would have brought comfort to the sisters.<sup>101</sup> However, this was not his only reason for entering into their time of mourning.

An additional reason that Jesus entered into the mourning was that he was a member of the faith community that Martha and Mary took part in. Therefore he represented one of the good-enough caring community, through the love relationship he had with the two sisters. One of the roles of this caring community of faith is the ability to enter into the traumatized individual's emotions, "to weep with those who weep" (Rom 12:15). The level of trust the two women felt with Jesus created a safe place for them, which is similar in nature to what Winnicott refers to as the holding environment.<sup>102</sup>

---

<sup>98</sup> According to the Jewish customs of that era Lazarus' death and burial was a community event. Friends and relatives came to Bethany from the area including Jerusalem to offer comfort to Martha and Mary (Burge, *The NIV Application Commentary: John*, 315).

<sup>99</sup> During *shivah* all adornment is put away for at least three weeks and for one year all common pleasures are denied (Keener, *The Bible Background Commentary*, 292); The Jewish custom of that day concerning *Shivah* was that every family regardless of economic status were expected to hire a professional wailer as well as at least two flute players, to participate at the funeral (Carson, *The Gospel According to John*, 415).

<sup>100</sup> *Shivah* involved the mourners sitting on the floor wailing and pounding on their chests in grief (Mark 5:38; Acts 8:2; Luke 18:13) (Burge, *The NIV Application Commentary: John*, 315).

<sup>101</sup> Kostenberger, *John*, 332–33.

<sup>102</sup> Winnicott, *The Maturation Process*, 48.



Winnicott believed that as the good-enough mother entered into the emotions of the infant, she could draw the infant out of the negative emotions and return him or her back to joy.<sup>103</sup> Members of the caring community of faith have the same ability to enter into the emotions of the traumatized individual thereby aiding in their ability to begin to come out of the emotional despair that trauma often causes.

Both women trusted Jesus enough to express frustration and anger over his failure to arrive sooner, and thereby prevent Lazarus' death. Yet, their reaction did not disturb Jesus, for he had followed God's leading doing only what he saw the God the Father doing—therefore the timing was exactly right. Jesus was also secure in his relationship with Martha and Mary; therefore, he could embrace emotional outbursts toward him, allowing for the women's trauma recovery. As Jesus wept with Martha and Mary, this solidarity of emotions enabled all three to return to joy and peace.

Martha and Mary both exhibited resilience in this narrative. When Jesus arrived, Lazarus had already been dead and in the tomb for four days. Therefore Martha and Mary had four days to grieve and lament over the loss of their brother. Due to the fact that Jesus had the ability to heal their brother but chose not to respond to the request, could have been enough for either sister to turn against Jesus and his teachings. Yet, when he arrived in Bethany Martha went out to meet him, immediately ready to engage him in conversation about Lazarus. This action, of facing the one who had failed to heal Lazarus, revealed resilience within Martha (John 11: 20–21). Mary also chose to go to Jesus, falling at his feet, and openly declared the belief that if Jesus had come earlier Lazarus would be alive (John 11: 32).

---

<sup>103</sup> Winnicott, *The Maturation Process*, 48.

Posttraumatic growth is also evident in this narrative. Martha experienced spiritual growth due to the trauma of losing her brother. Jesus aided in her spiritual growth by posing new concepts which went against principles that Martha had believed since childhood. To accept these new principles as truth, Martha had to think outside of the parameters established by the Jewish religious leaders concerning death and resurrection. To accept this new concept, according to Fowler's stages of faith, Martha grew spiritually, to the place where she could accept that life situations are complex, contradictory, and filled with mystery.<sup>104</sup> Martha accepted the new concepts that Jesus presented, therefore spiritual growth took place as part of posttraumatic growth.

Examples of compassion, resilience, and posttraumatic growth are evident throughout the Martha and Mary narrative. The mourners and Jesus exemplify the caring community of faith. There is clear evidence in this biblical narrative that losing an adult sibling was traumatic for Martha and Mary. Below is a contemporary narrative revealing that the loss of an adult sibling is also traumatic in the current postmodern society.

#### **4.4.3. Contemporary Narrative: The T.J. Wray Story**

This narrative looks at the journey of traumatic loss and recovery that T.J. Wray embarked on when her older brother VJay, age forty-three, passed away due to a terminal illness. This close-knit family talked often, even though they all lived substantial distances apart. They believed in doing things together, notwithstanding being with VJay during his last weeks on earth. Wray was extremely close with her older brother VJay, so his passing was very traumatic for her.<sup>105</sup> There is evidence of trauma, compassion, resilience, and posttraumatic growth throughout this narrative.

---

<sup>104</sup> Fowler, *Stages of Faith*, 173.

<sup>105</sup> Wray, *Surviving the Death of a Sibling*, 136.

Trauma affects individuals in a variety of different ways after a loved one dies. In Wray's case there was a shutting down emotionally and a replaying of childhood memories, as well as memories of the last few days of VJay's life. Wray suffered from regret that was insurmountable at first, over not remaining with her brother until the last moments.<sup>106</sup> She was with him until just days before he passed away, but then the thought of VJay dying caused her to run back home in fear.<sup>107</sup> Wray "did not know how to go on living in a world that didn't include him; it seemed too strange and alien even to contemplate."<sup>108</sup> As a young girl, Wray participated in a family bedtime custom of praying out loud asking God to protect each family member as they slept.<sup>109</sup> Therefore while growing up, Wray's last thoughts each night were centered on her entire family which included VJay.

Trauma affected Wray physically, emotionally, psychologically, and spiritually. These symptoms were present in the daytime and at night. Right after VJay's death, she would blanket herself and curl up into a tiny ball on the couch.<sup>110</sup> For weeks life was lived from the couch. After returning to work, once the day was done Wray would fall asleep on the couch without removing her coat and gloves.<sup>111</sup> At night Wray suffered from "hospital dreams" which "serve[d] as painful reminders of those last terrible days . . . the noises and smells of the hospital, the machines, the doctors and nurses bustling

---

<sup>106</sup> Wray, *Surviving the Death of a Sibling*, 137.

<sup>107</sup> Wray, *Surviving the Death of a Sibling*, 21.

<sup>108</sup> Wray, *Surviving the Death of a Sibling*, 136.

<sup>109</sup> Wray, *Surviving the Death of a Sibling*, 136.

<sup>110</sup> Wray, *Surviving the Death of a Sibling*, 14.

<sup>111</sup> Wray, *Surviving the Death of a Sibling*, 96.

about all of this threaten[ed] to come rushing back during sleep.”<sup>112</sup> Life was unbearable to the point where Wray often forgot how to breathe, with VJay gone.<sup>113</sup>

It is said that time heals all things, but for Wray this did not happen. Five years after VJay’s death the grief still knocked the wind out of her resulting in her tears flowing, her body rocking, her internal questions of “Why?” and no answer forthcoming.<sup>114</sup> Most of all Wray still missed VJay.<sup>115</sup>

The trauma of losing VJay caused Wray to form “the grieving self” which could also be called “the False Self” that Winnicott describes. The False Self comes to the forefront to protect the vulnerable True Self from additional trauma. The False Self, for Wray felt like someone else had taken over her body.<sup>116</sup> In Wray’s situation the False Self “could not receive comfort as there was no ability to accept the grief.”<sup>117</sup> For some individuals, the False Self turns to alcohol, drugs, or food to cope. The False Self needs compassion and relationship with others for recovery to occur.

Moving from trauma to recovery requires two elements: compassion from a caring community as well as evidence of resilience within the traumatized individual. Wray shares examples of compassion being bestowed on her from two different sources; the first was her husband and the second was from an elderly gentleman in a doctor’s office. Wray’s husband expressed compassion but was unaware of how to ease the pain. Listening, being attentive, keeping the children quiet, providing extended times for Wray to retreat to the bedroom, were all expressions of compassion.

---

<sup>112</sup> Wray, *Surviving the Death of a Sibling*, 186.

<sup>113</sup> Wray, *Surviving the Death of a Sibling*, 1.

<sup>114</sup> Wray, *Surviving the Death of a Sibling*, 1.

<sup>115</sup> Wray, *Surviving the Death of a Sibling*, 1.

<sup>116</sup> Wray, *Surviving the Death of a Sibling*, 2.

<sup>117</sup> Wray, *Surviving the Death of a Sibling*, 2.

Compassion also came from an unexpected source. An elderly gentleman shared with Wray about losing his brother. He stated, “You never get over losing a brother, you know. You never really get over it.”<sup>118</sup> His words touched Wray in an unprecedented way in that she received “more affirmation, more condolence, and more genuine understanding . . . in the company of total strangers” that day than any other day since VJay had passed away.<sup>119</sup> The outcome of that brief conversation caused Wray to feel “a little lighter, a little less alone, and perhaps a little more hopeful.”<sup>120</sup> The gentleman’s kind words of compassion created a holding environment for Wray. The lasting effects of this encounter allowed Wray to move into the transition place where recovery continues to take place, and the individual begins to enjoy life once again.<sup>121</sup>

Through the death of VJay and the subsequent weeks and month of grieving, Wray exhibited resilience. Life without VJay seemed impossible, yet she chose to continue to live each day without her brother. Some individuals chose not to continue on, as the news reports tell far too often of yet another suicide. Wray did not want to live without her brother but she allowed her life to continue. As time went on Wray returned to work and to normal activities even though life felt better curled up on the couch under her grandmother’s afghan.<sup>122</sup> Wray learned to disregard dismissive condolences, those comments that are aimed at consoling but instead create more pain due to inappropriate and insensitive clichés.<sup>123</sup> Wray had resilience to move past comments that made the loss feel “trivial” and the grief “unwarranted.”<sup>124</sup>

---

<sup>118</sup> Wray, *Surviving the Death of a Sibling*, 76–78.

<sup>119</sup> Wray, *Surviving the Death of a Sibling*, 77.

<sup>120</sup> Wray, *Surviving the Death of a Sibling*, 77.

<sup>121</sup> Wray, *Surviving the Death of a Sibling*, 77.

<sup>122</sup> Wray, *Surviving the Death of a Sibling*, 11.

<sup>123</sup> Wray, *Surviving the Death of a Sibling*, 83.

<sup>124</sup> Wray, *Surviving the Death of a Sibling*, 4.

Posttraumatic growth is also evident throughout this narrative. As Wray began to recover it became apparent to her that very little work had been done in the grief and trauma area of mental health, concerning adults who had suffered the loss of an adult sibling.<sup>125</sup> Wray addresses this in a multitude of ways, only four of which are noted here. She used the power of grief to write a book, empowered others by including testimonies in the book from adults who had lost a sibling, encouraged the use of a grief partner, and recommended keeping a grief journal. The first thing Wray desired was to empower others who had experienced the loss of an adult sibling as she had. This was accomplished by placing other people's narratives throughout the book. This allowed others to have a voice concerning the traumatic loss associated with the death of an adult sibling.

Wray also recognized that traumatized individuals should not be required to go through the recovery process alone. Therefore, individuals were encouraged to "recruit a grief partner" who will offer "empathy, compassion, and guidance."<sup>126</sup> Wray suggested the grief partner should be available daily if necessary to listen to feelings being expressed.<sup>127</sup> A grief partner should be trustworthy, compassionate, and able to help in practical issues. Some individuals will need aid in matters such as "dealing with funeral homes and lawyers" and assistance so as to have time to grieve the loss of the loved one.<sup>128</sup> The role of the grief partner is similar to that of the members of the caring community of faith mentioned earlier in this thesis.

---

<sup>125</sup> Wray, *Surviving the Death of a Sibling*, ix.

<sup>126</sup> Wray, *Surviving the Death of a Sibling*, ix.

<sup>127</sup> Wray, *Surviving the Death of a Sibling*, 36.

<sup>128</sup> Wray, *Surviving the Death of a Sibling*, 36.

Wray discovered that writing down thoughts, feelings, fears, and regrets helped to calm her emotions.<sup>129</sup> From this came the idea of a grief journal that can be individual or communal. A communal journal (or family journal) is used by the entire family and left out in a public spot in the house for anyone to write in at any time.<sup>130</sup> The benefit of a communal journal is that no one is grieving in isolation, and if anyone's emotions become too overwhelming, others will be aware and can offer additional support.<sup>131</sup> Writing often releases 'stuck' thoughts and emotions enabling individuals to understand feelings better.<sup>132</sup> A grief journal is like a timeline of one's journey,<sup>133</sup> and can be beneficial to look back at as it will show the degree of movement in the recovery process.

Wray loved her brother VJay and she did not know how to live without him, therefore, the trauma was complicated. Through the support of caring others, such as her husband, close friends, and even conversations with fellow survivors, Wray eventually returned back to the anchor of her faith in Christ and in humanity. The trauma changed her though. Nicholas Wolterstorff declared in his book, *Lament for a Son* that the death of his son changed him, in that he now bears the wounds of his son's death.<sup>134</sup> The wounds mark him, remaining with him forever, and to some degree define him, but they are not the last act, or the end of his story.<sup>135</sup> The death of VJay also marked Wray. The wounds have marked her, and will remain with her forever, and to some degree they define her too, yet they also are not the last act, or the end of her story. The love of Christ revealed through the compassion of caring others have strengthened Wray, just as it

---

<sup>129</sup> Wray, *Surviving the Death of a Sibling*, 50.

<sup>130</sup> Wray, *Surviving the Death of a Sibling*, 62.

<sup>131</sup> Wray, *Surviving the Death of a Sibling*, 63.

<sup>132</sup> Wray, *Surviving the Death of a Sibling*, 63.

<sup>133</sup> Wray, *Surviving the Death of a Sibling*, 63.

<sup>134</sup> Wolterstorff, *Lament for a Son*, 93.

<sup>135</sup> Wolterstorff, *Lament for a Son*, 93.

strengthened Wolterstorff. And she in turn pours out to others so they too can be strengthened.

#### **4.5 A Creative Reflection of the Traumatic Loss Narratives**

Losing an adult sibling is traumatic whether in biblical days or in postmodernity. In both of these narratives the story is about the loss of an adult brother. There are several similarities and one or two discontinuities. Only one similarity and one discontinuity will be explored at this time. The similarity between the Martha and Mary narrative and the T.J. Wray narrative was the anger these women felt and expressed toward Jesus. In both narratives the sisters believed that God could have prevented the death of their dear brother. In both of the narratives the women were not afraid to put their thoughts and emotions into words. Martha and Mary both spoke directly to Jesus expressing that if he had come earlier then their brother would not have died. They both knew that he had the ability to heal the sick, even those whose sickness would lead to death. They knew from experience that he had the ability to prevent their loss and their grief and they were not afraid to express this to him. T.J. Wray also expressed to God that she believed he could have healed her brother and she expressed her disapproval over his way of handling the situation.

For many people, there is fear concerning expressing anger toward God. Fear that he will become angry, fear that they will have sinned or displeased God, fear that they are lacking faith. Martha, Mary, and T.J. did not live in this fear. All three women felt secure enough in his love to reveal the feelings in their heart.

The discontinuity between these two narratives involves the issue of grieving. Martha and Mary had a community of family and friends around them for at least seven



days, lamenting with them each day. This is part of the Jewish culture, to hold ‘*shivah*.’ The two sisters were never alone unless they wanted to be. Wray’s story is very different. She was alone much of the time and when she was around others, such as her husband; there was a lack of understanding regarding the depths of her grief and trauma. This is a cultural issue; and it reveals the difference between the biblical days and today as well as revealing that the Jewish culture identifies the trauma that an individual goes through when they lose a loved one. The North American culture and the Christian faith culture are very different cultures from the Jewish culture of Martha and Mary’s day.

#### **4.6 Conclusions**

This chapter has explored two biblical and two contemporary examples of *identity trauma*, and *traumatic loss*. Attention was given to the elements of trauma, compassion, resilience, and post-traumatic growth. Winnicott’s metaphorical concepts of the holding environment, the potential space, and the good-enough caring community of faith were considered in each of the four narratives. In most of the narratives the member of the good-enough caring community of faith was a family member or a close friend. This person was able to provide the holding environment through compassion and trust. Hannah’s narrative was the only one that did not involve a family member or close friend filling the role as a member of the good-enough caring community of faith. In her situation, God became the good-enough caring other in a metaphorical sense. God was able to create a holding environment, for Hannah, through her years of relationship with the God of Abraham, Isaac, and Jacob. Hannah knew that the temple was God’s dwelling place; therefore it became a safe place. Examples were given to prove that trauma did occur to the main characters in each of the four narratives. Each narrative was also

examined for evidence of resilience, compassion, and posttraumatic growth. When tragedy befalls a person there is often a feeling of being separated from God, others, and self. God reveals the constancy of his love, through the members of a caring community of faith and through the symbolism of a building set aside to worship God in.

The first two chapters explained how trauma affects an individual, then chapters three and four looked at contemporary and biblical narratives as examples of displacement trauma, identity trauma, and traumatic loss. The previous chapters did not go into detail concerning how trauma recovery takes place or how the members of a caring community of faith can support a traumatized individual. These concerns will be explored in chapter five.

## **Chapter 5: Toward a Pastoral Theology of Trauma**

### **5.1. Introduction**

This chapter will examine ways in which the Christian community can provide an emotionally safe environment where the traumatized are honoured and loved unconditionally while recovering. A three-fold framework for recovery from trauma will be presented, which includes a review of Herman's three stages of recovery and an overview of LeBron McBride's approach to trauma recovery. Five movements of emotional trauma recovery will also be proposed.

### **5.2 Herman's Three Stages of Recovery**

Herman presents a comprehensive three-stage recovery model consisting of: safety, remembrance and mourning, and reconnection. This model does not occur in a linear sequence but is rather more "oscillating and dialectical in nature, compared to a spiral, in which earlier issues are continually revisited on a higher level of integration."<sup>1</sup> Her model is centered around a trained therapist in a therapeutic relationship with the traumatized individual. This thesis recognizes the validity and credibility of the work trained therapists do with those who have suffered from severe trauma. The nature of some individual's trauma is such that it is best to work with a trained therapist. The focus of this thesis is on those whose trauma does not require a trained therapist, instead a trained minister and the members of the faith community are adequate support for these individuals.

#### **5.2.1 Safety**

Once the therapist has formed a therapeutic relationship of trust with a client, then the issue of safety is addressed, as it is the main consideration of the entire recovery

---

<sup>1</sup> Herman, *Trauma and Recovery*, 155.

process. Trauma affects all facets of life; therefore, treatment must cover every facet of life.<sup>2</sup> Since recovery is not an event but a process that takes place over time, occurring in stages—treatment must also be suitable for every stage.<sup>3</sup> A traumatic event affects an individual's body, emotions, and mind for an undetermined length of time after the event has transpired. Informing the traumatized individual as to what reactions they themselves may have will eliminate fear and anxiety when symptoms arise.<sup>4</sup> According to Herman, “trauma robs the victim of a sense of power and control;” therefore, the guiding principle of recovery is to restore power and control to survivors.”<sup>5</sup>

Establishing safety often involves developing a social support team, which may include the survivor's family members and close friends.<sup>6</sup> Herman believes that those who choose to be part of a social support team “must expect to have their lives disrupted for a time.”<sup>7</sup> This disruption is not necessarily long-term as those who have experienced a “single acute trauma, a rudimentary sense of safety can generally be restored within a matter of weeks if adequate social support is available. By the end of three months, stabilization in symptoms can usually be expected.”<sup>8</sup> The natural response when an individual is traumatized is to push the knowledge of the event into a mental place where the mind can block it from consciousness. According to Herman, this may work for a season, “but traumatic events ultimately refuse to be put away.”<sup>9</sup>

After safety has been established, sharing the details of the event can take place.

When the traumatized individual speaks words detailing the traumatic event, a

---

<sup>2</sup> Herman, *Trauma and Recovery*, 156.

<sup>3</sup> Herman, *Trauma and Recovery*, 156.

<sup>4</sup> Herman, *Trauma and Recovery*, 157.

<sup>5</sup> Herman, *Trauma and Recovery*, 159.

<sup>6</sup> Herman, *Trauma and Recovery*, 162.

<sup>7</sup> Herman, *Trauma and Recovery*, 162.

<sup>8</sup> Herman, *Trauma and Recovery*, 165.

<sup>9</sup> Herman, *Trauma and Recovery*, 175.

transformation occurs, allowing the event to be assimilated into the individual's life narrative.<sup>10</sup> The process by which an individual shares a traumatic memory though, is often complex as frequently it is difficult for the traumatized to describe what appears to be "a series of still snapshots or a silent movie" going on in the mind.<sup>11</sup> Giving sound to the silent movie of trauma is hard work, which requires wisdom on the part of the therapist and the traumatized individual, to ensure the process does not escalate out of control.<sup>12</sup>

### 5.2.2 Remembrance and Mourning

To reconstruct the story, attention is given to the individual's earlier history to aid in providing "a context within which the particular meaning of the trauma can be understood."<sup>13</sup> The goal of this stage is to assist the client in recalling the somatic and emotional memory. When necessary non-verbal forms of expression such as drawing or painting are the most effective way to manage any "indelible images."<sup>14</sup>

Remembering traumatic events involves recalling the bodily sensations of smells, sounds, or tastes as well as the cognitive information.<sup>15</sup> Entering into the somatic aspect of traumatic memories may require assistance from the therapist.<sup>16</sup> When the victim assigns words to the event, and adds the bodily sensations, the traumatic narrative is brought "into the room" for the therapist to aid the traumatized individual in "mov[ing] back and forth in time."<sup>17</sup> While being anchored in the safety of the present with someone who truly cares, "the individual immerses into the past, enabling a reexperience of the

---

<sup>10</sup> Herman, *Trauma and Recovery*, 175.

<sup>11</sup> Herman, *Trauma and Recovery*, 175.

<sup>12</sup> Herman, *Trauma and Recovery*, 176.

<sup>13</sup> Herman, *Trauma and Recovery*, 176.

<sup>14</sup> Herman, *Trauma and Recovery*, 177.

<sup>15</sup> Herman, *Trauma and Recovery*, 177.

<sup>16</sup> Herman, *Trauma and Recovery*, 177.,

<sup>17</sup> Herman, *Trauma and Recovery*, 178.

feelings in all their intensity, while holding onto the sense of safe connection that was destroyed in the traumatic moment.”<sup>18</sup>

The purpose of “bringing the narrative into the room,” and moving back and forth in time, is not to get rid of the trauma, but rather to integrate the story into the individual’s life story. Herman suggests that “in the telling, the trauma story becomes a testimony.”<sup>19</sup> The word “testimony” refers to; “objective, judicial, public, or political, and of something subjective, spiritual, cathartic, or private.”<sup>20</sup> There is “the universality of testimony” where it is viewed “as a ritual of healing.”<sup>21</sup> When one bears their testimony the content of the story becomes substance for therapeutic work.<sup>22</sup> Richard Mollica describes the transformed story as simply a “new story,” which is “no longer about shame and humiliation” but rather “about dignity and virtue.”<sup>23</sup> For some who have been traumatized, their storytelling allows a “regain[ing] of the world they have lost.”<sup>24</sup>

There is a belief that those who have been traumatized lose “the internal psychological structures of a self securely attached to others.”<sup>25</sup> Many of these losses are invisible or unrecognized; therefore little consolation comes from the customary rituals of mourning.<sup>26</sup> Victims often feel humiliated when emotions surface concerning mourning the losses; yet Herman concludes that the mourning should be viewed as an act of

---

<sup>18</sup> Herman, *Trauma and Recovery*, 178.

<sup>19</sup> Herman, *Trauma and Recovery*, 181.

<sup>20</sup> Agger, and Jensen, *Testimony as Ritual*, 116.

<sup>21</sup> Agger, and Jensen, *Testimony as Ritual*, 116.

<sup>22</sup> Agger, and Jensen, *Testimony as Ritual*, 118.

<sup>23</sup> Mollica, *Healing Invisible Wounds*, 312.

<sup>24</sup> Herman, *Trauma and Recovery*, 181.

<sup>25</sup> Herman, *Trauma and Recovery*, 188.

<sup>26</sup> Herman, *Trauma and Recovery*, 188.

courage rather than humiliation.<sup>27</sup> Once an individual mourns everything that he or she lost then the indestructible inner life becomes clear.<sup>28</sup>

Remembering and mourning evoke strong emotions that can be difficult to process. Reconstructing the trauma involves stepping into earlier memories that are frozen in time; dropping into mourning appears to release a season of endless tears.<sup>29</sup> There is an end though; when the traumatized individual is able to own all of the past history amidst “renewed hope and energy for engagement with life.”<sup>30</sup> Then comes the task of rebuilding life in the present and reaching for dreams in the future.

### 5.2.3 Reconnection

Herman believes that reconnection involves letting go of the old self, which has been identified and mourned for the destruction that befell it due to trauma. In this stage the goal is to develop a new self. The core experiences of psychological trauma are helplessness and isolation, where as the core experiences of recovery are empowerment and reconnection.<sup>31</sup> In this stage there is an acknowledgment of where the traumatized individual has come from—an individual who was being affected by victimization.<sup>32</sup> To move from a stance of victim and powerlessness to one who is empowered and reconnected with life one must choose to face the world with confidence. Now the victim must “learn how to live with fear, and how to use it as a source of energy and enlightenment.”<sup>33</sup>

---

<sup>27</sup> Herman, *Trauma and Recovery*, 188.

<sup>28</sup> Herman, *Trauma and Recovery*, 195.

<sup>29</sup> Herman, *Trauma and Recovery*, 195.

<sup>30</sup> Herman, *Trauma and Recovery*, 195.

<sup>31</sup> Herman, *Trauma and Recovery*, 197.

<sup>32</sup> Herman, *Trauma and Recovery*, 197.

<sup>33</sup> Herman, *Trauma and Recovery*, 199.

Then the traumatized individual knows at a core level that the past no longer owns him or her.<sup>34</sup> In reclaiming the self, an individual also reclaims the imagination that in the past was controlled by internal films constantly replaying the trauma.<sup>35</sup> At this point the imagination and fantasy have the ability to revisit old hopes and dreams.<sup>36</sup> The individual now has the resources and the desire to venture out into life.

The traumatized individual discovers a capacity to enter into “appropriate trust” with others.<sup>37</sup> With the new resources gained there is an ability to “feel autonomous while remaining connected to others.”<sup>38</sup> Also, the individual is able to maintain a personal “point of view and boundaries while respecting those of others.”<sup>39</sup> Relationships begin to change as “there is room for more spontaneity and humor.”<sup>40</sup> The ability to have more spontaneity and humor as one moves into recovery is similar to Winnicott’s theory about infants. As the infant moves from the holding environment with the good-enough mother to the potential space, a freedom comes enabling the child to play—which according to Winnicott is the telltale sign of a well-adjusted baby living out of his or her True Self.<sup>41</sup>

With the trauma no longer in the forefront of the individual’s mind—barriers to intimacy are gone.<sup>42</sup> The individual may now enter into an intimate relationship if one has not already been established.<sup>43</sup> In this last stage, restoration and repair of parent-child

---

<sup>34</sup> Herman, *Trauma and Recovery*, 202.

<sup>35</sup> Herman, *Trauma and Recovery*, 202.

<sup>36</sup> Herman, *Trauma and Recovery*, 202.

<sup>37</sup> Herman, *Trauma and Recovery*, 205.

<sup>38</sup> Herman, *Trauma and Recovery*, 205.

<sup>39</sup> Herman, *Trauma and Recovery*, 205.

<sup>40</sup> Herman, *Trauma and Recovery*, 205.

<sup>41</sup> Palombo, *Guide to Psychoanalytic*, 152.

<sup>42</sup> Herman, *Trauma and Recovery*, 206.

<sup>43</sup> Herman, *Trauma and Recovery*, 206.



relationships may also occur as there is a greater understanding of how trauma affected each member of the family.<sup>44</sup>

Processing the trauma enables an individual to move into a place of emotional and psychological freedom. Yet, Herman would advocate that recovery is never completely over though, for each new event in life has the potential to reawaken an issue, which then needs to be resolved.<sup>45</sup> Even though recovery is never complete, eventually it will be sufficient enough to begin focusing on the tasks of everyday life.<sup>46</sup> In this stage the traumatized individual is able to look back on life with a realistic view of how tragic the past was, while at the same time looking forward to the future with hope; thereby celebrating life.<sup>47</sup>

### **5.3 McBride's Trauma Recovery**

McBride's trauma recovery model has eight phases that are not "mutually exclusive," nor is there any specific order that the phases must occur in.<sup>48</sup> At any time the individual may go back to a previous phase before moving on.<sup>49</sup> The eight phases are: risking, revealing, responding, releasing, reflecting, reconciling, resurrecting, and rebuilding.

#### **5.3.1 The Risking and Revealing Phase**

In the first phase, the caring other creates a safe place where the traumatized individual can begin to trust another human being and risk being known in therapy.

McBride compares this to Winnicott's concept of a "holding environment" which refers

---

<sup>44</sup> Herman, *Trauma and Recovery*, 206.

<sup>45</sup> Herman, *Trauma and Recovery*, 211.

<sup>46</sup> Herman, *Trauma and Recovery*, 212.

<sup>47</sup> Herman, *Trauma and Recovery*, 213.

<sup>48</sup> McBride, *Spiritual Crisis*, 16.

<sup>49</sup> In Appendix 1 there is a diagram from *Spiritual Crisis* depicting that an individual has the ability to move back and forth between each of the eight phases as part of the recovery (McBride, *Spiritual Crisis*, 16).

to “the role of the caretaker and the safe milieu of care for the young child.”<sup>50</sup> According to McBride, therapists also use the “holding environment” term to “discuss the safety and nurturance of the therapy hour.”<sup>51</sup> The first phase cannot be rushed, for creating an atmosphere where individuals will risk and reveal emotions, memories, and feelings takes time, as this population does not find it easy to trust others.<sup>52</sup>

There are ways that a therapist can begin to establish trust and safety, one of which is to take a thorough history. History-taking enables the therapist to gain a greater understanding of the issues in the individual’s life.<sup>53</sup> Sharing one’s history also helps the traumatized individual as it provides time to interact with the therapist before uncovering traumatic issues. When sufficient safety is established, then traumatized individuals are ready to reveal the trauma story.<sup>54</sup> Many of the traumatized individuals kept the trauma a secret as children, and sharing it with the therapist may be the first time the memories are put to words.<sup>55</sup> McBride believes when trauma secrets are hidden away “with such determination, a ‘dead zone’ develops in the psyche that works like an anesthetic to cut individuals off from those who would give love and protection.”<sup>56</sup>

### **5.3.2 The Responding and Releasing Phase**

In this phase the therapist continues to create a holding environment through compassion and a non-judgmental response to the patient’s intense disconnected emotions that are beginning to reconnect with the trauma story.<sup>57</sup> The therapist’s response to the patient’s emotions of rage, hostility, panic, and despair directly affects the level of

---

<sup>50</sup> McBride, *Spiritual Crisis*, 16–17.

<sup>51</sup> McBride, *Spiritual Crisis*, 17.

<sup>52</sup> McBride, *Spiritual Crisis*, 18.

<sup>53</sup> McBride, *Spiritual Crisis*, 18.

<sup>54</sup> McBride, *Spiritual Crisis*, 18.

<sup>55</sup> McBride, *Spiritual Crisis*, 19.

<sup>56</sup> McBride, *Spiritual Crisis*, 19.

<sup>57</sup> McBride, *Spiritual Crisis*, 19.

emotions the patient releases.<sup>58</sup> These emotions feel very large and overwhelming to the patient so the therapist aids the process by remaining calm and supportive while the emotions are being released.

### **5.3.3 The Reflecting and Reconciling Phase**

The goal of this phase is to “move toward meaning and wholeness.”<sup>59</sup> The patient needs to have time to begin to look at the trauma from many different aspects, which requires “a safe holding environment and a trusted therapist or friend” who is willing to remain with the patient, while his or her worldview is shifting.<sup>60</sup> The patient begins to reflect on the details of what happened in the trauma until he or she is able to reconcile the reality of the memory and the emotions.

### **5.3.4 The Resurrecting and Rebuilding Phase**

This phase involves the patient moving from a narrow focus on the trauma to a broader focus on the fullness of life, which includes the good and bad within self, others, and the world.<sup>61</sup> The other aspect of this phase involves moving from a place of self-imposed isolation to actively choosing to reconnect with family and friends.<sup>62</sup> This last phase includes a form of resurrection, which includes “telling the trauma story and being heard, grieving and feeling the pain with a trusted person, reconnecting and integrating.”<sup>63</sup> Each of the above elements in this last phase represents an element of resurrection for the chronic traumatized patient as he or she is being resurrected from the

---

<sup>58</sup> McBride, *Spiritual Crisis*, 20.

<sup>59</sup> McBride, *Spiritual Crisis*, 20.

<sup>60</sup> McBride, *Spiritual Crisis*, 20–21.

<sup>61</sup> McBride, *Spiritual Crisis*, 21.

<sup>62</sup> McBride, *Spiritual Crisis*, 21.

<sup>63</sup> McBride, *Spiritual Crisis*, 22.

“dead zone” back into a three-fold community: the community of the self, the community of family and friends, and the community of God.

Most individuals will not experience the extreme forms of trauma as traumatized patients do who use the “Eight Rs of Trauma Recovery” but by knowing how extreme trauma affects an individual and how to use each phase of recovery, the principles can then be applied to those who suffer from milder types of trauma. Even mild trauma has the potential to cause individuals to question certain aspects of life and release intense emotions, requiring a trusted friend or counsellor to provide appropriate support to ensure that one is able to maintain a healthy outlook on life.

These two models of trauma recovery can be adapted for use with those suffering from milder types of trauma such as outlined throughout this thesis; displacement trauma due to interpersonal conflicts, identity trauma due to infertility, and traumatic loss due to the death of an adult sibling. This thesis is proposing that to use the above techniques the ministers of the Christian community needs to be trained in these models of trauma recovery. The five movements of emotional trauma recovery explained below are designed to be part of the information ministers can use when offering appropriate support to those who have suffered due to trauma.

The Christian community desires to offer support but there is a lack of understanding in areas specifically: how to listen to those in trauma, how to lament with another, how to take the metaphorical language the traumatized individual is using to depict emotions and use it to aid in recovery, how to lift another up in prayer, and how to leave the traumatized individual in God’s care. These five movements will direct the

caring community of faith in how to interact with the traumatized individual, regardless of which recovery treatment model is used.

### **5.4 Five Movements of Emotional Trauma Recovery**

This model consists of five “movements” that will aid in emotional trauma recovery for those who are not in need of assistance from a trained therapist or counselor, but instead would benefit from the emotional and spiritual support from a caring community of faith while going through the recovery process. The five movements are: listening, lamenting, learning the metaphorical language, lifting the other up in prayer, leaving the other in God’s care.

#### **5.4.1 Listening**

The first movement is listening—listen with a desire to understand. Listening is not an easy task. Often while listening one is preoccupied with considering how to respond to what is being said. Therefore, the one sharing does not get the full attention of the other. Listening requires engaging in what the traumatized individual is saying.

Some traumatized individuals are unable to speak at the beginning of the support relationship, due to their trauma state being so overwhelmed. In this instance, the caring other will be required to listen by “dwelling in patient silence.”<sup>64</sup> Silence does not pertain to the lack of sound or words rather it is “a fullness of presence.”<sup>65</sup> Dorothee Soelle in her book *Suffering*, explains about “mutism” as a response to trauma, her first of three phases of suffering. Instead of speaking individuals may moan or wail like a trapped animal in extreme pain. In these circumstances the individual feels powerless to stop what is

---

<sup>64</sup> Hopkins and Koppel, *Grounded in the Living Word*, 29.

<sup>65</sup> Hopkins and Koppel, *Grounded in the Living Word*, 29.

happening.<sup>66</sup> According to Soelle the length of time one is mute is determined by the degree of trauma one has incurred.

Initially for some trauma sufferers there are no words to be spoken, so the caring community will function as a “silent presence.”<sup>67</sup> Nouwen, explains this type of sharing, in his book *Reaching Out*. Nouwen recalls a friend coming to visit who said that he wanted to “celebrate some time” with Henri.<sup>68</sup> The two men entered into a time of silence. A “warm, gentle, and vibrant” silence grew bringing with it an awareness of a “presence” embracing both men.<sup>69</sup> Then, a “deep peace filled the empty space” between the two and the visitor said, “When I look at you it is as if I am in the presence of Christ.”<sup>70</sup> Nouwen responded “It is the Christ in you, who recognizes the Christ in me.”<sup>71</sup> Then the visitor said, “From now on, wherever you go, or wherever I go, all the ground between us will be holy ground.”<sup>72</sup> This man had revealed to Nouwen “what community means.”<sup>73</sup>

When members of a congregation and a traumatized individual share emotional pain, a sense of community is created. At times “listening” will involve sitting with another who is in great emotional distress, perhaps with one who has just discovered the lack of desired conception is due to infertility, and therefore facing the death of a dream. The distress may be due to receiving the news that an adult sibling has just passed away. Or, perhaps, the distress is due to the fact that the decision has been made to leave a congregation after many years of enjoying community, due to an interpersonal conflict

---

<sup>66</sup> Soelle, *Suffering*, 71.

<sup>67</sup> Hopkins and Koppel, *Grounded in the Living Word*, 29.

<sup>68</sup> Nouwen, *Reaching Out*, 45.

<sup>69</sup> Nouwen, *Reaching Out*, 45.

<sup>70</sup> Nouwen, *Reaching Out*, 45.

<sup>71</sup> Nouwen, *Reaching Out*, 45.

<sup>72</sup> Nouwen, *Reaching Out*, 45.

<sup>73</sup> Nouwen, *Reaching Out*, 46.

with the leadership. Each of these events has the potential to leave a person in a state of “mutism.”

Can members of the community come and sit with the individual in silence, in the depth of suffering and allow the presence of Christ within him or her to be present? The presence of Christ comes when two are gathered in his name. Just as the presence came with Nouwen and his visitor while in silence, the presence will come to those who are in great distress. Jesus came to Mary, who due to great distress was weeping at the tomb after his death (John 20:11–18). Jesus also encountered the two men on the road to Emmaus who due to great distress were visibly upset over his death (Luke 24:13–25).

For those who are mute due to emotional pain, the time will come when words emerge. Then, often, there is a season of lament that the traumatized individual and the caring Christian community must enter into.

#### **5.4.2 Lamenting**

The second of Soelle’s phases of suffering is “lament—petition, expression of hope.” This term was the “expression that the liturgy used to offer . . . to give voice to people in their fears and pains. . . .”<sup>74</sup> Lament, according to Soelle, “does not merely depict things as they are, but produces new conflicts. The factors that make up the suffering can now be discussed. . . .”<sup>75</sup>

The Christian community must be willing to lament with the traumatized person: enter into an abyss of emotional darkness and abide there, with no intent to fix the situation or to explain it away, but rather just to join in their lament. This validates the reality of the emotional pain and conveys to the traumatized individual that others are

---

<sup>74</sup> Soelle, *Suffering*, 72.

<sup>75</sup> Soelle, *Suffering*, 72.

willing to remain in the stunned place of pain. Emotional pain over a specific incident is not easily understood, yet Caroline Yoder says, “a traumatic reaction needs to be treated as valid, regardless of how the event that induced it appears to anyone else.”<sup>76</sup> Lamenting though is more than just a release of emotional pain; it is the cry of the human heart to God with hope of an answer. Hope is an aspect of lamenting, for when the lament pierces the air it “reflects the hope that someone will hear, that someone will pay attention and draw near to the situation.”<sup>77</sup>

Often during the season of lament the Christian community fails to understand what the traumatized individual needs. It is at this time that others “offer free advice such as ‘get over it’ or ‘put it behind.’”<sup>78</sup> There is often a “minimizing or discounting the anguish of others.”<sup>79</sup> Few like to see others in pain, struggling with the effects of trauma; therefore, out of love for the traumatized individual, there is an attempt to rationally explain away the emotions.<sup>80</sup> There is an inability, an unwillingness to enter into the suffering—so instead there is an attempt to pull the traumatized individual out of the pain. Unfortunately, this approach is not successful; instead, more pain is inflicted on the traumatized individual. Those who were to come and comfort instead bring shame and “truly unbearable isolation.”<sup>81</sup>

#### **5.4.3 Learning Symbolic and Metaphorical Language**

The third movement involves the use of symbols and metaphoric language to articulate the effects of trauma. Use of metaphorical language is a common practice to

---

<sup>76</sup> Yoder, *The Little Book of Trauma Healing*, 10.

<sup>77</sup> Zylla, *The Roots of Sorrow*, 13.

<sup>78</sup> Van Deusen Hunsinger, “Bearing the Unbearable,” 59.

<sup>79</sup> Van Deusen Hunsinger, “Bearing the Unbearable,” 59.

<sup>80</sup> Van Deusen Hunsinger, “Bearing the Unbearable,” 59.

<sup>81</sup> Van Deusen Hunsinger, “Bearing the Unbearable,” 59.



describe, both positive and negative events. Therapists also use metaphors in a therapeutic setting to “provide a holding environment within which the client can both address and recontextualize clinical issues.”<sup>82</sup> The use of therapeutic metaphor can “serve to bolster the empathic connection between therapist and client,” according to Marty Babits, “providing the client with a new feeling of being understood, in part through a new use of language.”<sup>83</sup> The caring Christian community can use metaphorical language in the same manner with the traumatized individual as an aid to recovery.

Babits discovered two ways metaphors could be used in therapy. The first is when the metaphor stands out “boldly in contrast to other aspects of the patient’s verbal production” and the second is when “the use of metaphor is subtly embedded in conversational language.”<sup>84</sup> An example of the metaphor standing out boldly is when one of Babits’ patients described her depression “as a pool in which she was drowning.”<sup>85</sup> Babits and the patient used this imagery to discuss ways the patient could be rescued from the pool, resulting in the potential of creating a lifeline.<sup>86</sup> By working with the metaphor of the pool, the patient could keep her distance from the real feelings of the depression—and yet, through the symbol of the pool and the lifeline, hope was deposited, altering her depression.

The second example is of a patient who had lost focus in life after the death of a loved one. The patient explained he felt like, “I am wandering through my days, aimless[ly].”<sup>87</sup> Babits proposed that by using the word “wandering—a common figure of

---

<sup>82</sup> Babits, “Using Therapeutic Metaphor,” 21.

<sup>83</sup> Babits, “Using Therapeutic Metaphor,” 21.

<sup>84</sup> Babits, “Using Therapeutic Metaphor,” 22.

<sup>85</sup> Babits, “Using Therapeutic Metaphor,” 22.

<sup>86</sup> Babits, “Using Therapeutic Metaphor,” 22.

<sup>87</sup> Babits, “Using Therapeutic Metaphor,” 22.

speech—he had begun to engage in the realm of metaphor.”<sup>88</sup> The therapist used this metaphor and responded by saying, “You’re wandering and it seems that, for now, you’re out of touch with your internal compass.”<sup>89</sup> The patient took the concept of the “internal compass” and used it in the present and future sessions to explain his emotions in more detail.<sup>90</sup> As time went on, the patient, took the image of the internal compass and made it his own, to the point that it became “a transitional object” for him, which provided needed comfort.<sup>91</sup>

The use of metaphors in the recovery process for traumatized individuals is extremely beneficial. On occasions the traumatized individual will identify the metaphor, but on other occasions those in the Christian community will generate the metaphor. It is not important whether the minister or the traumatized individual generates the metaphor as long as both assist in the process.<sup>92</sup>

Babits proposes that “the metaphor, in a sense, constitutes a holding environment, at once to be relied upon and at the same time taken for granted like the ‘good-enough mother’ that Winnicott describes.”<sup>93</sup> According to Babits, the metaphor can also serve to help create a ‘culture’ that includes the treatment situation, but is not limited to this.<sup>94</sup> “Winnicott calls this the ‘third area,’ the expanse of potential space in which ‘culture is located’” according to Babits.<sup>95</sup> The “potential space” is where a healthy child plays and where adults enjoy music and religion according to Winnicott. According to Winnicott play is the indicator of a healthy child, and being able to enjoy life as an adult is also an

---

<sup>88</sup> Babits, “Using Therapeutic Metaphor,” 22.

<sup>89</sup> Babits, “Using Therapeutic Metaphor,” 22.

<sup>90</sup> Babits, “Using Therapeutic Metaphor,” 22.

<sup>91</sup> Babits, “Using Therapeutic Metaphor,” 23.

<sup>92</sup> Babits, “Using Therapeutic Metaphor,” 23.

<sup>93</sup> Babits, “Using Therapeutic Metaphor,” 24.

<sup>94</sup> Babits, “Using Therapeutic Metaphor,” 24.

<sup>95</sup> Babits, “Using Therapeutic Metaphor,” 25.

indicator of an emotionally healthy adult. One of the indicators of recovery for the traumatized individual is the ability to play—to enjoy life.

Metaphors are used in both the Old and New Testaments. God talks about Israel being a harlot (Jer 3:1) and Jesus makes reference to himself as the temple informing the people that it will be destroyed then rebuilt in three days (John 2:19). Within the Christian faith metaphors are used frequently to explain spiritual principles. The use of metaphors can enhance the recovery process for the shared potential language can bring hope and ideas for change to the traumatized individual's mind.

#### **5.4.4 Lifting up in Prayer**

The fourth movement involves lifting up the traumatized individual and the situation to God in prayer. Prayer, in this sense, is not necessarily the key that mysteriously unlocks and erases the pain, rather it is an invitation for God to come and be near the traumatized individual. Nouwen believes “prayer is the language of the Christian community.”<sup>96</sup> Prayer according to Nouwen “is the center of our spiritual life.”<sup>97</sup>

According to Nouwen:

A man [sic] of prayer is, in the final analysis, the man who is able to recognize in others the face of the Messiah and make visible what was hidden, make touchable what was unreachable. The man [sic] of prayer is a leader precisely because through his articulation of God's work within himself he can lead others out of confusion to clarification . . .<sup>98</sup>

The Christian community enters into prayer long before meeting the traumatized individual. Prayer paves the way for the emotional and spiritual connection between the two. At first the traumatized individual may not desire prayer due to their disconnection

---

<sup>96</sup> Nouwen, *Reaching Out*, 156.

<sup>97</sup> Nouwen, *Reaching Out*, 115.

<sup>98</sup> Nouwen, *The Wounded Healer*, 47.

from God and others. The Scriptures reveal that God does not move away due to the unwillingness to pray, since his love is unconditional.

The traumatized individual may need time to process the events of the trauma. As time goes on and the individual begins to process the traumatic event and how it is affecting his or her life, then opportunities may arise for prayer. It is important for the Christian community to be sensitive when this occurs—to take time and ask what specific aspects of the situation should be brought to God in prayer. The traumatized individual informs where the prayer should go. Within the relationship, the one who feels broken, shattered, and all alone needs to have it communicated that that when one reaches out to God then he comes and “speaks in our solitude.”<sup>99</sup>

Prayer is not just a one-sided venture of seeking God when there is a need. Prayer is “God breathing in us by which we become part of the intimacy of God’s inner life.”<sup>100</sup> Traumatized individuals often turn away from self, others, and God due to pain from the traumatic event. God desires for the wounded and traumatized to return to him through prayer.

#### **5.4.5 Leaving in God’s Care**

The fifth movement involves leaving the traumatized individual in God’s care. There is a time to be present with the traumatized individual, but there is also a time when he or she must be left to be with the God of all comfort. Declaring that human support will return along with a commitment to continue to lift the individual up to God in prayer provides security for the one in need.<sup>101</sup> Nouwen believes that it is imperative for people to have the experience and the memory of members of the community of faith

---

<sup>99</sup> Nouwen, *Reaching Out*, 122.

<sup>100</sup> Nouwen, *Reaching Out*, 125.

<sup>101</sup> Nouwen, and Durback, *Seeds of Hope*, 129.

with them as well as the experience of being left in God's care: "I am deeply convinced that there is a ministry in which our leaving creates space for God's spirit and in which, by our absence, God can become present in a new way."<sup>102</sup> Leaving provides an opportunity for the traumatized individual to experience God's love personally.

Within these five movements one will recognize Winnicott's holding environment. Metaphorically the caring community of faith becomes a "good-enough" caring community toward the traumatized individual through listening, lamenting, learning the metaphorical and symbolic language, lifting up in prayer, and leaving in God's care. Through these five movements the traumatized individual will have a safe process of expressing the trauma, to know that the narrative has been heard, and to know that love has been surrounding him or her and the situation. Through prayer and being left in God's care the traumatized individual is given the opportunity to experience posttraumatic growth as well. The main goal of the caring community of faith is to remain with the traumatized individual after the time of being shattered, allowing time for a re-anchoring to self, others, and God to occur.

### **5.5 Strengths and Weaknesses**

There are several strengths in this thesis. The first one is that the topic of trauma has been researched for many years now, creating a large body of reliable information to draw upon. Another strength is that the three contemporary narratives chosen for this thesis each explain very clearly the way trauma affected their lives.

One of the weaknesses of this thesis is the premise that each person who has been traumatized will benefit from sharing his or her narrative. In the last several decades storytelling has grown in popularity and the common belief is that when one shares their

---

<sup>102</sup> Nouwen, and Durback, *Seeds of Hope*, 129.

trauma narrative with others healing will result.<sup>103</sup> Heather Walton and others recognize that narrative is not necessarily the most effective method of recovery for everyone.<sup>104</sup> Walton believes that what the Christian community needs to assist those who have been traumatized is “images, symbols, and metaphors that carry the pain of trauma. . .”<sup>105</sup> On occasions words are not adequate to express the depth of what the traumatized person feels. At times the traumatized individual needs to choose the image, symbol, or metaphor as he or she knows what is meaningful and symbolic.

As well as images and symbols, silence is also a method of recovery. Elie Weisel, a Holocaust survivor, believes that “when words failed and stories can not be told that it is our duty to preserve the sacred silence of those who suffer.”<sup>106</sup> Silence allows the traumatized individual time to remember and to hold that which is precious. For many silence is preferred as the trauma is too great and words are not adequate for what he or she feels.

## **5.6. Summary and Conclusion**

The main concern of this thesis is that trauma affects people deeply and that these traumatized individuals need appropriate attention to recover. Pastoral theology is concerned with the restoration process for those who have been traumatized. This thesis has proven that traumatic experiences have the potential to shatter a person’s basic trust, in self, others, and God. Understanding the value of the caring Christian community and their ability to create a safe place through expressing genuine care was presented as one of the key ways to help the traumatized individual. The ethos of the Christian community

---

<sup>103</sup> Walton, “Speaking in Signs,” 2.

<sup>104</sup> Walton, “Speaking in Signs,” 3.

<sup>105</sup> Walton, “Speaking in Signs,” 4.

<sup>106</sup> Walton, “Speaking in Signs,” 4

is to be loving and compassionate to all, including those who have been traumatized. In the past there has been support offered to assist the traumatized, but it is often inadequate, due to the time required for full recovery to occur as well as a lack of understanding as to how the Christian community can help. Help has been offered but in many congregations it has not been intentional. At the heart of the issue has been the lack of knowledge concerning trauma and its effects. The desired outcome is that the Christian community would be intentional to become more educated on the topic of trauma and that the congregations would become intentional about offering support to those who have been traumatized.

The second major component that the Christian community can offer the traumatized is the constancy of God's love revealed through a willingness to remain in relationship with them for the duration of the recovery journey. The Christian community has a unique opportunity to reveal God's love to those who have been traumatized by sensitively articulating faith in a God who remains. God remains in relationship with traumatized individuals while they journey through each stage of recovery. God remains in relationship even when the traumatized individual turns away from God.

Several questions were asked at the beginning of the thesis: How does trauma affect individuals? How can the local congregation assist the traumatized flourish once again? What pastoral knowledge is required to aid a person in his or her recovery process? What role does faith play in the recovery process? These questions were answered throughout the five chapters of this thesis. Van der Kolk defined trauma as "the loss of faith that there is order and continuity in life. Trauma occurs when one loses the sense of having a safe place to retreat within or outside oneself to deal with frightening

emotions and experiences.”<sup>107</sup> Losing the sense of having a safe place to retreat affects a person emotionally, psychologically, physically, and spiritually. All four areas were looked at in chapter 1 and were identified at appropriate times through out the six narratives. As the Christian community becomes more educated about the effects of trauma and what aids in the recovery process, resources can be formed in the local churches. Examples of resources would be equipping leaders of the church to support those who have been traumatized. There are numerous factors that influence emotional responses to trauma. The factors were looked at in chapter 1. Issues such as the age of the traumatized individual, how many other traumas has she or he had in the last year, how close was he or she with the other person, was there an anticipation that the event may happen, what other resources are available. Each of these factors and others were addressed when looking at the six narratives in chapters 3 and 4.

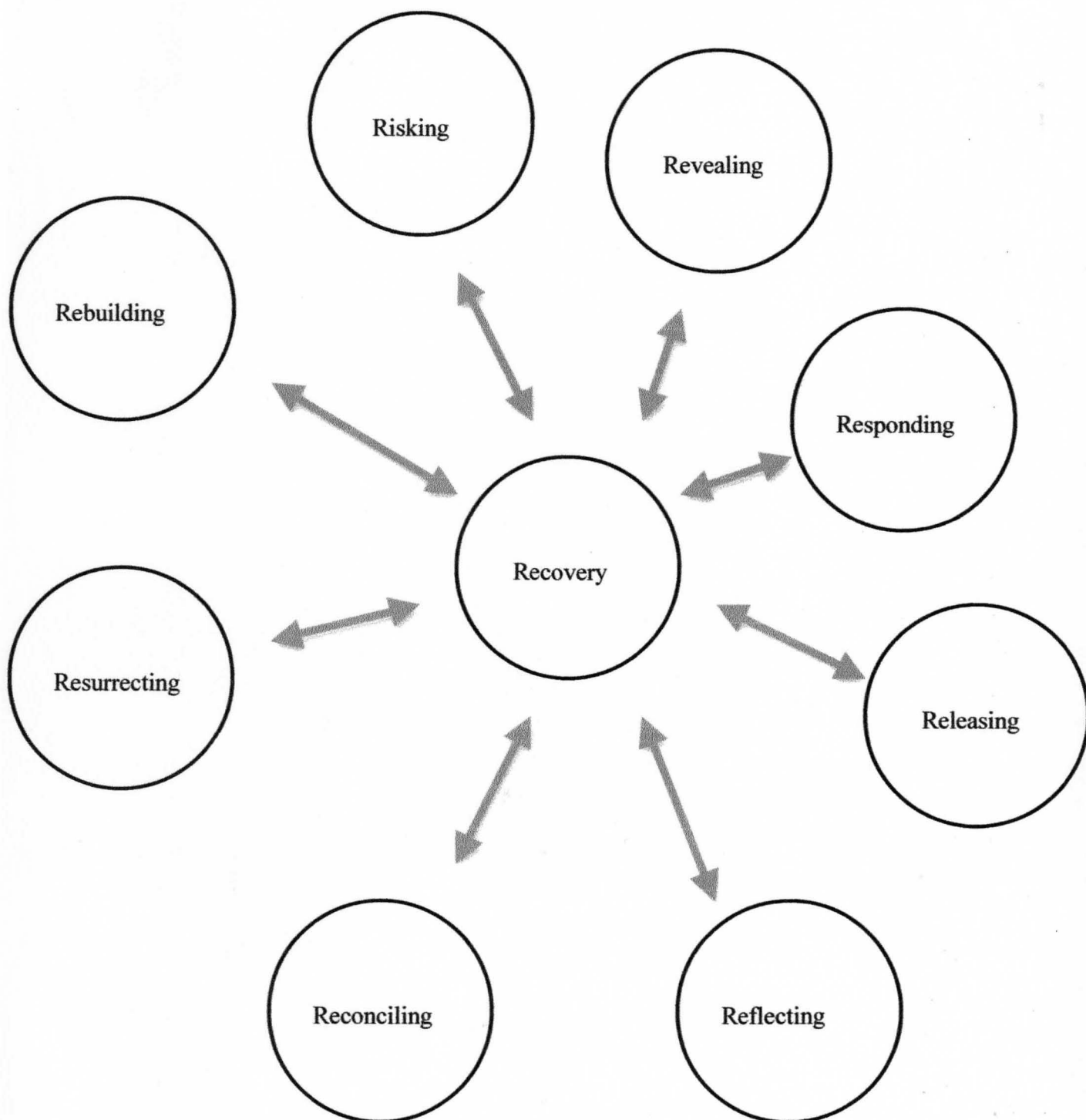
The role of faith is a very important element in the recovery process. Trauma often disconnects the individual from God, from faith in others, and from faith in the world being a good place. Understanding how faith is developed and that there are specific stages that individual’s go through will help to know what the underlying issues are that the traumatized individual is struggling with.

---

<sup>107</sup> Van der Kolk, *Psychological Trauma*, 31.



**APPENDIX 1**  
**The Eight R's of Trauma Recovery**  
From *Spiritual Crisis* by LeBron McBride, p 17.



## Bibliography

- Agger, Inger., and Soren Buus Jensen. "Testimony as Ritual and Evidence in Psychotherapy for Political Refugees." *Journal of Traumatic Stress* 1 (1990) 115–130.
- Anderson, Herbert., and Edward Foley. *Mighty Stories, Dangerous Rituals: Weaving Together the Human and the Divine*. San Francisco: Jossey–Bass, 1998.
- Arnold, Bill T. *The NIV Application Commentary: 1 & 2 Samuel*. Grand Rapids: Zondervan, 2003.
- Babits, Marty. "Using Therapeutic Metaphor to Provide A Holding Environment: The Inner Edge of Possibility." *Clinical Social Work Journal* 28 (2001) 12–33.
- Baldwin, J.G. *Haggai, Zechariah, Malachi: Introduction and Commentary*. Downers Grove: IVP Books, 2009.
- Billman, Kathleen D., and Daniel L. Migliore. *Rachel's Cry: Prayer of Lament and Rebirth of Hope*. Cleveland, Ohio: United Church, 1999.
- Blenkiron, Paul. *Stories and Analogies in Cognitive Behaviour Therapy*. West Sussex, UK: Wiley–Blackwell, 2010.
- Boomershine, Thomas E. *Story Journey: An Invitation to the Gospel As Storytelling*. Nashville: Abingdon, 1988.
- Braxton, Elizabeth. "Discipleship in Preaching: Connecting Our Story to God's Story." *Congregations* 34 (2008) 36–37.
- Breuer, Josef, and Sigmund Freud. *Studies on Hysteria*. Vol. II, Translated by James Strachey, New York: Basic Books, 1955.
- Bridgers, Lynn. "The Resurrected Life: Roman Catholic Resources in Posttraumatic Pastoral Care." *IJPT* 15 (2011) 38–56.
- Brown, Peter, *The Body and Society: Men, Women, and Sexual Renunciation in Early Christianity*. New York: Columbia University Press, 1988.
- Brown, Raymond E. *The Gospel According to John I–XII: Introduction, Translation, and Notes*. New York: Doubleday, 1966.
- Bruce, F.F. *The New International Commentary on the New Testament: The Book of Acts*. Grand Rapids: Eerdmans, 1988.

- Brueggemann, Walter, et al. *To Act Justly, Love Tenderly, Walk Humbly: An Agenda for Ministers*. Eugene, OR: Wipf & Stock, 1997.
- Bruner, Frederick D. *The Gospel of John: A Commentary*. Grand Rapids: Eerdmans, 2012.
- Burge, Gary M. *The NIV Application Commentary: John*. Grand Rapids: Zondervan, 2000.
- Calabro, David. "The Lord of Hosts and His Guests: Hospitality on Sacred Space in Exodus 29 and 1 Samuel 1." *EGL & MWBS Proceedings* 27 (2007) 19–29.
- Callaway, Mary. *Sing, O Barren One: A Study in Comparative Midrash*. Atlanta: Scholars Press, 1986.
- Cane, Patricia M. *Trauma Healing and Transformation*. Watsonville, CA: Capacitar, 2000.
- Capps, Donald. *Life Cycle Theory and Pastoral Care*. Philadelphia: Fortress, 1983.
- . *Living Stories*. Minneapolis: Fortress, 1998.
- . *The Depleted Self*. Minneapolis: Augsburg Fortress, 1998.
- Carson, D.A. *The Gospel According to John*. Grand Rapids: Eerdmans, 1991.
- Chescheir, Martha W. "Some Implications of Winnicott's Concept for Clinical Practice." *Clinical Social Work Journal* 13 (1985) 219–233.
- Clines, David J.A., and Tamara Cohn Eskenazi. *Telling Queen Michal's Story: An Experiment in Contemporary Interpretation*. Sheffield, UK: Sheffield Academic Press, 1991.
- Cote, James E., and Charles G. Levine. *Identity, Formation, Agency, and Culture: A Social Psychological Synthesis*. Mahwah, NJ: Lawrence Erlbaum Associates, 2002.
- Coyle, Adrian. "Critical Responses to Faith Development Theory: A Useful Agenda for Change?" *Journal of Psychology of Religion* 33 (2011) 281–298.
- Cozolino, Louis. *The Neuroscience of Psychotherapy*. New York: W.W. Norton, 2002.
- D'Andrea, Wendy, et al. "Physical Health Problems After Single Trauma Exposure." *JAPN* 17 (2011) 378–392.

DeSilva, David A. *An Introduction to the New Testament*. Downers Grove: InterVarsity, 2004.

———. *Honor, Patronage, Kinship and Purity: Unlocking New Testament Culture*. Downers Grove: InterVarsity, 2000.

DuMont, K. A., Widom, C.S., & Czaja, S.J. "Predictors of Resilience in Abuse and Neglected Children Grown-Up: The Role of Individual and Neighborhood Characteristics." *Child Abuse & Neglect* 31 (2007) 255–274.

Engler, Barbara. *Personality Theories*. 8<sup>th</sup> ed. Boston: Houghton Mifflin Harcourt, 2009.

Erikson, Erik H. *Childhood and Society*. New York: Norton, 1993.

———. *Identity: Youth and Crisis*. New York: Norton, 1968.

———. *Identity and the Life Cycle*. New York: Norton, 1980.

———. "Inner and Outer Space: Reflections on Womanhood." *Daedalus* 93 (1964) 582–606.

———. *Life History and the Historical Moment: Diverse Presentations*. New York: Norton, 1977.

Ferenczi, Sandor, et al. *Psycho-analysis and the War Neuroses*. London: The International Psycho-analytic Press, 1921.

Fletcher, Kari L. "Getting Connected: The Virtual Holding Environment." *Psychoanalytic Social Work* 21 (2014) 90–106.

Flowers, Lois. *Infertility-Finding God's Peace in the Journey*. Eugene, OR: Harvest House, 2003.

Fowler, James W. *Stages of Faith: The Psychology of Human Development and the Quest for Meaning*. New York: Harper & Row, 1976.

Freud, Sigmund. *A Case of Hysteria*. Oxford: Oxford University Press, 2013.

———. "The Ego and the Id" In *Freud Complete Works*, 1651–1667.

———. *The Basic Writings of Sigmund Freud*. Trans. and ed. by A. A. Brill, Toronto: Random House, 2012.

Freud, Sigmund, et al. *Beyond the Pleasure Principle*. New York: Norton, 1961.

- Fuchs, Esther. "The Literary Characterization of mothers and sexual politics in the Hebrew Bible." *Feminist Perspectives on Biblical Scholarship*, (1985) 117–136.
- Gangel, Kenneth O. *Holman New Testament Commentary—Acts*. Nashville: Holman, 1998.
- Gergen, Kenneth. *The Saturated Self: Dilemmas of Identity in Contemporary Life*. New York: Basic Books, 1991.
- Glenn, Ca Trice. "A Bridge Over Troubled Waters: Spirituality and Resilience with Emerging Adult Childhood Trauma Survivors." *Journal of Spirituality in Mental Health* 16 (2014) 37–50.
- Gordon, Robert P. *I & II Samuel: A Commentary*. Grand Rapids: Zondervan. 1986.
- Graham, Elaine, et al. *Theological Reflection: Methods*. London: SMC, 2005.
- . *Theological Reflection: Sources*. London: SMC, 2007.
- Grenz, Stanley J. *The Social God and the Relational Self: A Trinitarian Theology of the Imago Dei*. Louisville: Westminster John Knox, 2001.
- . *Theology for the Community of God*. Grand Rapids: Eerdmans, 1994.
- Groninick, Simon A. *Work and Play of Winnicott*. New Jersey: Jason Aronson, 1990.
- Harre, Rom. *Personal Being: A Theory for Individual Psychology*. Cambridge: Harvard University Press, 1984.
- Henriksen, Jan-Olav. "The Erotic Self and the Image of God." In *In Search of Self: Interdisciplinary Perspectives on Personhood*. edited by van Huyssteen, J. Wentzel., and Erik P. Wiebe. 256–272. Grand Rapids: Eerdmans, 2011.
- Hellerman, Joseph H. *When the Church was a Family: Recapturing Jesus' Vision for Authentic Christian Community*. Nashville, Tenn: B&H Publishing, 2009.
- Herman, Judith. *Trauma and Recovery: The aftermath of violence—from domestic abuse to political terror*. 2<sup>nd</sup> ed. New York: Basic Books, 1997.
- Hernandez, Wil. *Henri Nouwen and Soul Care: A Ministry of Integration*. Mahwah, NJ: Paulist, 2008.
- Heywood, D. "Faith development theory: A case for paradigm change." *Journal of Beliefs & Values* (2008) 29 263–272.
- Hiltner, Seward. *Pastoral Counseling*. Nashville: Abingdon, 1949.

- Hoare, Carol, et al. *Erikson on Development in Adulthood: New Insights from the Unpublished Papers*. New York: Oxford University Press, 2002.
- Hoefer, Hebert. "Principles of Cross-Cultural/Ethnic Ministry: The Stories of Barnabas and Paul and the Jerusalem Council." *Missio Apostolica* 13 (2005) 139–153.
- Hopkins, Denise D., and Michael Sherwood Koppel. *Grounded in the Living Word: The Old Testament and Pastoral Care Practices*. Grand Rapids: Eerdmans, 2010.
- Huh, John. "Non-anxious Presence of Jesus Through Mother-like Composure." *Journal of Pastoral Psychology* 61(2012) 57–58.
- Hunter, Rodney J. *Dictionary of Pastoral Care and Counseling*. Nashville, Abingdon, 1990.
- Jones, Serene. *Trauma and Grace: Theology in a Raptured World*. Louisville, KY: Westminster John Knox, 2009.
- Jung, Carl G. *Memories, Dreams, Reflections*. Translated by Richard and Clare Winston. New York: Random House, 1989.
- . *Psychology and Religion: West and East*. edited by Sir Herbert Read et al. Translated by R. F. C. Hull. 2<sup>nd</sup> ed. 11 vols. Princeton, NJ: Princeton University Press, 1989.
- . *Symbols of Transformation: An analysis of the prelude to a case of schizophrenia*. Edited by Sir Herbert Read et al. Translated by R. F. C. Hull. 2<sup>nd</sup> ed. 5 vols. New York: Harper & Brothers, 1962.
- . *The Theory of Psychoanalysis*, New York: Nervous and Mental Disease Publishing, 1915.
- Kauffman, Jeffery. *Loss of the Assumptive World: A Theory of Traumatic Loss*. New York: Brunner-Routledge, 2002.
- Keener, Craig S. *The Gospel of John: A Commentary*. Vol 2, Peabody, Mass: Hendrickson Publishers, 2005.
- . *The IVP Bible Background Commentary: New Testament*. Downers Grove: InterVarsity, 1993.
- Kierkegaard, Soren. *Works of Love: Some Christian Reflections in the Form of Discourse*. Translated by Howard and Edna Hong. New York: Harper and Row, 1962.

- Kirkey, Sharon. "Infertility on the rise in Canada: study." *National Post News*, Online: <http://news.nationalpost.com/2012/02/15/infertility-on-the-rise-in-canada-study/>
- Kostenberger, Andreas J. *John*. Grand Rapids: Baker, 2004.
- Kroeger, Catherine., and Mary J. Evans. *IVP Women's Bible Commentary*. Downers Grove: InterVarsity, 2002.
- LeDoux, Joseph. "Emotions: How I've Looked for Them in the Brain." In *Neuroscience and the Person*. 41–44. Vatican City State: Vatican Observatory, 2002.
- Lester, David. *Theories of Personality: A Systems Approach*. Hillsdale, N.J.: L. Erlbaum Associates, 1994.
- Lyon, Emily. "Spiritual Implications of Interpersonal Abuse: Speaking of the Soul." *Pastoral Psychology* 59 (2010) 233–247.
- Manning, Brennan. *Abba's Child: The Cry of the Heart for Intimate Belonging*. Colorado Springs: NavPress, 1994.
- Martin, James. *My Life with the Saints*. Chicago: Loyola, 2006.
- McBride, J. LeBron. *Spiritual Crisis: Surviving Trauma to the Soul*. New York: Haworth, 1998.
- McCoyd, Judith., and Carolyn Walter. "A Different Kind of Holding Environment: A Case Study of Group Work with Pediatric Staff." *Journal of Social Work in End-of Life & Palliative Care* 24 (2008) 5–22.
- McMinn, Mark R. *Psychology, Theology, and Spirituality in Christian Counselling*. Carol Stream, Ill: Tyndale House, 2011.
- Meeks, Wayne A. *The First Urban Christians: The Social World of the Apostle Paul*. New Haven: Yale University Press, 2003.
- Merriam-Webster Dictionary. Online <http://www.merriam-webster.com>.
- Modell, Arnold H. "The Holding Environment and the Therapeutic Action of Psychoanalysis." *Journal of the American Psychoanalytic Association* 24 (1976) 285–307.
- Mollica, Richard F. *Healing Invisible Wounds: Paths to Hope and Recovery in a Violent World*, Nashville: Vanderbilt University Press, 2009.

- Murphy, Francesca Aran. *Brazos Theological Commentary of the Bible: 1 Samuel*. Grand Rapids: Brazo, 2010.
- Murphy, S. Jonathan. "The Role of Barnabas in the Book of Acts." *Bibliotheca Sacra* 167 (2010) 319–341.
- Nouwen, Henri, et al. *Compassion: A Reflection on the Christian Life*. New York: Image Books, 2006.
- Nouwen, Henri J., and Robert Durbach. *Seeds of Hope: A Henri Nouwen Reader*. 2<sup>nd</sup> ed. London: Darton, Longman and Todd, 1998.
- Nouwen, Henri J. *Reaching Out: Three Movements of the Spiritual Life*. Garden City, New York: Doubleday, 1975.
- . *The Inner Voice of Love*. New York: Random House, 1998.
- . *The Wounded Healer: Ministry in Contemporary Society*. New York: Doubleday, 1979.
- Oates, Wayne E. *Your Particular Grief*. Philadelphia: Westminster Press, 1981.
- Palombo, Joseph, et al. *Guide to Psychoanalytic Development Theories*. New York: Springer, 2009.
- Parish, Dottie. *Changing Churches: A View from the Pew*. Enumclaw, WA: WinePress, 2012.
- Poling, J.N. "Toward a Constructive Practical Theology" A process-Relational Perspective." *International Journal of Practical Theology* 13 (2010) 199–216.
- Rambo, Shelly. *Spirit and Trauma: A Theology of Remaining*. Louisville, KY: Westminster John Knox, 2010.
- Rando, Therese A. *Treatment of Complicated Mourning*. Champaign, Illinois: Research Press, 1993.
- Read-Heimerdinger. "Barnabas in Acts: A Study of His Role in the Text of Codex Bezae." *JSNT* 72 (1998) 23–66.
- Reimer, Gail T., and Judith A. Kates. *Beginning Anew*. New York: Touchstone, 1997.
- Roberts, Lance W. *Recent Social Trends in Canada 1960-2000*. Montreal: McGill-Queen's University Press, 2005.



- Robinson, Dominic. *Understanding the 'Imago Dei': The Thought of Barth, von Balthasar and Moltmann*. Surrey, England: Ashgate, 1988.
- Roeckelein, Jon E. *Elsevier's Dictionary of Psychological Theories*. San Diego: Elsevier, 2006.
- Ryken et al., *Dictionary of Biblical Imagery*. Downers Grove: IVP Academic, 1998.
- Sakenfeld, Katharine D. *Just Wives: Stories of Power & Survival in the Old Testament & Today*. Louisville: Westminster John Knox, 2003.
- Saur, Marilyn S., and William G. Saur. "Transitional Phenomena as Evidenced in Prayer." *Journal of Religion and Health* 32 (1993) 55–65.
- Schechter, Susan. *Women and Male Violence: The Visions and Struggles of the Battered Women's Movement*. Boston: South End, 1982.
- Schroer, Silvia., and Thomas Staubli. "Bodily and Embodied: Being Human in the Tradition of the Hebrew Bible." *Interpretation* 67 (2013) 5–19.
- Seymour, Bruce D. *Creating Stories that Connect: A Pastor's Guide to Storytelling*. Grand Rapids: Kregel, 2007.
- Shapiro, Tim. "Resilient Congregations." *Congregations* 1 (2013) 22–23.
- Smith, Stacy. "Exploring the Interaction of Trauma and Spirituality." *Traumatology* 10 (2004) 231–243.
- Soelle, Dorothee. *Suffering*. Translated by Everett R. Kalin, Philadelphia: Fortress, 1975.
- Steckley, Laura. "Containment and Holding Environments: Understanding and Reducing Physical Restraints in Residential Child Care." *Children and Youth Services Review* 32 (2010) 120–128.
- Swinton, John., and Harriet Mowat. *Practical Theology and Qualitative Research*. London: SCM, 2006.
- Tedeschi, Richard G., and Lawrence G. Calhoun. "Posttraumatic Growth: Conceptual Foundations and Empirical Evidence." *Psychological Inquiry* 15 (2004) 1–18.
- 
- . "The Posttraumatic Growth Inventory: Measuring the Positive Legacy of Trauma." *Journal of Traumatic Stress* 9 (1996) 455–471.
- Tenney, Merrill C., and Richard N. Longenecker. *The Expositor's Bible Commentary: John and Acts*. Vol. 9. Grand Rapids: Zondervan, 1981.

- Thomas, Zach. *Healing Touch: The Church's Forgotten Language*. Louisville: Westminster, 1994.
- Tsevat, Matitiah. *The Meaning of the Book of Job and Other Biblical Studies: Essays on the Literature and Religion of the Hebrew Bible*. NY: Ktav. 1980.
- Tsumura, David Toshio. *The New International Commentary on the Old Testament: The First Book of Samuel*. Grand Rapids: Eerdmans, 2007.
- Tuber, Steven. *Attachment, Play, and Authenticity: A Winnicott Primer*. Lanham, Maryland: Rowman & Littlefield, 2008.
- van der Kolk, Bessel A, et al. "Approaches to the treatment of PTSD." *Extreme stress and communities: Impact and Intervention* (1995).
- \_\_\_\_\_. *Psychological Trauma*. Arlington: American Psychiatric, 1987.
- \_\_\_\_\_. *Traumatic Stress*. New York: Guilford, 1996.
- van Deusen Hunsinger, Deborah. "Bearing the Unbearable: Trauma, Gospel, and Pastoral Care." Princeton, N.J.: Princeton Seminary Bulletin, 2010.
- Vanier, Jean., and Carolyn Whitney-Brown. *Jean Vanier: Essential Writings*. Maryknoll, New York: Orbis Books, 2008.
- Walton, Heather. "Speaking in Signs: Narrative and Trauma in Pastoral Theology." *Scotland Journal of Healthcare Chaplaincy* 5 (2002) 1–4
- Walton, John H, et al. *IVP Bible Background Commentary: Old Testament*. Downers Grove: InterVarsity, 2000.
- Westermann, Claus. *Genesis 1–11: A Continental Commentary*. Minneapolis: Fortress, 1994.
- Williams, Rowan. "Trinity and Revelation," *Modern Theology* 2 (1986) 197–212.
- Witherington, Ben. *The Acts of the Apostles*. Grand Rapids: Eerdmans, 1998.
- Windle, Gill. "What is Resilience? A Review and Concept Analysis." *Reviews in Clinical Gerontology* 21 (2011) 152–169.
- Winnicott, Donald. *Playing and Reality*. London: Tavistock, 1971.
- \_\_\_\_\_. *The Child and the Outside World: Studies in Developing Relationships*. London: Tavistock, 1957.

- \_\_\_\_\_. *The Child, The Family, and The Outside World*. Victoria, Australia: Penguin Books, 1970.
- \_\_\_\_\_. *The Maturation Process and the Facilitating Environment: Studies in the Theory of Emotional Development*. New York: International Universities Press, 1965.
- \_\_\_\_\_. "The Theory of the Parent-Infant Relationship." *Int J. Psycho-Anal* 41 (1960) 585–595.
- Wolterstorff, Nicholas. *Lament for a Son*. Grand Rapids: Eerdmans, 1987.
- Wortman, Camille B. "Posttraumatic Growth: Progress and Problems." *Psychological Inquiry* 15 (2004) 81–90.
- Wray, T.J. *Surviving the Death of a Sibling: Living Through Grief When an Adult Brother or Sister Dies*. New York: Three Rivers, 2003.
- Wright, Nicholas Thomas. *Acts for Everyone: Part One*. Louisville: Westminster John Knox Press, 2008.
- Yealland, Lewis R. *Hysterical Disorders of War*. London: McMillan, 1918.
- Yoder, Carolyn. *The Little Book of Trauma Healing: When Violence Strikes and Community Security is Threatened*. Intercourse, PA: Good Books, 2005.
- Zylla, Phil C. "Cultivating the Resilient Congregation: Theoretical Reflections and Constructive Proposals." *MJTM* 15 (2013-2014) 100–118.
- \_\_\_\_\_. *The Roots of Sorrow*. Waco, Texas: Baylor University Press, 2012.