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EMBRACING TRAUMA IN THEODRAMA:
EMBODYING CHRISTIFORMITY

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EMBODYING CHRISTIFORMITY**

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To the Glory of God!

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PREFACE

This opportunity to study trauma from a Christian psychological perspective and develop a Bible-based trauma therapy is a privilege that will impact my life and ministry. This project would not have been possible without the help and support of many others. I am deeply grateful to Dr. Eric L. Johnson, my supervisor, who has provided invaluable wisdom, encouragement, prayer, friendship, and care. His psychospiritual leadership has strengthened my soul and developed my heart to sincerely care for sufferers. My thanks also go to Dr. Jeremy P. Pierre, who has shown a great example of a genuine pastor and theologian. I am also thankful to Dr. Stephen J. Wellum for serving on my dissertation committee and to Dr. Heather D. Gingrich for being my external reader.

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CHAPTER 1

A CALL FOR CHRISTIAN SOUL CARE TO TRAUMA

The glory of God is the ultimate end of creation (Isa 43:7; Isa 60: 21; Rom 11:36; Eph 1:11; 1 Cor 10:31).¹ Created in God’s image, human beings are to reflect the fullness of his glory,² and God says that this is “good” (Gen 1:31). Trauma, however, obscures the splendor of God’s glory in human life. As a result, Christian leaders who want to help people to live a “good” life before God must be prepared to offer soul care with respect to trauma. This dissertation encompasses a Christian psychological approach exploring trauma from the perspective of theodrama,³ a pastoral theological framework that can help God’s people in Christ survive and thrive in spite of their traumatic experiences, and a set of practices for promoting healing from trauma.

Introduction

Generally understood as an overwhelming physical or psychological wound, trauma can happen to anyone, at any time, in any context, and through any relationship.

¹God delights in the display of the fullness of his glory. By sharing his knowledge, holiness, and happiness with creatures and by giving creatures an ever-increasing likeness to God, God has made his glory the chief end of creation. His creation is the emanation of his glory and the communication of his fullness. See Jonathan Edwards, “The End for Which God Created the World,” in *God’s Passion for His Glory*, ed. John Piper (Wheaton, IL: Crossway Books), 125–251.

²Eric Johnson says, “The glory of the triune God is the ultimate end of creation and redemption, but that glory is uniquely expressed in the well-being of God’s image-bearers.” Eric L. Johnson, *Foundations for Soul Care: A Christian Psychology Proposal* (Downers Grove, IL: IVP Academic, 2007), 12.

³Theodrama refers to the narrative sequence of God’s interaction with humanity through his speaking and doing. In this drama, which consists of creation, fall, redemption, and consummation, God is the author and the hero, and human beings are active participants who enter into dialogical relationships with God and others and who must faithfully learn and fittingly perform their roles in Christ according to the holy script revealed in the Bible. See Kevin J. Vanhoozer, *The Drama of Doctrine: A Canonical Linguistic Approach to Christian Doctrine* (Louisville, KY: Westminster John Knox Press, 2005).

Relentless war, natural and man-made disasters, genocide, terrorism, and other forms of violence result in unbearable and intolerable suffering to victims, survivors, their families and neighbors, and society. Throughout history, human beings have experienced grievous loss through war. Even in the last one hundred years immeasurable suffering has resulted from World War I and II, the Vietnam war, Korean war, Iraq war, and Afghanistan war, among others. Genocide taking place around the world in the holocaust, and the modern atrocities of terrorism around the world are examples of the racial and systematic abuse of power that produce physical or emotional wounds, suppressed anger, and painful memories and symptoms among survivors.

Not only is trauma experienced in big world events, but also in everyday life—in family, the work place, school, and even church. In the United States, for example, around 60 percent of adults report having experienced sexual or physical abuse or other traumatic family circumstances during childhood.⁴ Every day 4 to 7 children die as a result of child abuse and neglect and 80 percent of child abuse mortalities involve at least one parent as a perpetrator.⁵ Regarding women, 27.3 percent have experienced sexual violence, physical violence, or stalking; 23.7 percent report being fearful of such abuse; 20.7 percent report being concerned for their safety; and 20 percent report experiencing one or more Post Traumatic Stress Disorder (PTSD) symptoms.⁶ Shockingly, every 107 seconds, another person in the US is raped or sexually assaulted.⁷ Also, about 19.6

⁴National Center for Mental Health Promotion and Youth Violence Prevention, “Childhood Trauma and Its Effect on Healthy Development,” *National Center for Mental Health Promotion and Youth Violence Prevention* (July, 2012), accessed September 2, 2016, <http://www.recognizetrauma.org/statistics.php>.

⁵U.S. Department of Health & Human Services, *Child Maltreatment 2012* (2013), accessed September 2, 2016, <http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/child-maltreatment>.

⁶Division of Violence Prevention, *Prevalence and Characteristics of Sexual Violence, Stalking, and Intimate Partner Violence Victimization: National Intimate Partner and Sexual Violence Survey, United States, 2011* (September 5, 2014), accessed September 2, 2016, <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6308a1.htm>.

⁷U.S. Department of Justice, *National Crime Victimization Survey* (2009-2013). According to the survey, an average of 293,066 victims are raped or sexually assaulted each year.

percent of students in 9 through 12 grades in the US report being bullied on school property, and 18 percent of students ages 12 to 18 report that gangs were present at their school during the school year.⁸

These devastating phenomena are taking place on the other side of the world as well. In Korea, over 50 cases of sexual violence, such as rape and sexual harassment, occur daily, and it has been increasing over time.⁹ Since 2001, the reported number of cases of child abuse, including sexual abuse, emotional abuse, battery, or negligence, has been increasing.¹⁰ Mass-media frequently reports on these kinds of traumatic events. For instance, a son murdered his mother and left the corpse in her room for over eight months because his mother was using punishment to force him to study hard in order to get into the most prestigious law school.¹¹ One congregant stabbed his senior pastor's throat several times with a knife and killed him at church, spreading terror to the whole congregation.¹² A growing number of teenage gangs at schools torture and batter classmates, which has led some to commit suicide.¹³ These kinds of vivid images reported by the media can themselves promote secondary traumatization.¹⁴ The list of

⁸Centers for Disease Control and Prevention, *Understanding School Violence Fact Sheet*, 2015, accessed September 2, 2016, http://www.cdc.gov/violenceprevention/youthviolence/schoolviolence/data_stats.html in June 10, 2015.

⁹Supreme Prosecutors' Office, "2007-2011 Statistics of Annual Crimes," *Statistics and Analysis of Annual Crimes* (Seoul: Supreme Prosecutors' Office, 2013).

¹⁰Ministry of Health & Welfare, "2012 Reports of National Child Abuse" (Seoul: Ministry of Health & Welfare, 2013). In 2001, 2,105 instances of child abuse were reported, but in 2012, that number increased to 6,403.

¹¹Sung Jae Bae and Hur Kyeong Joo, "A High School Kid Kills His Mother," *The Chosun Ilbo*, November 26, 2011, accessed September 2, 2016, <http://news.hankooki.com/lpage/society/201111/h2011112602341621950.html>.

¹²Seung Sik Yang, "An Insane Congregant Murders His Senior Pastor," *The Chosun Ilbo*, November 12, 2011, accessed September 2, 2016, http://news.chosun.com/site/data/html_dir/2011/11/12/2011111200991.html.

¹³Beyung Hak Kim, "Diagnosis of School Violence, 735 Student Committed Suicide," *The Donga Ilbo*, December 29, 2011, accessed September 2, 2016, http://localen.donga.com/News_List/3/02/20111229/42960090/1;http://imnews.imbc.com/replay/nwdesk/article/3049108_5780.html.

¹⁴Hasida Ben-Zur, Sharon Gil, and Yinon Shamshins, "The Relationship between Exposure to Terror through the Media, Coping Strategies and Resources, and Distress and Secondary Traumatization," *International Journal of Stress Management* 19, no. 2 (May 2012): 132–50; Henna Haravuori et al.,

traumatic events is endless. Indeed, almost every person who I have met in my soul care and counseling practice, regardless of age, sex, class, culture, and religion, has shared that she/he is suffering from some kind of trauma. Suffice it to say, trauma in the course of everyday life is common, whether experienced directly or indirectly.

The aftershock of trauma is destructive. Trauma affects one's capacity to know, to feel, to remember, to act, and to live.¹⁵ In addition to physical issues, people with trauma frequently experience the breakdown of cognitive and linguistic functions, difficulty with emotional regulation, compulsive and aggressive behaviors, and the loss of memory, interest, and a sense of reality. They can also tend to struggle with self-hatred, self-blame, shame and guilt, panic, depression, emotional deadness, hopelessness, and powerlessness. Oftentimes, they are not able to integrate the event into their personal story, feel physically and emotionally disconnected from themselves, and lose trust and intimacy with others. Their perception and value system are reorganized around the trauma event. For example, a survivor of sexual abuse may always concern herself with safety from another possible perpetrator, while a victim of fire may be primarily worried about another fire hazard. Such victims tend to live in a state of hyperarousal, being excessively vigilant to their environment, and suffering from acute anxiety even in ordinary situations because of repeated flashbacks, nightmares, or intrusive memories of the trauma event. Thus, they attempt to avoid anything that could trigger a symptom/reminder of their trauma and as a result they often feel isolated, depersonalized, and

"Effects of Media Exposure on Adolescents Traumatized in a School Shooting," *Journal of Traumatic Stress* 24, no. 1 (February 2011): 70–77.

¹⁵Judith L. Herman, *Trauma and Recovery: The Aftermath of Violence—From Domestic Abuse to Political Terror* (New York: Basic Books, 1997); Charles B. Strozier and Michael Flynn, eds., *Trauma and Self* (Lanham, MD: Rowman & Littlefield, 1996); Serene Jones, *Trauma and Grace: Theology in a Ruptured World*, 3rd ed. (Louisville, KY: Westminster/John Knox Press, 2009), 16–18; Heather Davediuk Gingrich, *Restoring the Shattered Self: A Christian Counselor's Guide to Complex Trauma* (Downers Grove, IL: IVP Academic, 2013), 16–23; Laurence Heller and Aline Lapierre, *Healing Developmental Trauma: How Early Trauma Affects Self-Regulation, Self-Image, and the Capacity for Relationship* (Berkeley, CA: North Atlantic Books, 2012); Bessel Van der Kolk, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (New York: Viking, 2014), 7–21.

disconnected from others, and dissociated from their own stories. Overall, traumatized people repeatedly suffer from distorted thoughts, emotions, and behaviors. They fail to develop a well-functioning, integrated sense of self and to build healthy relationships with others.

Moreover, trauma impacts one's experience of God. After a season of trauma, many people raise questions about God's attributes and even his existence. Some doubt God's goodness and love.¹⁶ Some renounce their belief in an all-powerful God.¹⁷ Some suffer from the feeling of abandonment by God and, more severely, a complete loss of faith in God's existence.¹⁸ Some get angry with a God who seems to apathetically allow the overwhelming, inexplicable suffering of his people. Regarding the genocide of Jews in Auschwitz, for example, Richard Rubenstein says, "If it was God's providence, then God is a sadist who inflicts pain, and he chose Israel only so that he could let it be exterminated in places like Auschwitz. Israel's election is then 'the most fearsome curse that God even inflicted.'" ¹⁹ Another theologian criticizes the traditional understanding of Christianity, especially substitutionary atonement, which assumes God's providence over

¹⁶Ernst Bloch says, "There is an evil, diabolic element deep in the being of God: the other face of the divine is the demonic." Henri Blocher, *Evil and the Cross: An Analytical Look at the Problem of Pain* (Grand Rapids: Kregel Academic & Professional, 2005), 67. In the same vein, Jakob Boehme puts it, "All things exist by Yes and by No, whether they are divine, diabolic, terrestrial, or whatever you will," quoted in *Ibid.* See also Harold S. Kushner, *When Bad Things Happen to Good People* (New York: Schocken Book, 2001), 173. Though Kushner does not agree with the fact that a part of God is evil, he also asks in a traumatic event, "If God can't make my sickness go away, what good is He? . . . He doesn't want you to go on having it, but He can't make it go away. That is something which is too hard even for God. What good is He, then?" *Ibid.*

¹⁷They suppose that God is powerless in the midst of human suffering. For example, Dorothee Sölle says, "If . . . suffering was still the 'rock of atheism', nothing is so eloquent of God in our own century as his defeat in the world. . . . God is helpless and needs help. . . . He made himself dependent upon us. . . . From now on, it is high time for us to do something for him." Dorothee Sölle, *Christ the Representative: An Essay in Theology After the Death of God* (Minneapolis: Fortress Press, 1967), 151. Also, an important aspect of Dietrich Bonhoeffer's doctrine of God is the idea of the powerlessness of God. See John A. Phillips, *Christ for Us in the Theology of Dietrich Bonhoeffer* (New York: Harper & Row, 1967), 185–86; Blocher, *Evil and the Cross*, 42–44; Annette G. Aubert, "Theodicy and the Cross in the Theology of Dietrich Bonhoeffer," *Trinity Journal*, no. 32 (April 1, 2011): 47–67.

¹⁸Harold G. Koenig, *In the Wake of Disaster: Religious Responses to Terrorism and Catastrophe* (Philadelphia: Templeton Press, 2006), 1–12.

¹⁹Richard L. Rubenstein, *After Auschwitz: History, Theology, and Contemporary Judaism*, 2nd ed. (Baltimore: Johns Hopkins University Press, 1992), 262.

traumatic sufferings, including the crucifixion of Jesus, as “abusive theology.”²⁰ For liberal feminist theologians, a Father God who would send his child Jesus to sacrificially die for humanity in order to save them from the wrath of God against human sin is considered a “bloodthirsty” God²¹ and a “sacrifice demander.”²² That God, they further accuse, is involved in “cosmic child abuse”²³ and sanctions the use of violence and punishment, and therefore promotes human violence along with a “recommendation of masochism”²⁴ that glorifies suffering and makes sufferers be silent even within abusive, unjust circumstances.²⁵

These voices are meaningful living human documents that empirically demonstrate how trauma can contribute to the distortion of one’s God-understanding. The problem is that they so radically interpret certain biblical passages based on their lived experiences that they fail to keep the biblical balance, or paradox, between God’s justice and love, and divine providence and human freewill. However, according to empirical research, traumatized people tend to have an abusive or indifferent image of God, rather than an image of a loving and caring God. This is especially true of those abused early in life by a primary caregiver.²⁶ Researchers also have found empirical evidence that a

²⁰Joanne Carlson Brown and Rebecca Ann Parker, “For God so Loved the World?,” in *Christianity, Patriarchy, and Abuse: A Feminist Critique*, ed. Joanne Carlson Brown and Carole R. Bohn (New York: Pilgrim Press, 1989), 26.

²¹Cynthia S. W. Crysdale, *Embracing Travail: Retrieving the Cross Today* (New York: Bloomsbury Academic, 1999), 115.

²²Stephen Finlan, *Options on Atonement in Christian Thought* (Collegeville, MN: Michael Glazier, 2007), 127.

²³Rita Nakashima Brock, *Journeys by Heart: A Christology of Erotic Power* (Eugene, OR: Wipf & Stock Pub., 2008), 56.

²⁴Dorothee Sölle, *Suffering* (Minneapolis: Fortress Press, 1984), 19.

²⁵To understand how the substitutionary atonement can be interpreted as an act of violence, see J. Denny Weaver, *The Nonviolent Atonement* (Grand Rapids: Wm. B. Eerdmans Publishing, 2001); Hans Boersma et al., *Atonement and Violence: A Theological Conversation*, ed. John Sanders (Nashville, TN: Abingdon Press, 2006).

²⁶Carrie Doehring, *Internal Desecration: Traumatization and Representations of God* (Lanham, MD: University Press of America, 1993), 109.

negative God image in turn, is associated with psychological and emotional problems. For example, beliefs that God is apathetic or does not engage personally in human life, harmfully impact one's coping strategies and self-esteem.²⁷ Feeling alienated from God is a major predictor of depression, and a fearful image of God is associated with suicidal tendencies.²⁸ The image of a passive, aloof, distant, and unsupportive God is related to serious pathological difficulties such as personality disorders.²⁹ In short, trauma may bring about distorted relational experiences with God, which in turn results in the distortion of the self and in relationship with others. Consequently, traumatized people in this state cannot live the "good" life that reflects the splendor of God's glory, the ultimate end of his creation.

Despite its severity and pervasiveness, trauma is frequently concealed. Not only have individuals and families closed their eyes to trauma, but also many in society have done the same. Traumatic events have often been buried by passive silence because of the emotional discomfort caused by exposure to the event; the problem of stigma, shame and guilt; and the fear of facing socio-economic-political power associated with them.³⁰ Trauma is too terrible to remember and too incomprehensible to put into words,

²⁷Judith A. Schreiber, "Image of God: Effect on Coping and Psychospiritual Outcomes in Early Breast Cancer Survivors," *Oncology Nursing Forum* 38, no. 3 (May 2011): 293–301; Carroll Saussy, *God Images and Self Esteem: Empowering Women in a Patriarchal Society* (Louisville, KY: Westminster/John Knox Press, 1991).

²⁸Julie Juola Exline, Ann Marie Yali, and William C. Sanderson, "Guilt, Discord, and Alienation: The Role of Religious Strain in Depression and Suicidality," *Journal of Clinical Psychology* 56 (2000):1481–96.

²⁹Eileen Marie McElroy, "The Effect of God Image and Religious Coping on Depression, Well-Being and Alcohol Use in College Students," *ETD Collection for Fordham University*, January 1, 1999, 1–221; Seyedeh Zahra Alavi, Forogh Amin, and Azar Pakdaman Savoji, "Relationship between Pathological Guilt and God Image with Depression in Cancer Patients," *Procedia: Social and Behavioral Sciences*, The 3rd World Conference on Psychology, Counseling and Guidance, WCPCG 2012, 84 (July 9, 2013): 919–24; Linda M. Abdelsayed et al., "The Impact of Personality on God Image, Religious Coping, and Religious Motivation Among Coptic Orthodox Priests," *Mental Health, Religion & Culture* 16, no. 2 (2013): 155–72; Hanneke Eurelings-Bontekoe et al., "Image of God and Personality Pathology: An Exploratory Study Among Psychiatric Patients," *Mental Health, Religion & Culture* 5, no. 1 (March 2002): 55–71.

³⁰Ervin Staub, *The Psychology of Good and Evil: Why Children, Adults, and Groups Help and Harm Others* (Cambridge: Cambridge University Press, 2003).

and thus are often called “unspeakable atrocities.”³¹ In this silence, people are little by little numbed into apathy to the horrific trauma and suffering. In Herman’s words, “The ordinary response to atrocities is to banish them from consciousness. . . . The knowledge of horrible events periodically intrudes into public awareness but is rarely retained for long. Denial, repression, and dissociation operate on a social as well as an individual level.”³²

Some subscribe to “just-world thinking” which considers victims as inevitably deserving their fate and thereby devaluing them.³³ Although several important figures, such as, Victor Frankl and Elie Wiesel, have raised their voices in sharing their tragic experiences with the public and various trauma theories and treatment centers have been springing up since 20th century, contemporary society still hesitates to honestly face the full reality of trauma. This passivity, regrettably, cannot initiate the genuine healing and transformation of the traumatized, and more seriously, it is often understood as support for perpetrators, while minimizing suffering of the traumatized people.³⁴ Consequently, many sufferers from trauma lack sufficient support, and therefore remain marginalized, unknown, unheard, and uncared for. Gerald L. Sittser’s words describe this sense of hopelessness: “I wondered whether I could survive another day, whether I *wanted* to survive another day. I felt punished by simply being alive and thought death would bring welcomed relief” (italics in original).³⁵

³¹Diane Langberg, *Suffering and the Heart of God: How Trauma Destroys and Christ Restores* (Greensboro, NC: New Growth Press, 2015), 6.

³²Herman, *Trauma and Recovery*, 1–2.

³³Staub, *The Psychology of Good and Evil*, 306.

³⁴*Ibid.*, 305–9.

³⁵Gerald L. Sittser, *A Grace Disguised: How the Soul Grows through Loss* (Grand Rapids: Zondervan, 2004), 28.

Unfortunately, the church's response to trauma is not much different from that of ordinary people. Although the Christian traditions have a long history of discussing the problem of suffering, biblically-based theories and practices concentrating on trauma treatment are relatively rare. Thus, pastors or soul-care providers today often avoid their responsibility to care for traumatized congregants by simply referring them to secular therapists or counselors. In other cases they adapt secular theories and techniques without serious discernment of how they fit within a biblical perspective. The problem of this approach is that modern secular therapeutic approaches to trauma are based on a naturalistic worldview that does not assume God's existence and his sovereignty over human history. So, they cannot grasp a holistic understanding of trauma. They miss one of the most important parts of spiritual reality—that God is a real person to be experienced firsthand. This deficiency not only leads to insufficient personal care, but leads to insensitive church exercises of liturgy, discipline, education, and pastoral ministry, in relation to trauma. As a result, it impedes the development of a healthy image of God and of the body of Christ.

For all of these reasons it is necessary to develop Christian trauma theories and soul-care practices rooted in the gospel, which assumes the holistic reality of human life in relationship with God. For Christian leaders, including pastors and Christian/Biblical counselors, the neglect of matters related to trauma is an escape from the reality of a broken world, sinful apathy toward sufferers, and a manifestation of the corrupted human heart that pursues "good" according only to a human perspective apart from God. The human knowledge of what is "good" does not always correspond to God's knowledge of what is good. What is good in the fallen eyes of humanity sometimes turns out to be evil from God's view (Isa 55:8-9; e.g., Gen 6:1-6; Matt 9:3-4). When it comes to trauma, the pursuit of what is "good" before God is to sincerely face the full reality of one's experience and seek transformation that reveals God's will and character even in the midst of that tragic reality, even though the process can be uncomfortable and painful

from a human perspective. God has never overlooked or forgotten his children in suffering; rather he provides and promises the fullness of love and care for them (Pss 22:24; 37:24; 46:1-3; 91:10-11; 138:7; Isa 65:17-25; Lam 3:31-33; Ezek 34:16; John 16:33; Rom 8:38-39; 2 Cor 1:5). God the Son incarnated and became one of us (Phil 2:5-11). He entered into this traumatic world, being with those who suffer, weeping with those who weep, and taking care of those who are in need. His soul-healing agenda is laid out throughout Scripture.³⁶ God further instructs his people to “encourage one another and help one another up” (1 Thess 5:11 GNT) and “with all possible wisdom . . . bring each one into God’s presence as a mature individual in union with Christ” (Col 1:28 GNT), making them “stand firm, as mature and fully convinced Christians, in complete obedience to God’s will” (Col 4:12 GNT). In this vein, studying trauma in a Christian way and engaging in Christ-like soul care for the traumatized is faithful to God’s calling; it is the imitation of Christ, that reflects a missional agenda that manifests God’s heart and grace to those who are in need.

To that end, this study asks the following research questions: What is trauma? How has trauma been understood according to modern psychological approaches and what limitations do they have? What is a Christian understanding of trauma? How can Christians experience God’s love and care in the midst of trauma? How can Christians embrace trauma within the framework of God’s redemption? And what does Christian trauma therapy look like?

Purpose Statement and Thesis

The purpose of this dissertation is fourfold: first, to review modern psychological approaches to trauma from a Christian viewpoint and provide a Christian psychospiritual description of trauma; second, to explore a theodramatic understanding of

³⁶Johnson, *Foundations for Soul Care*, 28–34.

trauma by discussing it in light of the redemptive-historical narrative of the Holy Scripture; third, to introduce Christiformity as the divinely ordained way of healing along with a discussion of its developmental dynamics with respect to trauma; and fourth, to construct a theodramatic therapy for trauma healing.

This dissertation will argue that the theodramatic understanding of trauma and relevant therapeutic practices help traumatized people reframe the reality of trauma within God's drama of redemption and thereby enable them to embrace it in the process of Christiformity, which is the God-given way of human healing and flourishing. There are four primary reasons for this position:

First, in contrast to modern psychology that excludes the spiritual reality of God from their studies of trauma, the Christian psychological approach views the world primarily from God's perspective as revealed through the Scripture. Because God's knowledge is *omniperspectival*, it includes the big picture while incorporating all legitimate finite, human perspectives. Therefore, Christian psychology can provide a more comprehensive understanding of trauma than secularism can. Within this framework of Christian perspectivalism, this study will develop a Christian psychopathology of trauma.

Second, since all human realities are present in God's drama, which flows from creation and the fall, to redemption, and on to consummation, one's trauma experience is not merely a psychopathological problem, but has existential and transcendent meaning at personal, sociocultural, and eschatological levels.

Third, if one can embrace trauma with Christiformity, then she/he can experience God's grace and care even in the midst of the tragic event, and mature as a Christ-like child of God. Christiformity in this context includes development of holiness, psychosocial growth, and sociocultural transformation.

Fourth, theodramatic therapy for trauma provides a new way of understanding oneself and one's story, and a new set of practices to facilitate a participant's

transformation from a life determined by trauma to a Christ-centered life, marked by redemption and the hope of consummation, and which also reflects the glory of God.

Background: A Brief History of Understanding Trauma

The term trauma comes from the ancient Greek, τραῦμα, which generally means “wound” or “injury.” Trauma is an overwhelmingly intense stress experience that is subjectively perceived severe enough to annihilate one’s physical, psychological, social and spiritual self, and that often results in impaired internal integration, memory, self- and social-functioning, as well as symptoms such as flashbacks, avoidance, negative cognitions and mood, and heightened arousal.³⁷ Trauma can derive from diverse contexts of life from severe injuries, sudden accidents, disasters, violence, oppression, conflicts in a relationship, loss of a job, separation, financial crisis, to those that damage one’s self-image or value, for example, being ridiculed early in life, making a shameful mistake in front of others.³⁸ This experience is a part of human depravity that relates to sin, damage, and suffering, but it is still under God’s sovereign drama of salvation and therefore can be a part of theodrama.

³⁷This working definition is developed from the criteria of Posttraumatic Stress Disorder and from many other theorists. For example, Judith Herman writes, “Traumatic events overwhelm the ordinary systems of care that give people a sense of control, connection, and meaning. . . . Unlike commonplace misfortunes, traumatic events generally involve threats to life or bodily integrity, or a close personal encounter with violence and death. They confront human beings with the extremities of helplessness and terror, and evoke the responses of catastrophe.” Herman, *Trauma and Recovery*, 33. Cathy Caruth states that “trauma is the confrontation with an event that, in its unexpectedness or horror, cannot be placed within the schemes of prior knowledge.” Cathy Caruth, ed., *Trauma: Explorations in Memory* (Baltimore: Johns Hopkins University Press, 1995), 153. Van der Kolk adds that trauma is something “unbearable and intolerable.” Van der Kolk, *The Body Keeps the Score*, 1. David M. Carr defines trauma as “an overwhelming, haunting experience of disaster so explosive in its impact that it cannot be directly encountered and influences an individual/group’s behavior and memory in indirect ways.” David M. Carr, *Holy Resilience: The Bible’s Traumatic Origins* (New Haven, CT: Yale University Press, 2014), 7. See also American Psychiatric Associations, “Posttraumatic Stress Disorder,” *Diagnostic and Statistical Manual of Mental Disorders*, 5th ed. (Arlington, VA: American Psychiatric Publishing, 2013).

³⁸Samantha L. Anders, Patricia A. Frazier, and Sheila B. Frankfurt, “Variations in Criterion A and PTSD Rates in a Community Sample of Women,” *Journal of Anxiety Disorders* 25, no. 2 (March 2011): 176–84.

The Biblical Origins of Trauma

The earliest trauma event may begin with the Christian history of Adam and Eve in the Old Testament. After they committed sin, they experienced fear of death, shame, and guilt (Gen 3:3; 10), and were expelled from their home, Eden (Gen 3:24), and from the eternal life that they had previously possessed (Gen 3:22). Their losses were overwhelming enough to change their entire lives, including their relational dynamics. Their experience was the first trauma event.

Since the Fall, biblical history was marked by an ongoing series of traumatic events. Cain killed his brother because of his anger (Gen 4:8). Lamech killed a man in revenge for wounding him (Gen 4:23). Noah experienced the extermination of humankind through the flood, though his family was spared (Gen 7:23). Isaac was threatened with death by his father (Gen 22:10). Tamar was raped by her half-brother (2 Sam 13:10-15). In one day, Job lost his family, property, and health (Job 1:13-19; 2:7). Tens of thousands have been killed during the wars in the Bible, leaving uncountable traumatized survivors (e.g., Gen 14:1-12; Exod 14:23-31; 17:8-16; Num 21:1-35; Josh 7:1-26; 10:1-27; 1 Sam 11:1-11; 18:17-30; 1 Kgs 11:14-22, etc.). In the New Testament, Paul was stoned and left for dead (Acts 14:19). The crucifixion of Jesus was one of the most extreme traumatic events in human history described in Scripture. Even as the God-man, Jesus, was “struck with terror and amazement and deeply troubled and depressed” when he faced the cross and said, “My soul is exceedingly sad (overwhelmed with grief) so that it almost kills Me!” (Mark 14:33-34 Amplified Bible).

These examples show that trauma is a large part of the biblical history. The Bible realistically describes such traumatic events adding up to centuries of the destructive reality of human suffering as part of a broader redemptive story. In so doing, it demonstrates God’s presence in the midst of shattered lives, and furthermore, gives accounts of God’s people, who survive, heal, and grow from tragedy through God’s care.

Thus, before the birth of the contemporary concept of trauma, Christian literature has understood it in terms of a broader concept of suffering. Trauma in this sense is a form of suffering acute enough to damage the self on a continuum from mild to severe.³⁹ The biblical understanding of suffering, including trauma, has largely focused on searching its causes, meanings, and value in relation to God.

For instance, the Sinai Covenant in the Old Testament presents an antithetical paradigm that promises blessings for obedience to the Law and curses (or punishment) for disobedience.⁴⁰ In this paradigm, human trauma can be associated with personal sins. At the same time, scripture reveals that human suffering is not always related to punishment for sin: God sometimes allows both the righteous and sinful to undergo suffering. In the Old Testament, Job, who was “blameless, upright, fearing God and turning away from evil” (Job 1:1), experienced extreme suffering, trauma that was allowed by God: Satan brought about various difficulties for the evil purpose of making Job away from God, but God allowed them for the good purpose of manifesting God’s excellence and promoting Job’s greater happiness and flourishing in God.⁴¹

The crucifixion of Jesus Christ in the New Testament may be the most salient example of God’s providence in suffering. God allowed Jesus, who had no sin, to undergo severe trauma, in order to redeem his people and bring them to God (e.g., John 3:17; 1 Pet 3:18). Jesus Christ willingly became obedient to the point of death on a cross (Phil 2:7-8) and bore humanity’s sins in his body on the tree (1 Pet 2:24). He was wounded and crushed for human depravity (Isa 53:5). He was tortured and died but he was resurrected and ascended (e.g., Matt 27:26-50; 28:1-10; John 19:1-30; 20:1-31). His

³⁹Eric L. Johnson, *God and Soul Care* (Downers Grove, IL: InterVarsity Press, forthcoming), chap.1.

⁴⁰Michael Scott Horton, *Covenant and Salvation: Union with Christ* (Louisville, KY: Westminster John Knox Press, 2007), 11–36.

⁴¹Johnson, *God and Soul Care*, chap.1.

suffering was a “redemptive suffering” for humanity.⁴² The biblical text demonstrates in many ways the positive value of suffering in relation to God: through suffering, God’s people can learn and keep his word (Ps 119:67, 71), receive comfort and care from the Lord (Exod 4:31; Isa 48:10; 49:13 Luke 17:25; 2 Cor 1:5-7), participate in Christ’s suffering and glory (Luke 24:16; Rom 8:17-18), take hold of the joy of resurrection in Christ (Phil 3:10-11; 1 Pet 4:13) and grow spiritually (Isa 48:10; Heb 5:8; 2 Thess 1:5; 1 Pet 2:19; 4:1; 5:10), and glorify God’s name (John 12:27-28; 1 Pet 4:16).

Many Christian scholars have echoed these biblical teachings on suffering. Augustine argues that God allows suffering for human benefit: suffering makes Christians humbly realize their wickedness, immorality, and ungodliness; it helps them not to focus too much on the corruptible life in this world, but to seek eternal life; and it leads them to purify their faith and to live a good and pious life.⁴³ Martin Luther stresses the gospel of justification by faith alone and makes suffering a God-given means of sanctification: suffering serves to test the genuineness of faith and to purify the soul.⁴⁴ John Calvin says that human suffering and calamity are God’s providence and the glory of God is displayed in those who suffer.⁴⁵ According to Calvin, the affliction of believers allows them to experience and depend on God’s excellency; it develops the virtues of patience and obedience, mortifies sins and wickedness, promotes a courage of faith, and facilitates the hope of resurrection promised to those who are united with Christ’s suffering.⁴⁶

⁴²Mary VandenBerg, “Redemptive Suffering: Christ’s Alone,” *Scottish Journal of Theology* 60, no. 4 (November 2007): 394–411.

⁴³Augustine, *Nicene and Post-Nicene Fathers*, Series 1, vol. 2, *St. Augustine: City of God, Christian Doctrine*, ed. Phillip Schaff (Grand Rapids: W.B. Eerdmans Publishing Company, 1983), 6–7.

⁴⁴Ronald K. Rittgers, *The Reformation of Suffering: Pastoral Theology and Lay Piety in Late Medieval and Early Modern Germany* (New York: Oxford University Press, 2012), 257.

⁴⁵John Calvin, *Institutes of the Christian Religion*, rev. ed. (Peabody, MA: Hendrickson Publishers, 2007), 1.17.1.

⁴⁶*Ibid.*, 3.8.1-8.

These traditional understandings of suffering have influenced modern Christian scholars who restate the same themes. John Piper argues that suffering is “an essential part of the created universe in which the greatness of the glory of the grace of God can be most fully revealed.”⁴⁷ He further explains that suffering deepens faith and holiness, enlarges one’s capacity to enjoy God’s glory, awakens people from indifference and make them bold, creates an openness to the gospel, encourages people to obey the missionary command, and manifests the supremacy of God.⁴⁸ Paul Tripp also argues that suffering is the “common ground” of human life and one of “God’s most useful workrooms,” and therefore Christian sufferers, are also God’s ambassadors, called by God to identify with and minister to those who are in pain.⁴⁹ Gerald Sittser also argues that the trauma of loss and the experience of restoration are in God’s hand. He notes that human suffering happens in the midst of “a bigger picture” and it is a “part of a wonderful story authorized by God himself.”⁵⁰

In short, trauma in the context of suffering has been traditionally understood for Christians in relationship with God and his providential ministry of redemption. First, suffering is sometimes a punishment or a judgment of God against sin. Second, suffering is part of God’s larger and good plan. Third, suffering, especially for Jesus, is inevitable to redeem his people. This Christian paradigm helps to understand trauma from the perspective of the grand picture of God’s redemption, which includes a spiritual world and transcendent relationships beyond the material realm. Lamentably, however, the

⁴⁷John Piper, “Suffering of Christ and the Sovereignty of God: Ten Aspects of God’s Sovereignty Over Suffering and Satan’s Han in It,” in *Suffering and the Sovereignty of God*, ed. Justin Taylor and John Piper (Wheaton, IL: Crossway Books, 2006), 82.

⁴⁸John Piper, “Why God Appoints Suffering for His Servants,” in *Suffering and the Sovereignty of God*, ed. Justin Taylor and John Piper (Wheaton, IL: Crossway Books, 2006), 91–110.

⁴⁹Paul David Tripp, *Instruments in the Redeemer’s Hands: Helping People in Need of Change* (Phillipsburg, NJ: P & R Publishing, 2002), 145.

⁵⁰Sittser, *A Grace Disguised*, 104.

contemporary understanding of trauma has largely developed outside of the biblical text and tradition and is based on natural scientific method, excluding the reality of relationship with God.

The Development of Contemporary Psychological Understandings of Trauma

Beside the biblical text, the earliest records of trauma can be found in ancient Sumerian history. Menachen Ben-Ezra found cuneiform tablets containing the descriptions of anxious tension and sleep disturbance regarding the death of King Urnamma (2111-2094 BC) and lamentation over the destruction of Ur, the Sumerian city (2026-2003 BC) that were similar to today's post-traumatic reactions.⁵¹ The most well-known ancient documents that refer to trauma, however, are probably in Homer's *Iliad* (725- 675 BC) and *Odyssey* (750-650 BC). Researchers can see typical examples of traumatic symptoms in these literary works. In reaction to the death of Patroclus, Achilles suffered from recollection of the death and agitated sleep, while Ulysses felt an intense sense of guilt and shame after the loss of his soldiers and thus wished he could have died in Troy in their place.⁵² These ancient texts provide a rudimentary description of the symptomatology of trauma.

The contemporary psychological study of trauma started with the development of modern neurology. A French neurologist, Jean Martin Charcot, who worked with traumatized women in the Hospital de la Salpêtrière, during his study of hysteria in the late nineteenth century, first understood that the hysterical symptoms in nature were not

⁵¹Menachem Ben-Ezra, "Trauma in Antiquity: 4000 Year Old Post-Traumatic Reactions?" *Stress & Health: Journal of the International Society for the Investigation of Stress* 20, no. 3 (August 2004): 121–25.

⁵²Philippe Birmes et al., "Early Historical Literature for Post-Traumatic Symptomatology," *Stress & Health: Journal of the International Society for the Investigation of Stress* 19, no. 1 (February 2003): 17–26. See also Priscilla Dass-Brailsford, *A Practical Approach to Trauma: Empowering Interventions* (Thousand Oaks, CA: SAGE Publications, 2007), 3; Ben-Ezra, "Trauma in Antiquity," 121-22.

physiological but psychological.⁵³ Pierre Janet, one of Charcot's students, further studied the influence of traumatic experiences on dissociative problems and personality development, and he found that patient's symptoms can be alleviated through hypnosis, abreaction, and re-experiencing of the traumatic memories.⁵⁴ Influenced by Charcot, the young Sigmund Freud also developed a hypothesis, with a senior colleague Josef Breuer, that the traumatic memories impact one's unconscious as well as one's conscious awareness and therefore cause hysterical symptoms, such as memory disturbance, flashbacks, and repetitious compulsions.⁵⁵ Later Freud moved from this trauma-related "seduction theory" to a "conflict theory," which emphasized the influence of the "unacceptable" instincts of sex and aggression rather than the repressed memories of actual traumatic events.⁵⁶ Even so, he recognized the destructive impact that actual traumatic events could have on the patient's psyche. Unfortunately, the diagnosis of trauma in those days did not validate people's suffering or provide enough interventions; rather, it tended to stigmatize those who suffered from trauma (i.e., hysterical symptoms) as individuals having poor moral character.⁵⁷ However, their studies of trauma, focused on hysteria, still provided the foundation of modern psychological theories on trauma.

Another psychological approach to trauma derived from the military. During World War I, some soldiers returned with symptoms, such as uncontrolled grief and fear, memory loss, helplessness, lack of responsiveness, inability to think, sleep, walk, or even talk, which was called "shell shock."⁵⁸ The psychological "first aid" that was first

⁵³Shoshana S. Ringel and Jerrold R. Brandell, eds., *Trauma: Contemporary Directions in Theory, Practice, and Research* (Thousand Oaks, CA: SAGE Publications, 2011), 1.

⁵⁴Dass-Brailsford, *A Practical Approach to Trauma*, 3; Ringel and Brandell, *Trauma*, 1.

⁵⁵Joseph Breuer and Sigmund Freud, *Studies On Hysteria* (New York: Basic Books, 1893).;

⁵⁶Shoshana S. Ringel and Jerrold R. Brandell, eds., *Trauma: Contemporary Directions in Theory, Practice, and Research* (Thousand Oaks, CA: SAGE Publications, 2011), 2.

⁵⁷Carr, *Holy Resilience*, 257.

⁵⁸Adam Hochschild, *To End All Wars: A Story of Loyalty and Rebellion, 1914-1918* (Boston: Houghton Mifflin Harcourt, 2011), xv, 254.

developed was for the pragmatic purpose of helping soldiers recover and return to the combat field as soon as possible by providing a brief intervention.⁵⁹ Still, traumatized soldiers were not fully understood and were often devalued as being less capable of handling stressful situations.⁶⁰

In 1941, Abram Kardiner in his famous study *The Trauma Neuroses of War* discovered that many veterans, even after the war, fixated on the traumatic events and thus lost their adaptive capacity; they acted as if they were still in the midst of the traumatic experience and thus expressed outbursts of aggression, a startle reaction, and other defensive behaviors.⁶¹ The concept of “post-trauma syndrome” as a disorder (post-traumatic stress disorder, PTSD, as it is understood today) was initiated at this point.⁶² Moreover, Kardiner (with Herbert Spiegel) underlined the importance of relatedness, consistent support, and the necessity of integrating the traumatic memories into the individual’s consciousness.⁶³ During his study, Kardiner also understood that anyone could have traumatic symptoms and that such reactions were common in war, in contrast to earlier approaches that mainly attributed the traumatic problems to the patient’s inadequacy or immaturity.⁶⁴ Kardiner’s understanding was significant in promoting the sincere and compassionate consideration of traumatized individuals. During World War II, more psychiatrists were engaged in treating trauma and the U.S Army started to use

⁵⁹Ringel and Brandell, *Trauma*, 2.

⁶⁰Carr, *Holy Resilience*, 258.

⁶¹Abram Kardiner, *The Traumatic Neuroses of War* (Washington, DC: National Academies, 1941), 82.

⁶² Dass-Brailsford, *A Practical Approach to Trauma*, 4.

⁶³Abram Kardiner and Herbert X. Spiegel, *War Stress and Neurotic Illness* (New York: Paul B. Hoeber, 1947).

⁶⁴Ringel and Brandell, *Trauma*, 3.

“group stress debriefing” in order to provide combatants with systematic and regular support.⁶⁵

After World War II, trauma study expanded to include the cases of the Holocaust survivors. William G. Niederland in the 1950s began to work with survivors of Nazi concentration camps, observing their common traumatic reactions, which he called “survivor syndrome.”⁶⁶ Henry Krystal also studied the traumatization of German concentration camp survivors, elaborating on the diagnosis of alexithymia, which is the inability to experience, identify and verbalize, symbolize, or interpret emotions.⁶⁷ In this period, a more vivid understanding of trauma survivors became possible. Viktor E. Frankl, in *Man’s Search For Meaning*, described his experiences of the atrocities in the Nazi’s death camps and emphasized the existential value of humanity that enabled people to search for the transcendent, spiritual meanings of life, and thereby empowered them to actively choose how to live, even in the midst of the radical situations.⁶⁸ Elie Wiesel, in his autobiographical book *Night*, also shared the cruelties of humanity performed by the Nazis, the fear and the terror of the survivors, the brutalities committed by survivors in order to survive, and the silence of bystanders.⁶⁹ These works are important, because they reveal human reality in the midst of traumatic events from the sufferer’s standpoint as well as the possibility of change that still exist in humanity.

After the Vietnam War, many veterans showed chronic problems, such as drug or alcohol abuse, violent behavior, homelessness, and the inability to keep a job in some cases. In order to help them, Robert J. Lifton and Chaim Shatan created “rap groups” in

⁶⁵Ringel and Brandell, *Trauma*, 3.

⁶⁶Carr, *Holy Resilience*, 259.

⁶⁷Ringel and Brandell, *Trauma*, 3.

⁶⁸Viktor E. Frankl, *Man’s Search for Meaning* (Boston: Beacon Press, 2006).

⁶⁹Elie Wiesel, *Night*, trans. Marion Wiesel (New York: Hill and Wang, 1960).

which they shared their difficult experiences and provided support to one another. Based on this group work, clinical records of Vietnam veterans as well as the previous studies of trauma, they identified 27 common symptoms of “traumatic neurosis.”⁷⁰ They also successfully persuaded the American Psychiatric Association (APA) to add PTSD as a new diagnosis in the *Diagnostic and Statistical Manual of Mental Disorder III* (DSM-III) published in 1980.⁷¹

During this time, another aspect of trauma study was also being developed in the contexts of our daily life. In 1942, a fire at Cocoanut Grove, a nightclub in Boston, took 493 people’s lives and injured hundreds. Following this tragedy Erich Lindemann recognized some common responses among survivors and their families and relatives, and developed a symptomatology of grief, including preoccupation and identification with the lost one, feelings of guilt and hostility, disorganization, and physical pain.⁷² Expanding on Lindemann’s study, Gerald Caplan considered that disaster as a crisis and found that a crisis reaction occurred in stages.⁷³ His work was the first attempt to systematically describe the components of crisis.⁷⁴ Through this research, the impact of common, but difficult life events have gradually become an essential part of trauma study. Moreover, as a result of the women’s movement in the 1970s, trauma study expanded to the private sphere, including domestic violence, child abuse, rape, and sexual harassment.⁷⁵ Thus, when psychological trauma was included in the DSM III in 1980,

⁷⁰Ringel and Brandell, *Trauma*, 4–5.

⁷¹Van der Kolk, *The Body Keeps the Score*, 19.

⁷²Erich Lindemann, “Symptomatology and Management of Acute Grief,” *American Journal of Psychiatry* 101, no. 2 (September 1, 1944): 141–48. See also Ringel and Brandell, *Trauma*, 4

⁷³Gerald Caplan, *An Approach to Community Mental Health* (Abingdon, UK: Routledge, 1961). The four stages are (1) an initial rise in tension occurs in response to an event (2) increased tension disrupts daily living (3) unresolved tension results in depression and (4) failure to resolve the crisis may result in a psychological breakdown. See Dass-Brailsford, *A Practical Approach to Trauma*, 96.

⁷⁴Ringel and Brandell, *Trauma*, 4.

⁷⁵*Ibid.*, 5-6.

abused women and children as well as those traumatized by combat or accidents were included in the diagnosis of PTSD.⁷⁶

As the PTSD diagnosis came to be generally accepted, more everyday problems in the society that could cause trauma were revealed, and a greater number of psychologists, counselors, and social workers engaged in the study of chronic trauma.⁷⁷ As a result, trauma studies and interventions expanded not only to provide psychological healing, but also to bring about social change in policies and institutions. In the midst of this wave, the PTSD diagnosis in DSM III was criticized for subtly delivering the message that the suffering of women, minorities, and marginalized people was not normal and thereby was blamed on the sufferers themselves, or at least labeled them as abnormal too easily.⁷⁸ Another criticism was that the assessment of PTSD did not sufficiently consider the causes in one's developmental history and the impacts of psychosocial stressors over one's life.⁷⁹ Because of the absence of an appropriate trauma diagnosis, some traumatized people were diagnosed with 3-8 co-morbid disorders.⁸⁰ In response, Herman suggested a new diagnosis of "Complex PTSD" that addresses multiple origins of trauma throughout one's lifetime, including primary care experiences, relational wounds, sociocultural disturbances, as well as a single acute trauma, such as a car accident, rape, or exposure to a natural disaster.⁸¹

⁷⁶American Psychiatric Association, *Diagnostic and Statistical Manual of Mental Disorders: DSM-III-R* (Washington, DC: American Psychiatric Association, 1987).

⁷⁷Carr, *Holy Resilience*, 261–62.

⁷⁸*Ibid.*, 262. For the detailed criticism regarding the problematic term "outside the range," see Laura S. Brown, "Now Outside the Range: One Feminist Perspective on Psychic Trauma," in *Trauma: Explorations in Memory*, by Cathy Caruth (Baltimore: Johns Hopkins University Press), 100–112.

⁷⁹Ringel and Brandell, *Trauma*, 6.

⁸⁰Van der Kolk, *The Body Keeps the Score*, 159.

⁸¹Herman, *Trauma and Recovery*, 115–32.

The definition of PTSD in the DSM was also revised; DSM-IV renounced the problematic expression that suggested that sufferers were abnormal and broadened its definition to include a greater diversity of responses to trauma.⁸² Meanwhile, Van Der Kolk and his colleagues also proposed a new diagnosis of “Developmental Trauma Disorder (DTD).”⁸³ DSM-5 eventually included aspects of Complex PTSD and DTD in the definition of trauma.⁸⁴ More recently, the understanding of trauma has broadened even further to include the effects of terrorism,⁸⁵ racism,⁸⁶ colorism,⁸⁷ and even immigration.⁸⁸

In short, the contemporary psychological understanding of trauma has developed extensively over time; ranging from domestic abuse, to social injustice, to war;

⁸²Carr, *Holy Resilience*, 263.

⁸³Van der Kolk, *The Body Keeps the Score*, 158–59.

⁸⁴Though the term DTD was rejected by APA, its aspects, commonly addressed by Complex PTSD, were included in DSM-5. Judith L. Herman, “Epilogue to the 2015 Edition,” in *Trauma and Recovery: The Aftermath of Violence—From Domestic Abuse to Political Terror* (New York: Basic Books, 2015), 257.

⁸⁵Gwen Brookes, Julie Ann Pooley, and Jaya Earnest, *Terrorism, Trauma and Psychology: A Multilevel Victim Perspective of the Bali Bombings* (New York: Routledge, 2014); Yael Danieli, Danny Brom, and Joe Sills, “The Trauma of Terrorism: Contextual Considerations,” *Journal of Aggression, Maltreatment & Trauma* 9, no. 1 (September 2008): 1–17; Rachel Pain, “Everyday Terrorism: Connecting Domestic Violence and Global Terrorism,” *Progress in Human Geography* 38, no. 4 (August 2014): 531–50; Carol North, Carissa Barney, and David Pollio, “A Focus Group Study of the Impact of Trauma Exposure in the 9/11 Terrorist Attacks,” *Social Psychiatry & Psychiatric Epidemiology* 50, no. 4 (April 2015): 569–78.

⁸⁶Dass-Brailsford, *A Practical Approach to Trauma*; Robert T. Carter, “Race-Based Traumatic Stress,” *Psychiatric Times* 23, no. 14 (December 2006): 37–38; Rebecca S. Katz, Hannah Willis, and Justin Jabar Joseph, “Economic Inequality, Racism and Trauma: Growing Up in Racist Combat Zones and Living in Racist Prisons,” *Journal of Pan African Studies* 7, no. 6 (October 21, 2014): 25–59.

⁸⁷Carlyle Thompson and Paul J. Schwartz, “A New Normal: Young Men of Color, Trauma, and Engagement in Learning,” *New Directions for Adult & Continuing Education* 2014, no. 144 (Winter 2014): 49–58; Laura Quiros and Beverly Araujo Dawson, “The Color Paradigm: The Impact of Colorism on the Racial Identity and Identification of Latinas,” *Journal of Human Behavior in the Social Environment* 23, no. 3 (April 2013): 287–97; Daniel J Gaztambide, “I’m Not Black, I’m Not White, What Am I? The Illusion of the Color Line,” *Psychoanalysis, Culture & Society* 19, no. 1 (April 2014): 89–97.

⁸⁸Miriam George, “Migration Traumatic Experiences and Refugee Distress: Implications for Social Work Practice,” *Clinical Social Work Journal* 40, no. 4 (December 2012): 429–37; Brian Allen, Erica Cisneros, and Alexandra Tellez, “The Children Left Behind: The Impact of Parental Deportation on Mental Health,” *Journal of Child & Family Studies* 24, no. 2 (February 2015): 386–92; Hazel Ipp, “Inside-Out and Outside-In: Exploring Differences-Response to Discussants,” *International Journal of Psychoanalytic Self Psychology* 5, no. 4 (October 2010): 420–28.

from one's early experiences, to a distinct traumatic event, to a whole lifetime of suffering. In terms of symptomatology, it is broad enough to include any unusual responses to traumatic events, associated people, and memories. The development of this extensive understanding of trauma amounts to a valuable psychotherapeutic contribution to the treatment of trauma.

Calling for a New Methodology

These modern psychological approaches to trauma, however, have not assumed the impact of the reality of God, since their main assumptions are rooted in naturalism.⁸⁹ From the biblical standpoint, every single moment of each person's life is under God's providence. In addition, all believers are in union with Christ. Thus, any study of human life, including trauma, is not complete until it has been reframed by the spiritual reality of God's providence and, for believers, rooted in relationship to God through union with Christ. Thus, in order to conduct a truly comprehensive study of trauma, it is necessary to apply a methodology rooted in the reality of God's kingdom.

With this awareness, some scholars over the last several decades have seriously engaged in the study of trauma matters (not the problem of suffering as a broader concept) from a Christian perspective that includes God's presence and interventions. For example, Diane Langberg argues that trauma is "one of the primary mission fields of the twenty-first century."⁹⁰ Thus, she explores the psychological, relational, and spiritual impact and interventions of diverse trauma, such as sexual abuse, domestic violence, and complex trauma, based on an understanding of scripture along with her many years of experience in trauma therapy. She distinctively presents a psychology of sin, evil, and suffering, and argues that Christ has the power to transform traumatized people's value

⁸⁹ I will deal with the limitations of modern psychology approach to trauma in chap. 2.

⁹⁰Langberg, *Suffering and the Heart of God*, 9.

system and life, while Christian counselors are his assistants in bringing about such healing. To follow Christ, she urges, Christian therapists are called to be “rescue workers” who must “walk into poverty, brokenness, prisons, darkness, mourning, and despair . . . [and] live and work among the tombs.”⁹¹

Alistair McFadyen examines the explanatory and descriptive power of the theological language of sin in the modern therapeutic context in which secularism is so pervasive. McFadyen says, “If God is the most basic reality and explanation of the world, then it must be the case that the world cannot *adequately* be explained, understood, lived in, without reference to God in our fundamental means both of discernment and of action.”⁹² By examining modern pragmatic atheism and a traditional understanding of sin, he attempts to revive the doctrine of sin in our daily pathological explanation of the world. He engages in this project particularly in relation to two traumatic situations: sexual abuse of children and the holocaust.

Serene Jones draws the stages of trauma healing from Calvin’s standard division of the Psalms.⁹³ She provides three stages of Psalmic healing. From psalms of deliverance, she draws stage 1, establishing safety, providence, and divine witnessing. From psalms of lament and mourning, she develops stage 2, remembering and offering testimony. From psalms of thanksgiving, she provides stage 3, reintegrating the mundane and the scope of divine grace. She further argues that Christ’s cross can mirror the tragic experiences of the traumatized and promote unending empathy and healing. Through a “Christianly formed imagination,” she adds, Christians can experience Christ’s love and grace even in this ruptured world.

⁹¹Langberg, *Suffering and the Heart of God*, 70.

⁹²Alistair McFadyen, *Bound to Sin: Abuse, Holocaust and the Christian Doctrine of Sin* (Cambridge: Cambridge University Press, 2000), 10.

⁹³Jones, *Trauma and Grace*, 55-67.

Heath Lambert, Laura Hendrickson, et al. lay out a process of biblical counseling for traumatized people and other hard cases. Based on the assumption of the sufficiency of God’s word, they present vivid pictures of counseling ministry that attempt to comprehensively understand people’s hearts in the midst of profound difficulty and provide biblical language that speaks into their individual lives.

Moreover, the Society of Biblical Literature in autumn 2013, opened a consultation on “Biblical Literature and the Hermeneutics of Trauma,” inviting a growing number of scholars to interact with trauma and the Bible in diverse ways. The American Association of Christian Counseling has annually held a world conference that includes trauma sections, introducing diverse Christian counseling approaches to trauma. These examples demonstrate an increasing interest in developing Christian understandings and responses to trauma matters.

In the midst of this developing scholarship, this dissertation will provide a Christian approach to trauma, which comprehensively understands the human person as a whole being, including bio-psycho-socio-ethico-spiritual orders—created by God—and suggests biblical interventions of trauma healing.

Methodology

In the beginning God created the world, and ever since then the created order of the universe has existed within his providence (Gen 1-2; Pss 33:13; 103:19; 115:3; 147:4-5; Prov 16:1, 9; Dan 4:17; Jer 10:23; Neh 9:6; Matt 6:26, 30; Matt 10:29-30).⁹⁴ Since everything in creation is from God, through God, and to God (Rom 11:36) and knowledge begins with the fear of the Lord (Prov 1:7), the primary foundation of human

⁹⁴God’s providence means that God continually conserves and governs his creation for his purpose. Wayne Grudem adequately defines it as follows: “God is continually involved with all created things in such a way that he (1) keeps them existing and maintaining the properties with which he created them; (2) cooperates with created things in every action, directing their distinctive properties to cause them to act as they do; and (3) directs them to fulfill his purposes.” Wayne A. Grudem, *Systematic Theology: An Introduction to Biblical Doctrine* (Grand Rapids: Zondervan, 1994), 315.

knowledge must be grounded in the knowledge of God. God's knowledge is *omniperspectival*: God knows all possibilities and actualities; God knows all situational, experiential, and normative knowledge.⁹⁵ Particularly, since human beings are created as God's image-bearers, a proper understanding of human nature, psychopathology, and related interventions cannot be done adequately apart from God's knowledge about humanity. Being a finite creature, humans must study trauma with reference to God, who is *omniscient* and thus is the author of all knowledge. In this sense, this dissertation is built from three methodological foundations.

First, this dissertation explores trauma from a Christian psychological approach. Christian psychology explores human life and dynamics in the framework of the reality of God's creation, provided by both special and general revelation. The reality of creation is a multi-layered entity that holistically includes biological, psychosocial, ethical, and spiritual orders.⁹⁶ The Christian psychology approach assumes that much knowledge about humans has already been gained through the history of the Christian tradition. However, after the development of modern psychology, which is based on secularism,⁹⁷ the considerations of God and his involvement in the world have been removed from public discourse.⁹⁸ At the same time, exclusive adherents to a biblical view

⁹⁵John M. Frame, *The Doctrine of the Knowledge of God* (Phillipsburg, NJ: P & R Publishing, 1987), 73–75; 89–90.

⁹⁶Johnson, *Foundations for Soul Care*, 334–51.

⁹⁷José Casanova explains the secularization in modernity with three prepositions: the “differentiation” of religious and secular areas, “religious decline” in the public square, and the “privatization” of religion. José Casanova, *Public Religions in the Modern World* (Chicago: University of Chicago Press, 1994), 7. Charles Taylor also claims that modernity is a “secular age” in which religious beliefs, norms, and principles are separated from social spheres in contrast to earlier societies in which religion “was everywhere” and “was interwoven with everything else.” Charles Taylor, *A Secular Age* (Cambridge, MA: The Belknap Press of Harvard University Press, 2007), 3. In the development of secularization in modern times, both scholars agree with that religion has been excluded from the public discourse and become merely a private choice. Secularism asserts to be free from religious norms and beliefs and thus skeptical about the Bible and God.

⁹⁸Modern psychology refers to a natural scientific study of human experiences, such as cognition, emotion, behavior, relationship, family dynamic, social interaction, and culture. Grounded in a fundamental Enlightenment confidence in human rationality, this discipline inevitably became secular and

tend to be so cautious about accepting the research of modern psychology that they do not engage in constructive dialogue with the current field. Both approaches can fall into reductionism, and thus fail to provide a holistic understanding of psychological topics. Avoiding this dichotomy between theology and psychology, Christian psychology approaches such topics based on the primary authority of the Bible, with a serious exploration of the legacy of the Christian tradition in terms of anthropology and soul care, while also actively participating in a dialectical communication with the legitimate discoveries of modern psychology.⁹⁹ Thus, Christian psychology can provide a more biblical and a more comprehensive understanding than the other views. Believing in the Bible as the inspired word of God, this approach assumes the “Christian understanding of reality” is true.¹⁰⁰ Also, this approach attempts to discern between human wisdom and practices and God’s perspective as much as possible, thereby mortifying fallen aspects and redeeming valid aspects of modern psychology. Through the framework of Christian psychology, this study will review contemporary psychological theories of trauma and provide a Christian psychopathology of trauma based on God’s truth.

Second, this dissertation assumes the necessity of a theodramatic framework. From the perspective of “Christian reality,” all human history is part of God’s grand redemptive drama. In contrast to the redemptive-historical perspective that describes the

thereby turned away from the Christian worldview. See Eric L. Johnson and Steven J. Sandage, “A Postmodern Reconstruction of Psychotherapy: Orienteering, Religion, and the Healing of the Soul,” *Psychotherapy: Theory, Research, Practice, Training* 36, no. 1 (1999): 1–15.

⁹⁹More details about Christian psychology and other approaches to psychology and theology, see Eric L Johnson, ed., *Psychology & Christianity: Five Views* (Downers Grove, IL: IVP Academic, 2010).

¹⁰⁰The core ideas of Christian reality, in John Coe’s terminology “the reality of faith,” are followings: “(1) God exists (Heb 11:1-2) (2) we are created in the image of God and are fundamentally relational beings (Gen 1:26; 2:18) (3) we are sinners saved by grace through the finished work of Christ on the cross (Rom 5:6-10) (4) we are now a new creature ‘in Christ’ (2 Cor 5:17) (5) being fundamentally relational, our ultimate end or purpose in life as relational beings in Christ is loving neighbor and God, glorifying him forever ‘so that God may be all in all’ (1 Cor 10:31; 15:28) (6) this is only accomplished by being transformed into the image of Christ by means of the indwelling Holy Spirit who, in union with our spirit, desires to fill us with the fullness of his presence (Eph 3:17-19; 5:18) so that all of our life is for the sake of his glory.” See John H. Coe and Todd W. Hall, *Psychology in the Spirit: Contours of a Transformational Psychology* (Downers Grove, IL: IVP Academic, 2010), 80-81.

factual sequences of God's story, the dramatic paradigm emphasizes actions: God's speech and acts from the beginning to the end of the story and humanity's active participation in it as reflective practitioners in respond to God's Scripture.¹⁰¹ This paradigm is more suitable than the redemptive-historical one, inasmuch as faith is not primarily about informational knowledge of who God is and what he has done, but about a truthful living in God, including one's head, heart, and hands. In this drama, God, as the author, has actively directed the course of the universe according to his plan: he created the world with his speech, sustained it by communicating to his people in their language, and redeemed it through Christ's work, but he has yet to bring all things to consummation in the new heavens and new earth. Every human being lives within this theodrama, and to know God is to participate in that drama.¹⁰² The concept of theodrama macroscopically includes God's expansive narratives of redemption from the birth of the universe to its end, but it also refers to the gospel framework of one's personal narrative of redemption.¹⁰³ Thus, experiences in one's personal history are understood not only from an earthly perspective, but also interpreted spiritually by taking into account the personal and grand redemptive drama directed by God. All human personal dramas ultimately find their fulfillment in the theodrama.¹⁰⁴ If this is the case, one's personal experience of trauma should also be understood within the theodrama. The present study will search for existential and transcendent meanings of trauma using this framework.

¹⁰¹Kevin J. Vanhoozer, "Forming the Performers: How Christians Can Use Canon Sense to Bring Us to Our (Theodramatic) Senses," *Edification: The Transdisciplinary Journal of Christian Psychology* 4, no. 1 (May 2010): 5–16. The term theodrama comes from Greek, *theo* (God) and *drao* (to do), and Vanhoozer stresses, "Speaking is one of God's might acts." See Vanhoozer, *The Drama of Doctrine*, 46.

¹⁰²Vanhoozer, *The Drama of Doctrine*, 79.

¹⁰³Robert W. Kellemen, "Theo-Drama and Gospel-Centered Counseling: God's Redemptive Drama and Our Ultimate Life Questions" (Paper presented at The Annual Meeting of the Evangelical Theological Society, 2014), 2–3.

¹⁰⁴Vanhoozer, *The Drama of Doctrine*, 49.

Third, this dissertation understands Christiformity as the central process of Christian maturation and soul care. If human life is a theodrama, the ultimate healing and wellbeing of humanity does not merely come from the application of psychological techniques; rather it results from conformity to Christ. God wants his people to be perfect as he himself is perfect (Matt 5:48) and for them to grow up to be mature in every way into Christ (Eph 4:13-15). We are being transformed in the Christlike humanity, beholding as in a mirror the glory of Christ (2 Cor 3:18). Christiformity is, thus, the God-given way of redemption, restoration, and human flourishing within God's story. Johnson provides some principles of Christiformity: internalizing the word of God, since Christ is the incarnated word (John 1:14-18), freely engaging in self-regulation, willingly obeying to do God's will, and thus manifesting God's glory in every aspect of life including cognition, emotion, behavior, relationships, spirituality, familial and social systems.¹⁰⁵ However, Christiformity is a gift of God, by which one can be fully known, accepted, healed, transformed, redeemed and growing toward maturity as God's beloved child. At the same time it is a developmental process of God's child freely seeking, growing into, and manifesting God's glory. In the theodrama, this process is the gradual change of living more and more according to God's script in any given situation, and each practice of Christiformity is the intersection of God's eternal story and one's personal story. Built on the agenda of Christiformity, this study will consider practical possibilities for trauma healing through theodrama. This consideration will include not only growth in the psychological, relational, and spiritual, but also the communal and social embodiment of the body of Christ.

Chapter 1 introduces the topic of this dissertation. The chapter presents the necessity of a distinctly Christian study of trauma and offers the thesis that a theodramatic understanding of trauma and related practices help traumatized people

¹⁰⁵Johnson, *Foundations for Soul Care*, 567-606.

reframe trauma within God's drama of redemption and thereby enable them to embrace it in the process of Christiformity, which is the God-given way of human healing and flourishing. This section will describe the methodology to be followed.

Chapter 2 explores contemporary trauma theories from the perspective of Christian psychology. The modern psychological understandings of trauma can be recapitulated in three approaches: the neurobiological, psychosocial, and socio-cultural approaches.

Chapter 3 provides a Christian framework to engage in trauma matters. The chapter first reviews each approach's values and limitations from a Christian perspective. Second, it introduces Christian perspectivalism as a way of embracing diverse approaches within the authority of God's revelation. From there, it sets forth a Christian perspectival psychopathology of trauma, which includes biopsychosocial disorder, sin, and suffering.

Chapter 4 reframes the reality of trauma in light of the theodrama. The chapter explores the features of God's redemptive drama, theodrama, as the fundamental context of human history. It continues on from there to discuss theodramatic meanings of trauma. This section includes a consideration of the cross, which was a radical trauma event and at the same time an amazing gift of the grace of God within the theodramatic framework. Then, the chapter shows that Christiformity is the way of embracing trauma within the theodrama. It examines the developmental aspects of becoming Christlike. Personal, communal, and sociocultural facets of Christiformity are discussed. Finally, the chapter provides foundational principles of developing Christlikeness from trauma.

Chapter 5 concludes the dissertation by outlining a theodrama therapy for trauma healing and by presenting its theological implications. The chapter proposes specific practices of theodrama therapy that help participants reenact the trauma event in a new stage of life within a new community of Christ, and thus facilitate them to experience and perform a new way of life, coming to terms with their trauma in Christ.

This soul-care method is a practice of “pastoral theodicy” and a way of manifesting God’s glory even in the context of trauma.

Delimitation

This dissertation does not engage in empirical research. Trauma experiences are very personal, sensitive, and painful. Related research is very sensitive and can be ethically inappropriate if a research participant is re-traumatized. In addition, the process of healing trauma takes a long time. It sometimes takes one’s entire life. It is thus not realistic to gather a sufficient sample of the Christian population who were traumatized and recovered through the intervention that this dissertation is introducing during my doctoral study. Instead of producing empirical research, this study aims to review previous trauma research from a Christian perspective and to propose a new way of trauma healing. One hopes that this study can provide a foundation for future empirical research.

This dissertation does not explore all trauma events. Non-human involved trauma events, such as natural disasters or accidents, usually have different inner dynamics from human-involved traumas. This inquiry mainly focuses on relational traumas—abuse, violence, or sociocultural oppression—in which human distorted and sinful activities are involved.

This dissertation also does not review all trauma theories. Instead, the theoretical reviews of trauma focus particularly on pathological approaches to trauma, though many other theories are referenced. Today, a growing number of scholars engage in trauma study from diverse perspective, such as narrative therapy and positive psychology. Such approaches are also helpful in developing trauma interventions, but they promote recovery by using a new narrative or positive features of humanity, rather than focus on understanding the dynamics of trauma itself. Since a purpose of this work, particularly in chapter 2, is to understand the pathological impacts of trauma and to

provide a Christian psychopathology of it, this study is limited to neurobiological, psychosocial, and sociocultural perspectives.

CHAPTER 2

ANATOMY OF TRAUMA: MODERN PSYCHOLOGICAL PERSPECTIVES

Chapter 2 will explore contemporary trauma theories. As previously mentioned, the understanding of trauma has been developed from diverse angles. The variety of contemporary views in modern psychology¹ can be largely categorized in three approaches: neurobiological, psychosocial, and sociocultural approaches. Each one emphasizes different aspects and contributes a valid approach that together gives a comprehensive understanding of the effects of trauma, though it needs a discernment process from a Christian standpoint.² This chapter will briefly review how trauma has been understood in each approach.

Neurobiological Perspective

The development of contemporary neuroscience has allowed scientists to understand the human brain and internal systems better than ever. The neurobiological approach explains the symptoms of trauma based on the structural functions of the human body, particularly the nervous system and the endocrine system. The nervous system consists of the central nervous system, including the brain and the spinal cord, and the peripheral nervous system, comprised by nerves and ganglia outside the spinal cord. The endocrine system is made up of many endocrine glands in different areas of the body that

¹Modern psychology is a natural scientific study of all aspects of human experiences, as mentioned previously. Thus, discussions in this discipline can embrace diverse disciplines of contemporary human science, including biology, neuroscience, and sociology. See Eric L Johnson, ed., *Psychology & Christianity: Five Views* (Downers Grove, IL: IVP Academic, 2010), 9–26.

²Each perspective alone is insufficient to provide the holistic picture needed from a Christian standpoint. I will provide Christian reflections of each view and a Christian alternative approach in the next chapter.

produce hormones as chemical messages that regulate vital metabolic activities.³ These two systems cooperate closely to monitor and control the bodily functions, so that they are often considered one “neuroendocrine system.”⁴ At the center of this system lies the brain.

Dynamics of the Neuroendocrine System

Neuroscientists have discovered that the human brain is functionally localized. Although the complexity of human thought and behavior requires interactions between many different areas of the brain, it is the case that specific areas of the brain serve specific functions.⁵ The human brain is largely divided into three different functional parts: the brain stem and cerebellum, the limbic system, and the neo-cortex.⁶ The brain stem and cerebellum is a basic, life-sustaining system controlling the body’s vital functions such as breathing, eating, urinating, sleeping, regulating heart rate, and sensing body temperature, hunger and pain. The brain stem coordinates with the hypothalamus to maintain internal homeostasis by controlling the functioning of the heart, lungs, and the endocrine and immune systems.⁷ The limbic system, which consists of the thalamus, amygdala, and hippocampus, is known as the emotional center, and monitors stimuli for potential danger for survival purposes.⁸ When sensory input, such as smell, sight, sound,

³For further details about these two systems, see Laurence Heller and Aline Lapierre, *Healing Developmental Trauma: How Early Trauma Affects Self-Regulation, Self-Image, and the Capacity for Relationship* (Berkeley, CA: North Atlantic Books, 2012), 93-114.

⁴Ibid., 107.

⁵R. Joseph, *Neuroscience, Neuropsychology, Neuropsychiatry, Brain & Mind: Introduction, Primer, & Overview* (Chicago: University Press Science Publishers, 2011), 10.

⁶Though the functional structures of the brain are very complex and segmented, this dissertation deals briefly with the triune brain only as much as is needed for the arguments of this research. For further information regarding the triune brain, see Bessel Van der Kolk, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (New York: Viking, 2014), 55-60.

⁷Ibid., 56.

⁸Ibid., 56-57. The Latin origin of the term “limbic” is “ring.” See also Heller and Lapierre, *Healing Developmental Trauma*, 99.

and touch, converge on the thalamus, it passes the message to the amygdala, which identifies their emotional significance with reference to potential danger. At this point, the hippocampus engages in the interpretation of the incoming information, with reference to past experiences.⁹ When the amygdala-hippocampus system detects a threat, it triggers the hypothalamus and the brain stem to secrete stress hormones and to activate the autonomic nervous system, increasing heartbeat, blood pressure, rate of breathing, freeze, the fight-or-flight impulse, or searching for the social helps.¹⁰ For this reason, the brain stem/cerebellum and limbic system are often referred to altogether as the “emotional brain.”¹¹ The third part of the brain is the neocortex. This is the rational part of the brain that enables logical, abstract thinking, speaking, communicating with others, integrating various information, making plans and decisions, and imagining the future. The neocortex has been divided into frontal, temporal, parietal, and occipital lobes, and each one has different regions dedicated to specific kinds of functioning.¹²

All three parts of the brain are present early in human development, but they develop at different times.¹³ The brain stem/cerebellum develops first in the womb and engages in the basic task of sustaining life. The limbic system is mostly organized during the first six years, though it is continuously influenced by later experiences, such as a close friendship, a first lover, or a violent assault. The neocortex develops last, a process that continues throughout life.

⁹Joseph E. LeDoux, “Emotion Circuits in the Brain,” *Annual Review of Neuroscience* 23, no. 1 (July 2000): 155–84.

¹⁰Van der Kolk, *The Body Keeps the Score*, 60–61; 82; See also Peter A. Levine, *In an Unspoken Voice: How the Body Releases Trauma and Restores Goodness* (Berkeley, CA: North Atlantic Books, 2012), 99–100.

¹¹Van der Kolk, *The Body Keeps the Score*, 57. The distinction between “emotional” and “rational brain” is first introduced by David Servan-Schreiber, *The Instinct to Heal: Curing Depression, Anxiety and Stress without Drugs and without Talk Therapy* (New York: Rodale Books, 2005), 13-32.

¹²For the detail functions of each part, see R. Joseph, *Neuroscience. Neuropsychology, Neuropsychiatry, Brain & Mind*.

¹³Van der Kolk, *The Body Keeps the Score*, 55–58.

Because of this developmental order, the emotional brain begins to influence information processing, before interacting with the rational brain: it reacts physiologically to dangerous stimuli first, sending messages to release hormones and choose a preprogramed defense reaction of freeze, fight or flight, without any conscious thought.¹⁴ Such extremely fast reactions are the outcome of automatic and unconscious “bottom-up” processes involving sensory inputs to the emotional brain, which is also known as “the low road.”¹⁵ These inputs then pass into the rational brain, particularly the medial prefrontal cortex, via “the high road,” comprised of the amygdala, hippocampus, anterior cingulate, and sensory cortex. At this point, the rational brain engages in “top-down” processes that integrate the information received, interpret its in-depth meaning, detect conflicts and misconceptions, compare diverse possibilities, make a plan predicting the consequences, and modulate reasonably appropriate responses to the stimuli.¹⁶ By balancing the interaction of the bottom-up and top-down processes, the brain is able to produce a proper response to a given situation.

Trauma and Hyperarousal

Trauma, however, brings about significant changes to a survivor’s brain structure and neurological functioning. Neuropsychological research has discovered that traumatized people are marked by hyperarousal, resulting from hyperactivation of the amygdala and deactivation of the medial prefrontal region.¹⁷ The hyperactivated

¹⁴Van der Kolk, *The Body Keeps the Score*, 57; Levine, *In an Unspoken Voice*, 99-100.

¹⁵Joseph E. LeDoux and Elizabeth A. Phelps, “Emotional Networks in the Brain,” in *Handbook of Emotions*, ed. Michael Lewis, Jeannette M. Haviland-Jones, and Lisa Feldman Barrett (New York: Guilford Press, 2010), 163; Van der Kolk, *The Body Keeps the Score*, 63; Michael H. Stone, *The Anatomy of Evil* (Amherst, NY: Prometheus Books, 2009), 291–92.

¹⁶Stone, *The Anatomy of Evil*, 292.

¹⁷Katie A. McLaughlin et al., “Amygdala Response to Negative Stimuli Predicts PTSD Symptom Onset Following a Terrorist Attack,” *Depression & Anxiety* (1091-4269) 31, no. 10 (October 2014): 834–42; Kate B. Nooner et al., “Relationship of Trauma Symptoms to Amygdala-Based Functional Brain Changes in Adolescents,” *Journal of Traumatic Stress* 26, no. 6 (December 2013): 784–87; Fatima Ahmed et al., “Relationship between Neurocognition and Regional Brain Volumes in Traumatized Adolescents with and without Posttraumatic Stress Disorder,” *Neuropsychobiology* 66, no. 3 (September

amygdala of a trauma survivor sends uncontrolled danger signals to the emotional brain and the endocrine system, and thereby breaks down the balance of stress hormone levels. These danger signals trigger the secretion of adrenaline and norepinephrine, which raise the level of fear and anxiety, making the traumatized person feel agitated and hyperaroused, along with somatic symptoms, such as high blood pressure, tension in the muscles, rapid breathing and heart rate, gastrointestinal dysfunction, and tremors.¹⁸ Adrenaline and norepinephrine are counterbalanced by cortisol released from the hypothalamic-pituitary-adrenal (HPA) axis. A high level of cortisol is beneficial in a short term for keeping the balance and preparing the human body to resist radical stresses, but constant secretion of this hormone can cause gastric ulcers, bone thinning, and malfunction of the brain.¹⁹

Research has shown, however, that patients with chronic trauma display significantly decreased levels of cortisol, in contrast to the high levels of norepinephrine, and thus, cannot relax, suffer from hyperarousal and are prone to defensive reactions, sleep impairments, and flashbacks.²⁰ Until the trauma is sufficiently treated, the continuous flood of stress hormones keep circulating, and the unrestrained emotional reactions and physiological defensive responses keep getting replayed. Moreover, the constant activation of the amygdala leads to hypertrophy of this part of the brain, as well

2012): 174–84.

¹⁸Heller and Lapierre, *Healing Developmental Trauma*, 107–8; John R. Tomko, “Neurobiological Effects of Trauma and Psychopharmacology,” in *Trauma Counseling: Theories and Interventions*, ed. Lisa L. Levers (New York: Springer Publishing Company, 2012), 61.

¹⁹Sally S. Dickerson and Margaret E. Kemeny, “Acute Stressors and Cortisol Responses: A Theoretical Integration and Synthesis of Laboratory Research,” *Psychological Bulletin* 130, no. 3 (May 2004): 355–91.

²⁰Jean A King et al., “Early Sexual Abuse and Low Cortisol,” *PCN Psychiatry and Clinical Neurosciences* 55, no. 1 (2001): 71–74; Rachel Yehuda, Alexander C. McFarlane, and Arieh Y. Shalev, “Predicting the Development of Posttraumatic Stress Disorder from the Acute Response to a Traumatic Event,” *Biological Psychiatry* 44, no. 12 (1998): 1305–13; Rsvhr Yehuda, “Biology of Posttraumatic Stress Disorder,” *The Journal of Clinical Psychiatry* 61 (2000): 14–21.

as the development of new neuron branches related to the stress response.²¹ The nervous system thus becomes too sensitive at detecting danger clues, thereby increasing the risk of misinterpreting everything as fearful and unsafe. Such “faulty neuroception” even in a normal, safe situation can lead to aggressive outbursts or panic in response to innocuous interactions with others.²²

Even though the amygdala fires a false alarm, if the rational brain functions normally to regulate one’s emotions from the “top-down,” then the level of arousal could decrease and one’s reactions could be channeled in a rational and proper way. In trauma, however, the functioning of the rational brain is often impaired. Neuropsychological research indicates that those who are diagnosed with PTSD exhibit significant deactivation of the medial prefrontal cortex (MPFC), which is a conglomerate structure of the orbito-prefrontal cortex, the inferior and dorsal medial prefrontal cortex, and the anterior cingulate.²³ The primary role of the MPFC is to monitor the internal state of the organism and to choose an appropriate, conscious response. When this area of the brain fails to work properly, the top-down regulation of emotions and behaviors is collapsed, and consequently, the arousal from the amygdala dominates the individual’s response. For example, she/he may easily startle at a loud sound, become infuriated by a small frustration or stiffen when somebody touches her/him.²⁴ In short, trauma breaks down the

²¹Priscilla Dass-Brailsford, *A Practical Approach to Trauma: Empowering Interventions* (Thousand Oaks: Sage Publications, 2007), 32.

²²The term “neuroception,” introduced by Stephen Porges describes the subconscious neural capacity to distinguish whether inputs are safe or dangerous. The “faulty neuroception” then means a false alarm of danger even in a safe situation with a safe person. See Stephen W. Porges, “Neuroception: A Subconscious System for Detecting Threats and Safety,” *Zero to Three (J)* 24, no. 5 (May 2004): 19–24.

²³A.L. Gold et al., “Decreased Regional Cerebral Blood Flow in Medial Prefrontal Cortex During Trauma-Unrelated Stressful Imagery in Vietnam Veterans with Post-Traumatic Stress Disorder,” *Psychological Medicine* 41, no. 12 (2011): 2563–72; M. Koenigs and J. Grafman, “Posttraumatic Stress Disorder: The Role of Medial Prefrontal Cortex and Amygdala,” *The Neuroscientist*, 2009; Lisa M. Shin, Scott L. Rauch, and Roger K. Pitman, “Amygdala, Medial Prefrontal Cortex, and Hippocampal Function in PTSD,” *Annals of the New York Academy of Sciences* 1071, no. 1 (2006): 67–79; L. M. Williams et al., “Trauma Modulates Amygdala and Medial Prefrontal Responses to Consciously Attended Fear,” *NeuroImage* 29, no. 2 (2006): 347–57.

²⁴Bessel A. Van der Kolk, “Clinical Implications of Neuroscience Research in PTSD,” *Annals of the New York Academy of Sciences* 1071, no. 1 (2006): 277–93; Van der Kolk, *The Body Keeps the*

balanced functions of the emotional and rational parts of the brain, causing those who have experienced trauma to be hypervigilant about possible danger and radically react to signals, even though they are often false alarms. Consequently, this makes them incapable of properly adjusting to ordinary life and relationships.

Trauma and Dissociation

Dissociation is usually a significant marker of trauma. Many untreated traumatized people who suffer from re-experiencing trauma in the form of flashbacks, tend to become numb as a result.²⁵ Research has found that dissociation is most common in childhood sexual abuse, though it also often results from other traumatic experiences, such as natural disasters, accidents, and wars.²⁶ Regarding this matter, Williams completed a remarkable study.²⁷ In the early 1970s, she interviewed 206 girls, ages 10-12, who had been hospitalized because of sexual abuse, and seventeen years later she conducted follow-up interviews with 129 women. More than one third, 38 percent, failed to recall the abuse that was documented in their medical records, and 12 percent even reported that they had never been sexually abused in childhood. Her findings demonstrate that the memory of traumatic experience can be banished from consciousness. The neurobiological approach explains such dissociative symptoms as the impairment of normal brain functioning.

In a trauma experience, dissociation mainly occurs in three directions: detaching from the traumatic memory (amnesia), from the self (depersonalization) or

Score, 62–63.

²⁵Van der Kolk, *The Body Keeps the Score*, 72.

²⁶Bessel A. Van der Kolk and R. Fisler, “Dissociation and the Fragmentary Nature of Traumatic Memories: Overview and Exploratory Study,” *Journal of Traumatic Stress* 8, no. 4 (1995): 505–25; Elizabeth F. Loftus, “Memories of Childhood Sexual Abuse: Remembering and Repressing,” *Psychology of Women Quarterly* 18, no. 1 (1994): 67–84.

²⁷Linda Meyer Williams, “Recall of Childhood Trauma: A Prospective Study of Women’s Memories of Child Sexual Abuse,” *Journal of Consulting and Clinical Psychology* 62, no. 6 (1994): 1167–76.

others (desocialization), and from perceptual functioning (derealization).

Amnesia, as seen in Williams's study, refers to a loss of a specific and significant memory. Some research suggests that exposure to trauma can lead to the death of neurons and the atrophy of hippocampal volume, which inhibits proper encoding and retrieval of memory, intertwined with other factors including divided attention, amygdala dysfunction, and increased stress hormones.²⁸ Others add that damage of the thalamus is also associated with memory loss and brings about the fragmentation of memory. With the help of brain scanning tests, researchers have discovered a significant deactivation of the thalamus of trauma survivors.²⁹ The thalamus in a normal state integrates sensory inputs from the ears, eyes, nose, and skin and passes them onto the amygdala, in order to judge their significance, and the hippocampus, in order to be informed by past memories. However, the compromised functioning of the thalamus in a traumatic situation results in a failure to integrate the sensations, and therefore incoming images, sounds, or physical feelings, accompanied with intense emotions that are incoherently encoded as isolated, dissociated fragments.³⁰

The fMRI studies also indicate that PTSD patients with some level of dissociation show significant deactivation of the left hemisphere, including Broca's area.³¹ Since the left brain is linguistic, sequential, and analytical, deactivation of this

²⁸M. B. Stein et al., "Hippocampal Volume in Women Victimized by Childhood Sexual Abuse," *Psychological Medicine* 27, no. 4 (1997): 951–59; Shin, Rauch, and Pitman, "Amygdala, Medial Prefrontal Cortex, and Hippocampal Function in PTSD"; R. Joseph, "Traumatic Amnesia, Repression, and Hippocampus Injury Due to Emotional Stress, Corticosteroids and Enkephalins," *Child Psychiatry and Human Development* 29, no. 2 (1998): 169–85; S. H. Woodward et al., "Hippocampal Volume, PTSD, and Alcoholism in Combat Veterans," *The American Journal of Psychiatry* 163, no. 4 (2006): 674–81; Daniel J. Siegel, *The Developing Mind: Toward a Neurobiology of Interpersonal Experience* (New York: Guilford Press, 1999), 47-48; A. Desmedt, A. Marighetto, and Pier-Vincenzo Piazza, "Abnormal Fear Memory as a Model for Posttraumatic Stress Disorder," *Biological Psychiatry* 78, no. 5 (2015): 290–97.

²⁹Van der Kolk, *The Body Keeps the Score*, 70–71.

³⁰H.S. Duggal, "New-Onset PTSD After Thalamic Infarct," *The American Journal of Psychiatry* 159, no. 12 (2002): 2113–14; Nicola M. J. Edelstyn et al., "Impairment in Material-Specific Long-Term Memory Following Unilateral Mediodorsal Thalamic Damage and Presumed Partial Disconnection of the Mammillo-Thalamic Tract," *Journal of Neuropsychology* 6, no. 1 (2012): 119–40.

³¹Allan N. Schore, "Right-Brain Affect Regulation: An Essential Mechanism of Development, Trauma, Dissociation, and Psychotherapy," in *The Healing Power of Emotion: Affective Neuroscience*,

hemisphere directly impacts a person's capacity to organize experiential memories into logical sequences and to translate sensory perceptions into words.³² When the right hemisphere of the brain, which is intuitive, emotional, and sensual, works alone, without interaction with the left, it is rarely possible for a patient to recall explicitly what was going on, even though they may implicitly feel something. However, some sensory memories are so vivid that they prompt unconscious physical reactions, even while memory of the event is completely blocked out. These neurobiological malfunctions partly explain why traumatized people tend to store difficult memories as disorganized snapshots as opposed to sequential narratives.

Depersonalization is a sense of detachment from the self. One survivor of childhood sexual abuse, for example, learned to make herself disappear by splitting herself into two parts and imagining herself floating up to the ceiling and looking down on a little girl in the bed when her father started to touch her.³³ She actually thought and felt that the molested girl was not really her but another person. Neuropsychology explains such cases of self-dissociation as a dysfunction of self-processing. Neuroscientists have discovered that depersonalized patients show a malfunction of the temporal parietal junction (TPJ), which is a crucial structure for integrating multi-sensory inputs to create a representation of the self and its visuospatial locations.³⁴ When the TPJ fails to integrate diverse inputs that come from strongly discrepant sensory sources, the

Development, and Clinical Practice (New York: W. W. Norton & Company, 2009), 112–44; Ruth A. Lanius et al., “Functional Connectivity of Dissociative Responses in Posttraumatic Stress Disorder: A Functional Magnetic Resonance Imaging Investigation,” *Biological Psychiatry Biological Psychiatry* 57, no. 8 (2005): 873–84; Van der Kolk, *The Body Keeps the Score*, 43.

³²Van der Kolk, *The Body Keeps the Score*, 45.

³³*Ibid.*, 132.

³⁴Shahar Arzy et al., “Neural Basis of Embodiment: Distinct Contributions of Temporoparietal Junction and Extrastriate Body Area,” *The Journal of Neuroscience: The Official Journal of the Society for Neuroscience* 26, no. 31 (August 2, 2006): 8074–81; A. A. T. Simone Reinders et al., “Psychobiological Characteristics of Dissociative Identity Disorder: A Symptom Provocation Study,” *Biological Psychiatry* 60, no. 7 (October 1, 2006): 730–40.

brain creates two split representations of the self, thereby giving the sense that one's self is located outside of one's physical body.³⁵ According to other research, such self-dissociative phenomena are also caused by the damage of the default state network (DSN), the midline structure of the brain promoting the sense of self-awareness or self-identity.³⁶ Ven der Kolk has found that these self-sensing areas are significantly deactivated for trauma survivors, thereby dissociating them from themselves, even to the point that some of them cannot even recognize themselves in a mirror.³⁷

Desocialization refers to a detachment from others in order to avoid another painful experience. An explanation of this phenomenon comes from Stephen Porges's polyvagal theory. Porges explains that the autonomic nervous system responds in three different ways according to the level of threat: social engagement, mobilization, and immobilization.³⁸ When a person feels threatened, the ventral vagal complex (VVC) is activated and calls for social engagement by automatically sending others danger signals, such as a fearful facial expressions or an intense tone of voice.³⁹ However, if social engagement is not possible, the level of threat increases, and then the sympathetic nervous system (SNS) takes over, mobilizing reactions for flight or fight. If the mobilizing reactions also fail to reduce the threatened arousal level, then the dorsal vagal complex (DVC) works to drastically reduce metabolic activities and finally makes the

³⁵Olaf Blanke and Shahar Arzy, "The Out-of-Body Experience: Disturbed Self-Processing at the Temporo-Parietal Junction," *The Neuroscientist* 11, no. 1 (February 1, 2005): 16–24; Olaf Blanke et al., "Linking Out-of-Body Experience and Self Processing to Mental Own-Body Imagery at the Temporoparietal Junction," *The Journal of Neuroscience* 25, no. 3 (January 19, 2005): 550–57.

³⁶Located in the region from right above the eyes all the way to the back of the brain, the DSN consists of the orbital prefrontal cortex, the medial prefrontal cortex, the anterior cingulate, the posterior cingulate, and the insula. Since these areas work together to create the sense of the self, Ven der Kolk calls this region "the Mohawk of self-awareness." See Ven der Kolk, *The Body Keeps the Score*, 90-91.

³⁷*Ibid.*, 92.

³⁸Porges, "Neuroception," 19-24.

³⁹The VVC is the center of managing one's social interactions, such as eye contact, facial expression, tone of voice, and the ability to listen and laugh. Heller and Lapierre, *Healing Developmental Trauma*, 100–101.

person freeze. Research shows that the immobilization strategy of the DVC is often dominant for trauma survivors.⁴⁰ In this case, the VVC does not actively function and thereby the capacity of social engagement is collapsed. As a result, traumatized people may prefer to be alone and withdraw over social interaction as a way of managing arousal.

The discovery of the mirror neuron system provides another explanation. This system is a social network of the brain that vicariously mirrors other's behaviors, emotions, and intentions. Giacomo Rizzolatti first discovered that mirror neurons activate the exact same areas of the brain involved when a person performs an action as when a person watches another's action.⁴¹ More recent research has found out that such neurons—which form a system of multiple neurons that interact in the premotor cortex, the inferior parietal lobe, and anterior insula, play a crucial role not only in the imitation of another person's actions, but also with complex emotions and intentions.⁴² Since the mirror mechanism helps a person understand the hearts and minds of others and thus promotes empathy and proper relational attunement, researchers agree that this is a key neurobiological factor of social interaction.⁴³ The experiences of trauma significantly impact the functions of the prefrontal cortex and parietal lobe, particularly in the left brain, and thus inhibit the proper activation of the mirror neuron system.⁴⁴ As a result,

⁴⁰Heller and Lapierre, *Healing Developmental Trauma*, 101.

⁴¹Giacomo Rizzolatti, "Premotor Cortex and the Recognition of Motor Actions," *Cognitive Brain Research Cognitive Brain Research* 3, no. 2 (1996): 131–41.

⁴²Giacomo Rizzolatti and L. Craighero, "The Mirror-Neuron System," *Annual Review of Neuroscience* 27 (2004): 169–92; Marco Iacoboni et al., "Grasping the Intentions of Others with One's Own Mirror Neuron System," *Public Library of Science Biology* 3, no. 3 (2005): e79. L. Alba-Ferrara. et al., "The Neural Correlates of Emotional Prosody Comprehension: Disentangling Simple from Complex Emotion," *Public Library of Science One* 6, no. 12 (2011).

⁴³V. Gallese, M. N. Eagle, and P. Migone, "Intentional Attunement: Mirror Neurons and the Neural Underpinnings of Interpersonal Relations," *Journal of the American Psychoanalytic Association* 55, no. 1 (2007): 131–76; A. D. Baird, I. E. Scheffer, and S. J. Wilson, "Mirror Neuron System Involvement in Empathy: A Critical Look at the Evidence," *Social Neuroscience* 6, no. 4 (2011): 327–35.

⁴⁴Ani Buk, "The Mirror Neuron System and Embodied Simulation: Clinical Implications for Art Therapists Working with Trauma Survivors," *The Arts in Psychotherapy* 36, no. 2 (April 2009): 61–74; Gabriela Nietlisbach and Andreas Maercker, "Social Cognition and Interpersonal Impairments in Trauma Survivors with PTSD," *Journal of Aggression, Maltreatment & Trauma* 18, no. 4 (May 21, 2009): 382–402.

trauma survivors cannot rightly interpret the emotions and intentions of others, and thus fail to interact appropriately with them. Consequently, it is often more comfortable for a person suffering in this way to be alone. Such dissociative mechanisms come to function automatically, and thus become a lifestyle, resulting in the continuous minimization of social interactions with others.⁴⁵

Derealization is a radical breakdown of the brain's perceptual capacity, when there is no other way to avoid trauma. Trauma survivors exhibit different kinds of derealization, from daydreaming, to failure to recognize familiar people or places, to complete numbness and loss of sensory functions.⁴⁶ Ven der Kolk discovered, during fMRI scanning of a trauma survivor who was completely dissociated from her thoughts and senses, that almost every area of her brain was remarkably deactivated following exposure to trauma triggers.⁴⁷ In such cases, it is not surprising that one cannot feel, think, remember, and make sense of what is going on. Scholars also point out that radically dissociated people lose even fear or danger responses, because of the deactivation of the limbic system and the brainstem.⁴⁸ This dissociative strategy is a tragic adaptation of trauma survivors, because it deadens their ability to recognize and process external stimuli that might help them avoid painful experiences in the present and the future.

In short, dissociation, from a neurobiological perspective, is a defensive coping mechanism of the brain that freezes the functions of perceiving, remembering and interacting, in order to bear the unbearable, because the brain system is too overwhelmed to process meaning consciously. The cost, however, is huge. The loss of memory and of a

⁴⁵Heller and Lapierre, *Healing Developmental Trauma*, 147-48.

⁴⁶Heather Daveiuk Gingrich, *Restoring the Shattered Self: A Christian Counselor's Guide to Complex Trauma* (Downers Grove, IL: IVP Academic, 2013), 52.

⁴⁷Van der Kolk, *The Body Keeps the Score*, 71-72.

⁴⁸Dass-Brailsford, *A Practical Approach to Trauma*, 32; Schore, "Right-Brain Affect Regulation," 125-26.

sense of self impact a person's identity. The loss of interaction with others causes feelings of abandonment and being unknown and unloved. The loss of proper perception stifles the "felt sense," which is an embodied, holistic sense of knowing which is deeper than any verbal expression.⁴⁹ In other words, by dissociating from perception, memory, self, and relationships in the effort of protecting oneself from terrifying experiences, one deadens one's sense of being fully alive as well.

Trauma and Collapse of Time

After a traumatic experience, people often suffer from a disorganized sense of time. Trauma survivors are at times trapped in the traumatic event. Particularly in the case of a flashback, a person experiences physiologically the past hurtful event as if it is happening in the present. It seems their sense of time is collapsed. Neurobiology offers several explanations for this phenomenon.

Imaging studies indicate that the dorsolateral prefrontal cortex (DLPFC) deactivates during a person's flashback experience. The DLPFC is the part of the brain that determines the sequential context and meaning of an experience, considering the past memory and future consequences in cooperation with the hippocampus.⁵⁰ When this area is not accessed, accompanied with the hyperactivation of the amygdala (since the amygdala alone has no sense of the time) their bodies react as if the traumatic event were occurring in the here and now. People lose their sense of past, present, and future, and experience only a sense of the present. As a result they may feel that trauma is forever.⁵¹

⁴⁹Eugene T. Gendlin, "Befindlichkeit: Heidegger and the Philosophy of Psychology," *Review of Existential Psychology & Psychiatry* 16, nos. 1-3 (1978): 43-71.

⁵⁰Katherine A. Richert et al., "Regional Differences of the Prefrontal Cortex in Pediatric PTSD: An MRI Study," *Depression and Anxiety* 23, no. 1 (2006): 17-25; A. Bechara et al., "Insensitivity to Future Consequences Following Damage to Human Prefrontal Cortex," *Cognition* 50, nos. 1-3 (June 1994): 7-15; Jean-Baptiste Pochon et al., "The Role of Dorsolateral Prefrontal Cortex in the Preparation of Forthcoming Actions: An fMRI Study," *Cerebral Cortex* 11, no. 3 (March 1, 2001): 260-66.

⁵¹Van der Kolk, *The Body Keeps the Score*, 69-70.

The moment of re-experiencing of trauma is so painful that some traumatized people attempt to avoid it by numbing themselves with other stronger stimulation including drugs, sex, aggressive behaviors, or even self-harm.⁵² They can have a hard time concentrating on daily tasks, and can tend to struggle with a sense of failure and frustration. They, in turn, may become more and more ashamed and depressed, and eventually fail to live actively in the present. In other words, trauma, though it is a past event, intrudes upon a survivor's present and snatches their joy and vigor, and furthermore, dampens their hope for the future.

Psychosocial Perspective

The psychosocial dimension primarily refers to the dynamics of past and present relationships and their impact on psychological functioning. Human beings are ontologically relational and influenced positively or negatively by the quality of their relationships. According to relational theorists, relationship and connection with others is necessary for survival and the development of the self.⁵³ Through relational experiences, either positive or negative, with important figures, people learn how to view themselves and their self-images show up in various contexts of life.⁵⁴ In other words, each human being is not an isolated existence but a “self-in-relationship” deeply involved with one

⁵²Rajita Sinha, “Chronic Stress, Drug Use, and Vulnerability to Addiction,” *Annals of the New York Academy of Sciences* 1141, no. 1 (2008): 105–30; Kevin F. W. Dyer et al., “Anger, Aggression, and Self-Harm in PTSD and Complex PTSD,” *Journal of Clinical Psychology* 65, no. 10 (2009): 1099–114; N. Fredland et al., “Connecting Partner Violence to Poor Functioning for Mothers and Children: Modeling Intergenerational Outcomes,” *Journal of Family Violence* 30, no 5 (2015): 555- 65; T. O’Hare, C. Shen, and M. V. Sherrer, “Lifetime Abuse and Self-Harm in People with Severe Mental Illness: A Structural Equation Model,” *Psychological Trauma : Theory, Research, Practice and Policy* 7, no. 4 (2015): 348–55.

⁵³Patricia A. DeYoung, *Relational Psychotherapy: A Primer* (New York: Routledge, 2003); W. R. D. Fairbairn, “Endopsychic Structure Considered in Terms of Object-Relationships (1944),” in *Psychoanalytic Studies of the Personality* (New York: Routledge, 2013); Donald W. Winnicott, *The Maturation Processes and the Facilitating Environment: Studies in the Theory of Emotional Development* (New York: International Universities Press, 1965); Harry Guntrip, *Personality Structure and Human Interaction: The Developing Synthesis of Psychodynamic Theory* (London: Karnac Books, 1995); Ernest S. Wolf, *Treating the Self: Elements of Clinical Self Psychology* (New York: Guilford Press, 2002).

⁵⁴DeYoung, *Relational Psychotherapy*, 2.

another; the self is always searching for relationships (unless severely traumatized) and is formed through relationships with others.⁵⁵ In this paradigm, trauma is not a mere tragic event but a relational wound that causes persistent developmental damage to a person's sense of self and other. Examining this dimension involves a consideration of how traumatic experiences in relationships, particularly those occurring early life, impact development of one's self and one's relational patterns later in life.

Early Childhood Development of the Self and Trauma

From a psychosocial perspective, the self is a developing psychological structure that develops in relationship to others. An object-relations theorist, W.R.D. Fairbairn says that the human self is by nature hungry for a relationship from which attitudes, behaviors, and functions of the object (the other) become internalized into the self, so that, representations of the object become part of the self.⁵⁶ Another theorist, Donald W. Winnicott describes the self as a “bubble” adapting to outside pressure, including “good enough” care and the impingement of environments, even before birth.⁵⁷ He explains the experience of natural reaction and the subsequent return to a state of not having to react as the only state in which the self can begin to be.⁵⁸ Heinz Kohut, in a similar vein, states that the self is not an abstract concept but a “generalization derived from empirical data,” which is one's experiential representations in relationships.⁵⁹ The words of Jeffrey Means well recapitulate the relational nature of the development of the

⁵⁵DeYoung, *Relational Psychotherapy*, 1. See also James B. Ashbrook, *Minding the Soul: Pastoral Counseling As Remembering* (Minneapolis: Fortress Press, 1995), 3; Michael St. Clair, *Human Relationships and the Experience of God: Object Relations and Religion* (Mahwah, NJ: Paulist Press, 1994), 8.

⁵⁶Fairbairn, “Endopsychic Structure Considered in Terms of Object-Relationships.”

⁵⁷Donald W. Winnicott, “Birth Memories, Birth Trauma, and Anxiety,” in *Through Paediatrics to Psycho-Analysis* (London: Hogarth Press & the Institute of Psychoanalysis, 1975), 182.

⁵⁸*Ibid.*, 183.

⁵⁹Heinz Kohut, *The Restoration of the Self* (Chicago: University Of Chicago Press, 2014), 311.

self: “The embryonic self . . . requires a matrix of relationship within which to develop and mature to its potential. This means that *the structuralization of the human mind grows out of human relationships*. The development of a sense of self is one aspect of this structuralization” (italics in original).⁶⁰ In other words, the self is, in this model, a structured psychological synthesis of what the self experiences in relationships, that emerges through interactions with important others in early childhood and unfolds its character and functions throughout the whole life.⁶¹

Object-relations theories explain the developmental process of the self in relation to “the other.” The external other internalized as a part of one’s self-structure is labeled as the *selfobject*,⁶² and any internal or external experience that activates the selfobject construct and sustains a sense of one’s selfhood is called the *selfobject experience*.⁶³ As the term *selfobject* itself implies, in early childhood, an individual’s sense of the self and the object get fused. At the beginning of its relational experience—while entirely dependent on the mother to fulfill its basic needs and having no awareness of “absolute dependence”—an infant cannot differentiate “me” and “not-me.”⁶⁴ At this point, the mother’s care plays an important role in providing the infant with *selfobject experiences*. In other words, the maternal care of holding, feeding, and mirroring can fulfill the infant’s primary needs, and this sense of fulfillment facilitates the maturation process of the self.⁶⁵ The mother’s care in reality, however, cannot fulfill all of the

⁶⁰Jeffrey Means, *Trauma and Evil: Healing the Wounded Soul* (Minneapolis: Fortress Press, 2000), 52.

⁶¹Of course, scholars define the self differently, but they largely agree with that relationship is a crucial part of being the self.

⁶²The term, *selfobject*, is coined by Kohut. See Heinz Kohut, *The Analysis of the Self: A Systematic Approach to the Psychoanalytic Treatment of Narcissistic Personality Disorders* (Chicago: University of Chicago Press, 2009), 3.

⁶³Wolf, *Treating the Self*, 52.

⁶⁴Donald W. Winnicott, “Parent-Infant Relationship,” in *The Maturation Processes and the Facilitating Environment* (New York: International Universities Press, 1965), 46.

⁶⁵Donald W. Winnicott, “Ego Distortion in Terms of True and False Self,” in *The*

infant's needs and thus, inevitably leads to frustration; the care cannot be perfect, but it can be "good-enough," and this good-enough mothering is sufficient to create a "facilitating environment" for the development of the self.⁶⁶ If the infant's frustration in response to the mother's failure to fulfill all of the infant's needs is within the normal range, rather than traumatic, and if it is managed by the mother's "good enough care," this "optimal failure" actually provides the infant with a balanced, and relatively healthy experience of care with limitations.⁶⁷ Over time the infant begins to realize that the mother, who was originally considered as "one body" with itself, is actually "not-me" and gradually becomes aware that the self is separated from, yet related to, the object.⁶⁸ As a result, the infant slowly becomes less dependent on the mother and begins to function more independently. The infant's self, furthermore, cohesively integrates diverse experiences with selfobjects and develops a social sense without losing the sense of self that allows it to explore its potentials in diverse relationships to others, leaving the infant's self feeling real and alive.⁶⁹

Maturational Processes and the Facilitating Environment, 145–46.

⁶⁶Donald W. Winnicott, "Dependence towards Independence," in *The Maturational Processes and the Facilitating Environment*, 85.

⁶⁷Winnicott, "Parent-Infant Relationship," 84–92.

⁶⁸Winnicott, "Ego Distortion in Terms of True and False Self," 145–46. Kohut provides more specific explanations of this process. According to Kohut, an infant narcissistically experiences itself as magnificent and omnipotent, but gradually develops a realistic self through: *mirroring* and *idealization*. Mirroring occurs when a self-object empathically responds to the infant's needs. Since the selfobject cannot perfectly meet the need, the infant gradually mirrors the reality of its self. Along with this development of realistic mirroring, the infant try to maintain its grandiosity by making an object ideal. Inevitably, the idealized object again fails to fulfill the grandiose expectations, so the infant gradually becomes less dependent on the object, developing a realistic sense of the self. However, Kohut's terms, describing an infant's mind, such as grandiose, narcissism, or omnipotence, are problematic from a Christian perspective. The concept of grandiose self is implicitly related to the sin of self-pride; narcissism is pathological; and the attribute of omnipotence pertains only to God. Since an infant does not fully develop a rational, emotional, and volitional agency to think, feel, and act in order to intentionally sin—though born in sin, this differentiation of the self is for an infant a natural developmental process. In this sense, those psychological terms may not the best way to describe the human early development of the self. Christian psychology thus needs to engage in translation of those terms with Christian alternatives. The next chapter will provide Christian alternatives to understand trauma.

⁶⁹Donald W. Winnicott, "The Child in Health and Crisis," in *The Maturational Processes and the Facilitating Environment*, 66–67; Winnicott, "Ego Distortion in Terms of True and False Self," 148.

In order to facilitate this maturation process of the self experiencing relatively healthy selfobjects is necessary. “The self,” Ernest Wolf says, “cannot exist as a cohesive structure—that is, cannot generate an experience of well-being—apart from the contextual surround of appropriate selfobject experiences.”⁷⁰ The appropriate selfobject experience, according to Wolf, satisfies six selfobject needs: the *mirroring need* to feel affirmed, known, accepted, and appreciated by others; the *idealizing need* to experience oneself as a part of the selfobject that is admired and respected; the *alterego need* to experience oneself in a way like the selfobject; the *adversarial need* to experience the selfobject as an opposite part who assertively confronts oneself while continuing to be supportive; the *merger need* to be totally one with the mirroring and idealizing selfobject; and the *efficacy need* to experience oneself as able to impact the selfobject and evoke the selfobject experiences that one needs.⁷¹ Provided that appropriate selfobject experiences that satisfy these needs are available, the self can internalize and integrate the meaningful aspects of the selfobject and become a cohesive self. However, when those experiences are absent, significantly lacking, or assaulted, the self can become fragmented and thereby suffer from emptiness, inauthenticity, and deadness. Such fragmentation can be so painful that it results, later in life, in extreme methods of coping, including drug abuse, alcohol addiction, compulsive behavior, uncontrolled rage, and even self-harm and violence.⁷²

It is noteworthy that such reactions are prevalent in those who are exposed to a traumatic event in early life, such as child abuse, rape, or neglect.⁷³ Trauma can disrupt the integration process of the self, particularly regarding one’s sense of goodness and

⁷⁰Wolf, *Treating the Self*, 14.

⁷¹*Ibid.*, 55.

⁷²*Ibid.*, 49.

⁷³Means, *Trauma and Evil*, 71–72; Wolf, *Treating the Self*, 43; Gingrich, *Restoring the Shattered Self*, 37.

badness. In early life, the sense of goodness and badness has no moral significance, but is simply a matter of feeling in response to the meeting of its basic needs. If the self is feeling good, then the selfobject is considered good, and in turn the self that is not sufficiently differentiated from the selfobject is also perceived good.⁷⁴ In the normal development of the differentiation of the self and the object, the self engages in a healthy integration of different feelings of goodness and badness, through the course of the day. For instance, a mother who feeds and holds her is experienced as a good object, while the same mother who inflicts pain for the purpose of giving a vaccination is experienced as a bad object. In this stage, if provided good-enough care, the infant can experience a sense of safety and form a secure representation of the caretaker. As a result, the infant eventually develops a sense of being an individual self, even in the midst of bad experiences, trusting the inner sense of security derived from the good-enough caregiver.⁷⁵ Having repeated experiences of agentic action within this secure environment, the infant gradually grows to understand herself and others as capable of producing both positive and negative emotional reactions, and eventually will develop the mental ability to integrate the splits.⁷⁶

If a trauma event, however, occurs during this early integration process, the child may get stuck and be unable to view herself and others in a holistic way that includes both goodness and badness. In child abuse, victims do not experience a sense of safety from parents and therefore are unable to develop independence in regulating their emotional states.⁷⁷ Thus, such children come to be relatively more needy than other children for external sources of affirmation and stability, so they may seek desperately for

⁷⁴Means, *Trauma and Evil*, 58.

⁷⁵Judith L. Herman, *Trauma and Recovery: The Aftermath of Violence—From Domestic Abuse to Political Terror* (New York: Basic Books, 2015), 107.

⁷⁶Means, *Trauma and Evil*, 58–59.

⁷⁷Herman, *Trauma and Recovery*, 107; Gingrich, *Restoring the Shattered Self*, 36.

someone to comfort and love them.⁷⁸ In their clinging to a caregiver, those children often idealize the perpetrator of abuse, causing victims to split the badness of the abusive parent from their idealized image of the parent and burying the bad part in the unconscious part of the brain.⁷⁹ Repeated experiences of abuse, however, constantly remind them of the real existence of the evil and the lack of care, thereby promoting negative feelings, such as rage, guilt, and shame, and threatening the idealized image of the parent. Tragically, in this case, the child internalizes the evil of the abuser and the corresponding negative feelings into the self, in order to maintain the idealized image of the abusive parent.

By making herself bad and the abuser good, according to Herman, the child attempts to preserve a sense of meaning, hope, and power.⁸⁰ In terms of the sense of meaning, a child victim often believes that “I am something wrong” rather than that “there is something wrong with the abuser,” and therefore distortedly rationalizes and minimizes the abuse. This explanation is for children a defensive scheme to protect them from an unbearable situation. In terms of hope, if the parent remains good in her mind, then the child can sustain a sense of hope that the parent may someday stop abusing her and take care of her. In terms of the sense of power, if the child is bad, then she has the power to change the relationship by trying harder to be good for the parent, so that she may someday earn the parent’s love and care. By internalizing a sense of badness, the child distortedly maintains the goodness of the primary selfobject relationship that in turn helps to preserve some of the self, in spite of the distortion.

Heller and LaPierre explain this internalization of badness as a result of impaired differentiation of the self and others in early childhood. They argue that a young

⁷⁸Herman, *Trauma and Recovery*, 107.

⁷⁹*Ibid.*, 106.

⁸⁰*Ibid.*, 101–2.

child cannot separately feel the self and affect of others, so both positive and negative feelings of the early-holding environment are experienced as a sense of the self.⁸¹ If a child has been shamed and blamed in an abusive environment, then the child's identity becomes shameful and bad.⁸² What the self feels becomes the self. DeYoung describes this psychological process as "pathological accommodation," where children match their self-perception to the abuser's view, believing that they are really bad.⁸³ Unfortunately, this sense of inner badness gets hardwired into one's brain and becomes a stable part of his or her personality even into adulthood. It is, thus, typical for those traumatized early in life to suffer from chronic negative self-feelings, including shame, guilt, and a sense of deficiency.⁸⁴

Absorbing badness into the self, a traumatized child can develop two pathological dispositions: self-destruction and identification with a false self. Repetitive self-harm is very common for those victims whose abuse began early in childhood.⁸⁵ The key emotional factor of the destructive tendency is rage. Rage, along with terror and grief, is a normal emotional response to abuse and threat. The child in an abusive home environment, however, cannot express his anger to the abuser, because the abuser is often a primary caregiver from whom the child seeks love and care. He is also afraid of being abused again. Thus, the enraged child turns aggressively on the internalized bad self. The

⁸¹Heller and Lapierre, *Healing Developmental Trauma*, 144.

⁸²Ibid.; Patricia A. DeYoung, *Relational Psychotherapy: A Primer* (New York: Routledge, 2003), 110. The holding environment, a term introduced by Donald W. Winnicott, refers to the concept that a primary caregiver's holding of a child sufficiently fulfills the infant's spontaneous and grandiose needs, and thus, makes the infant feel safe and experience the sense of worthiness. See Jan Abram, *The Language of Winnicott: A Dictionary of Winnicott's Use of Words*, 2nd ed. (London: Karnac Books, 2007), 166–68.

⁸³DeYoung, *Relational Psychotherapy*, 110.

⁸⁴Herman, *Trauma and Recovery*, 103–5; Gingrich, *Restoring the Shattered Self*, 34–35; Heller and Lapierre, *Healing Developmental Trauma*, 139, 144.

⁸⁵Herman, *Trauma and Recovery*, 109; B. A. van der Kolk, J. C. Perry, and J. L. Herman, "Childhood Origins of Self-Destructive Behavior," *The American Journal of Psychiatry* 148, no. 12 (December 1991): 1665–71.

child searches for faults in himself and his own behavior in an effort to make sense of the abuse or neglect, and then blames and punishes the bad self.⁸⁶ In this case, such a child often focuses on and harms a part of the body, distortedly thinking, “If it weren’t for my nose (fatness, shortness, tallness, etc.), then I would not be abused.”⁸⁷ According to Herman, the emotional pain from trauma, such as grief, fear, shame, and abandonment, is so overwhelming that the physical pain is preferred to the emotional pain that it replaces; it even produces a feeling of calm and relief.⁸⁸ Self-harm, paradoxically, is not intended for the traumatized to kill, but rather to preserve the self by relieving the unbearable emotional pain through physical pain.

Self-harm is only one form of self-destructive behavior. Some traumatized children confirm the internalized badness through “bad” activities, frequently engaging in compulsive sexual activity, voluntary exposure to danger, drug abuse, violence, and crime.⁸⁹ The abuser’s evil is incorporated into the victim’s personality structure, and the child victim actualizes the inner badness in their daily life and thus becomes actually bad. Many trauma victims thus often describe themselves as “witches, whores, dogs, rats, or snakes.”⁹⁰ Sadly, their self-destructive behaviors can increase the risk of another traumatic situation.⁹¹ From an object-relations perspective, repeated traumatization can occur when the internalized bad self, who has developed a confused sense of safety and security because of early trauma, engages in a “bad” activity with “bad” people and becomes numb and helpless in another trauma event.

⁸⁶Heller and Lapierre, *Healing Developmental Trauma*, 138–39.

⁸⁷*Ibid.*, 150–51.

⁸⁸Herman, *Trauma and Recovery*, 109.

⁸⁹*Ibid.*, 104; 109.

⁹⁰*Ibid.*, 105.

⁹¹Diana E. H. Russel, *The Secret Trauma: Incest in the Lives of Girls and Women* (New York: Basic Books, 1999), 157–73. See also Herman, *Trauma and Recovery*, 111.

Second, a child who internalizes the badness of an abuser may develop a false self. If the early environment is traumatic, the child's sense of self becomes split, leading to the development of a protective shell for the self, which Winnicott calls the false self. (The juxtaposed term is the true self.) In the case of insufficient mothering, the child is traumatized when the mother repeatedly fails to respond to the child's needs of basic interactions, such as eye contact, smile, or hug.⁹² This is a failure of mirroring in which the child sees himself or herself through the eyes of the mother. Without adequate mirroring from the mother, the child cannot see himself or herself as a valued self whose spontaneous gestures are recognized, responded to, and allowed a place. In this case, the child realizes that his or her spontaneous (i.e., authentic) gestures should be supplanted by the compliant (i.e., inauthentic) gestures that the environment requires in order to "survive." This adaptive self, therefore, accepts environmental demands regardless of the self's real needs, creates false relationships, and pretends that the compliant false self is the child's real being. Clinical case studies show that such adaptations of the false self are typically found in early trauma survivors, who persistently attempt to please others, including the abuser, and often become outstanding performers.⁹³ Behind the defensive shield of the false self, the true self remains "safe," still hoping to find an opportunity to reveal itself without threats.⁹⁴

Though the development of a false self is a successful strategy for defending one's self, there is a high price paid in a persistent feeling of being "unreal." Since the false self protects the true self and compliantly reacts to what the environment requires, the child may grow up to be just like the mother, father, abuser, or whoever at the time

⁹²Winnicott, "Ego Distortion in Terms of True and False Self," 145; Allan N. Schore, *Affect Dysregulation and Disorders of the Self* (New York: W. W. Norton & Company, 2003), 145.

⁹³DeYoung, *Relational Psychotherapy*, 110; Herman, *Trauma and Recovery*, 105.

⁹⁴Means, *Trauma and Evil*, 74.

dominates the situation.⁹⁵ Particularly in the case of a highly intellectual individual, the false self may seem to be academically and socially successful, but be restricted in creativity or spontaneity. Eventually, the successful person tends to feel “phony,” leaving a sense of emptiness and deadness.⁹⁶ This sense of being “unreal” can also lead to aggressive behavior, depression, addiction, and distorted religious practices.⁹⁷

In short, the bottom line of the object-relations approach is that early traumatic experiences interrupt the development of an independent and cohesive self by splitting the self as a result of internalizing the badness of the abuser, leading to self-destructive behaviors and the development of a false self that may persist later in life. Object-relations theory shows how important the dynamic interrelationship of the self and the selfobject is in early childhood for the emergence of healthy personality structure.

However, since object-relations theory mostly focuses on the interactions that occur between the self and the selfobject, its considerations are limited to the internal dynamics of an individual. In the self-object relationship, the other person is nothing more than a psychological representation that fosters the development of the self and its identity. Though the object-relations approach highlights the value of relationship beyond instincts, it is limited by its individualistic and subjective psychoanalytic framework, since it interprets relationship as merely an internal state of an individual, and gives less consideration to the actual embodied and behavioral interaction of caregiver and child. Object-relations theory, therefore, is inadequate as a comprehensive model. In this regard, attachment theory can complement the object relations view.

⁹⁵Winnicott, “Ego Distortion in Terms of True and False Self,” 146.

⁹⁶Ibid., 144; Jan Abram and Knud Hjulmand, *The Language of Winnicott: A Dictionary of Winnicott's Use of Words*, 2nd ed. (London: Karnac Books, 2007), 278.

⁹⁷Paul Welter, *Counseling and the Search for Meaning* (Brooklyn, NY: Word Books, 1987); Kyubo Kim, “False Self, True Self, and Self-Denial: The Contribution of Object-Relations Theory to Christian Self-Denial,” *Journal of Counseling and Gospel* 22, no. 2 (2014): 43–79.

Attachment and Trauma

Attachment theory focuses more on how the actual relationship shapes one's personality and psychopathology. The theory originated in the work of John Bowlby who proposed that a warm, intimate, and stable relationship between a young child and a primary caregiver which both enjoy and find satisfying is required for mental health.⁹⁸ According to this approach human beings have an inborn natural drive to form an emotional bond with their caregivers, and that relationship becomes a platform for later relationships. The infant-caregiver bond serves not only to meet the biological needs of infants but also to function as a secure base from which they can explore the world and to which they can return when facing significant challenges or distress.⁹⁹ In such attachment experiences, the satisfaction or deprivation of physical and emotional needs in a primary relationship gets encoded in implicit memory and incorporated into an "internal working model" that the child develops during the first 3 years of life and serves as an interpretive filter for thinking about and responding to others in relationships.¹⁰⁰ The internal working model determines one's feelings about others, as well as gut-level expectations of relational roles styles, often without conscious awareness.¹⁰¹ If the attachment relationship is secure, the model allows the infant to feel a sense of security and thus the young child develops a healthy relationality, which enables him or her to enjoy

⁹⁸John Bowlby, *Attachment and Loss* (New York: Basic Books, 1982), xxvii.

⁹⁹Lauren E. Maltby and Todd W. Hall, "Trauma, Attachment, and Spirituality: A Case Study," *Journal of Psychology & Theology* 40, no. 4 (2012): 302–12.

¹⁰⁰Bowlby, *Attachment and Loss*, xviii; John Bowlby, *Secure Base: Parent-Child Attachment and Healthy Human Development* (New York: Basic Books, 1990), 120. The internal working model significantly impacts on one's the implicit relational knowledge or emotional schemas in relationships. See Karlen Lyons-Ruth et al., "Implicit Relational Knowing: Its Role in Development and Psychoanalytic Treatment," *Infant Mental Health Journal* 19, no. 3 (September 1, 1998): 282–89; Wilma Bucci, *Psychoanalysis and Cognitive Science: A Multiple Code Theory* (Guilford Press, 1997), 195; Robert L. Leahy, *Emotional Schema Therapy* (New York: The Guilford Press, 2015).

¹⁰¹Maltby and Hall, "Trauma, Attachment, and Spirituality"; Todd W. Hall, "Psychoanalysis, Attachment, and Spirituality Part I: The Emergence of Two Relational Traditions," *Journal of Psychology and Theology* 35, no. 1 (2007): 14–28; Peter Fonagy, "Attachment, the Development of the Self," in *Treatment of Personality Disorders*, ed. C. Maffei, J. Derksen, and H. Groen (New York: Plenum Publishers, 1999), 53–68; Michael Lewis, Candice Feiring, and Saul Rosenthal, "Attachment Over Time," *Child Development* 71, no. 3 (June 2000): 707–20; Gingrich, *Restoring the Shattered Self*, 30–31.

exploration of the world, receive comfort from the attachment figure, and engage in active social interactions. However, if the attachment relationship is problematic, the child is without a secure base and thus the normal development of relationality is hindered.¹⁰² Attachment responses are seen primarily in early childhood, but adults continue to exhibit them throughout the life span, since an inner representation of the attachment figure from childhood is encoded as a “virtual other” in a person’s mind and directly but implicitly shapes the (mis)perception of others, including close friends, mentors, or romantic partners, in light of the wired attachment figure.¹⁰³ In other words, early attachment experience plays a dominant role in the formation of the implicit interpersonal structure of the self and thereby significantly impacts one’s perceptions, emotions, and relational patterns in current and future relationships. Thus, the main concern of attachment theorists is the nature of the relationship a young child has with their primary caregiver.

Attachment theorists have categorized child-parent attachment according to four types: secure, avoidant, ambivalent/resistant, and disorganized/disoriented.¹⁰⁴ Avoidant, ambivalent/resistant, and disorganized/disoriented attachments are generally labeled together as insecure attachments. The secure or insecure attachment history that a child initially develops with his or her primary caregiver is predictive of how successful or destructive the individual is in building close personal relationships in adulthood.

¹⁰²Daniel J. Siegel, *The Developing Mind: Toward a Neurobiology of Interpersonal Experience* (New York: The Guilford Press, 1999), 72.

¹⁰³*Ibid.*, 68; 77. See also K. J. Aitken and C. Trevarthen, “Self-Other Organization in Human Psychological Development,” *Development and Psychopathology* 9, no. 4 (1997): 653–77.

¹⁰⁴Diann Cameron Kelly and Elizabeth Palley, “Severe Sexual Maltreatment & Social Inclusion: A Case Study on Insecure Attachment,” *Journal of Pastoral Counseling* 43 (November 2008): 79–92; Peter Fonagy, “Attachment, the Development of the Self,” in *Treatment of Personality Disorders*, ed. C. Maffei, J. Derksen, and H. Groen (New York: Plenum Press, 1997), 53–68; Terry M. Levy and Michael Orlans, *Attachment, Trauma, and Healing: Understanding and Treating Attachment Disorder in Children and Families* (Washington, DC: Child Welfare League of America Press, 1998); Wendy L. Haight, Jill Doner Kagle, and James E. Black, “Understanding and Supporting Parent-Child Relationships During Foster Care Visits: Attachment Theory and Research,” *Social Work* 48, no. 2 (April 2003): 195–207.

Research has found that securely-attached individuals, in general, are comfortable with closeness, have a higher sense of self-worth and social self-confidence, have a more positive view of others, consider others to be dependable and trustworthy, and feel more in control of outcomes in their lives.¹⁰⁵ These abilities are foundational for successfully building stable and secure relationships. However, individuals with insecure attachment histories report greater anxiety about intimate relationships, lower self-esteem, and a feeling of being less in control resulting from unsatisfied attachment needs from early childhood.¹⁰⁶ Understanding the differences between attachment styles is helpful in exploring the relationship between trauma and attachment.

A securely attached child reflects on the intimate relationship with a primary caregiver as happy, friendly, and trusting. Through a parent's sensitive attunement to the child's (mostly nonverbal) emotional signals, the child can build a sense of security with regard to the attached figure and internalize it so that it contributes to the formation of the self.¹⁰⁷ This internalized sense of security allows the child to develop a capacity for affect co-regulation and later self-regulation.¹⁰⁸ Thus, in the "Strange Situation," the securely attached child can willingly explore the environment and engage in social interaction, seeking proximity with others in the presence of the primary caregiver.¹⁰⁹ Though the child exhibits anxiety or distress when facing strangers in the absence of the caregiver, the securely attached child is easily reassured by the caregiver when he or she returns

¹⁰⁵John E. Kesner and Patrick C. McKenry, "The Role of Childhood Attachment Factors in Predicting Male Violence Toward Female Intimates," *Journal of Family Violence* 13, no. 4 (December 1998): 417–32.

¹⁰⁶*Ibid.*, 418.

¹⁰⁷Seigel, *The Developing Mind*, 70–71.

¹⁰⁸*Ibid.*

¹⁰⁹Mary Ainsworth and colleagues developed the setting of the Strange Situation that measured infants' responses to their mothers' absence and return. Reunion patterns varied according to the attachment history of each child. See Mary D. Salter Ainsworth and Sally Wall, *Patterns of Attachment: A Psychological Study of the Strange Situation* (Hillsdale, NJ: Lawrence Erlbaum, 1978).

from temporary separation. Throughout life, those who internalize a secure attachment working model can develop the ability to see both positive and negative aspects of their past attachment experience and objectively reflect on its influences on the self.¹¹⁰ They are also able to live fully in the present, enjoy emotional connections with others, sufficiently modulate high levels of emotional intensity, and live relatively free from unresolved emotions that would distract them from the past and interfere with current or future relationships.¹¹¹ Secure attachment is foundational for the development of healthy relationships throughout life.

On the other hand, if the parents are emotionally unavailable, imperceptive of the child's needs, and unresponsive to them, the child becomes "avoidant." In this case, the child's internal working model represents others, including attachment figures, as not attuned to the emotional state of the self.¹¹² The child is emotionally isolated from the parents and thus, the child does not seek connection with them. In the Strange Situation, such a child shows minimal interest in experiencing the primary caregiver's return and even ignores the parent's presence, expressing little or no anxiety when the caregiver is absent.¹¹³ Avoidantly-attached individuals have a dominant sense of distance separating others from the self. Though they will continue to have a need for emotional connection with attachment figures, it seems that they are hardly aware of that feeling and thus their behavioral patterns show no outward signs of the need.¹¹⁴ They often engage in dry, logical, analytic ways of thinking and show lack of emotional communication.¹¹⁵ As a

¹¹⁰Seigel, *The Developing Mind*, 90.

¹¹¹Ibid., 91.

¹¹²Ibid., 93.

¹¹³Kelly and Palley, "A Case Study on Insecure Attachment," 82.

¹¹⁴Seigel, *The Developing Mind*, 93–94.

¹¹⁵Ibid.

result, they fail to develop healthy in-depth relationships, leaving their hearts disconnected from others.

When parents are inconsistently available and responsive to the child's needs, the child can develop the ambivalent/resistant attachment style. Such parents are not hostile to the child, but they fail to respond appropriately and consistently to the child's affective communication. For example, a parent may not respond adequately to the child's expressed desires for connection, and may instead intrude upon the child in the midst of contented, independent play, in order to pour out excited hugs and kisses. The parent in such a case significantly fails to attune to the child's natural emotional cycles of needing connection with others and needing to be alone. Therefore, the child remains uncertain that their emotional states will be perceived and their needs satisfied.¹¹⁶ In the Strange Situation, the ambivalently-attached child exhibits distress even before the separation and shows little interest in exploring the room. During the separation, the child seems confused and anxious. Even after reunion, the child is difficult to console, crying, showing relief, and then crying again, and does not return to play, continually focusing on the caregiver with anxiety.¹¹⁷ The emotions and patterns of ambivalent interaction become generalized and come to shape the implicit mental model of relationships throughout life, and therefore, such an individual may unintentionally perceive and respond to other's behaviors in light of their ambivalent attachment history. The person may have a lifelong internal sense of uncertainty in relationship, and thus consistently need comfort from external sources.¹¹⁸

Trauma is especially associated with the disorganized/disoriented attachment style. When the child-parent relationship involves physical, sexual, or emotional abuse,

¹¹⁶Seigel, *The Developing Mind*, 100-101.

¹¹⁷Ibid, 76; Kelly and Palley, "A Case Study on Insecure Attachment," 82.

¹¹⁸Seigel, *The Developing Mind*, 103.

the child cannot make sense of the parent's behaviors and is, thus, unable to develop an organized self. Since the parent, who is supposed to provide care, is the source of fear, the child does not have the choice to fight or flee, but rather responds by freezing.¹¹⁹ In the Strange Situation, such a child exhibits disorganized reactions. When the mother or father returns to the room, the child shows a mixed approach-avoidance type of behavior, moving away from the parent first, then going toward, and then backing away again.¹²⁰ The child often averts his or her eyes from the parent and sometimes freezes, seemingly with a sense of fear. In this disorganized orientation, the child suffers from "double trauma," experiencing both the tragic event of abuse itself and the loss of a trusted attachment figure.¹²¹ Such a child shows a lack of coherence in her cognitive, emotional, and behavioral functioning; her states of mind and information processing become fragmented. Particularly, when the traumatic event occurred in early childhood, because of normal infantile amnesia, the child may not be able to recall the related events in a narrative form. However, it usually remains in an implicit, unresolved state of mind that automatically triggers specific emotional, perceptual, and somatic reactions in relationships, without conscious awareness of the origins of the previous disorganized attachment experiences.¹²²

Thus, those who have internalized this insecure attachment have many difficulties later in life. Studies have found that they frequently show affect-regulation problems, attention deficits, social malfunctioning, and dissociative symptoms.¹²³

¹¹⁹Seigel, *The Developing Mind*, 109.

¹²⁰*Ibid.*, 108; Kelly and Palley, "A Case Study on Insecure Attachment," 82.

¹²¹Seigel, *The Developing Mind*, 110.

¹²²*Ibid.*

¹²³*Ibid.*, 109; Karlen Lyons-Ruth and Devorah Jacobowitz, "Attachment Disorganization: Unresolved Loss, Relational Violence, and Lapse in Behavioral and Attentional Strategies," in *Handbook of Attachment: Theory, Research, and Clinical Applications*, ed. J. Cassidy and P. R. Shaver (New York: Guilford Press), 520–54.

Individuals with disorganized/disoriented attachment styles often experience serious relational dysfunction, such as an impaired capacity for conflict resolution, chronic depression, helplessness, and coercive behaviors. They also oftentimes become hostile and aggressive toward others and tend to seek to control interactions; some of them identify with their abusive caregiver and imitate their aggressive behavior as a “survival mechanism” that implicitly says, “I am like you. You do not need to hurt me. I am doing just what you want and what you do.”¹²⁴ Insecure attachment has been seen to be a critical factor for identifying individuals with aggressive behaviors in their adolescence and adulthood.¹²⁵

In short, attachment theory explains that trauma, such as neglect, and physical and sexual abuse, shapes the internal relational schemas that include implicit memories associated with unstable and negative emotions, and therefore develop a disorganized, rigid, maladaptive, and fixated attachment pattern (i.e., insecure attachment). These distorted relational patterns gradually deplete the victims’ abilities to acquire appropriate social skills and inhibit their capabilities to build secure, close relationships with others throughout life.

Sociocultural Perspective

An increasing number of scholars have recently pointed out the lack of consideration given to sociocultural factors regarding trauma.¹²⁶ Some, for example, have

¹²⁴Alicia Lieberman, Charles Zeanah, and Jennifer McIntosh, “Attachment Perspectives on Domestic Violence and Family Law,” *Family Court Review* 49, no. 3 (July 1, 2011): 529.

¹²⁵*Ibid.*

¹²⁶Jeffrey C. Alexander et al., *Cultural Trauma and Collective Identity* (Berkeley, CA: University of California Press, 2004); Herman, *Trauma and Recovery*, 2015; Kirrily Pells and Karen Treisman, “Genocide, Ethnic, Conflict, and Political Violence,” in *Trauma Counseling: Theories and Interventions*, ed. Lisa Lopez Levers (New York: Springer Publishing Company, 2012), 389–411; Neil Boothby, Alison Strang, and Michael G. Wessells, *A World Turned Upside Down: Social Ecological Approaches to Children in War Zones* (Bloomfield, CT: Kumarian Press, 2006); Boris Drozdek and John P. Wilson, eds., *Voices of Trauma: Treating Psychological Trauma across Cultures* (New York: Springer Science & Business Media, 2007).

focused on the traumatic experiences of Holocaust survivors, victims of political or sexual violence, and those who have suffered under oppressive social structures. Boris Drozdek explains, “Trauma does not take place in a vacuum or only in a head or brain of the victim, but in a ‘real world,’ and in a society that surrounds him/her.”¹²⁷ This broader perspective does not deny, of course, that trauma has biomedical and psychological aspects, but it suggests that an overemphasis on the intrapsychic and its physiological grounding can overlook the influence of the sociocultural context of trauma. When that happens, one runs the risk of reducing a more complex system into a mere personal problem.¹²⁸ While criticizing psychoanalytically-mediated approaches to trauma, Jeffrey Alexander introduces the concept of “cultural trauma,” which occurs when people have been collectively oppressed by a sociocultural event or system, leaving wounds on their memories and changing their identity in fundamental ways.¹²⁹ From this view, trauma reaches beyond an individual’s biopsychological wound; it can be understood as a socialization process of collective meaning or as the production of a collective identity of a certain group that coalesces around a tragic event. Herman also points out that in an environment where individuals are continuously disempowered by a perpetrator or an impingent system and disconnected from relationships with those in power, the victims internalize their terror and helplessness and lose their sense of autonomy, becoming “captive” psychosocially within the environment.¹³⁰ She further divulges the fact that

¹²⁷Boris Drozdek, “The Rebirth of Contextual Thinking in Psychotraumatology,” in *Voices of Trauma: Treating Psychological Trauma Across Cultures*, ed. Boris Drozdek and John P. Wilson (New York: Springer Science & Business Media, 2007), 11.

¹²⁸Regarding the differentiation of the term society and culture, Boris says, “The concept of culture is about the process of being and becoming a social creature, about the rules of a society, and about the ways in which these are enacted, experienced, and transmitted.” Anthony J. Marsella similarly defines culture as “shared learned behavior which is transmitted from one generation to another to promote individual and group adjustment and adaptation.” *Ibid.*, 5-6.

¹²⁹Alexander et al., *Cultural Trauma and Collective Identity*, 1.

¹³⁰Herman, *Trauma and Recovery*, 76–77.

such an oppressive environment can be present not only in systematized institutions, such as concentration camps, sex markets, or religious cults but also in ordinary life contexts, including families and intimate relationships. These scholars make it clear that trauma cannot be addressed comprehensively apart from the sociocultural systems that shape the intrapersonal conditions of individuals. Thus, the primary interest of this model is to understand the dynamics of distorted sociocultural systems and their detrimental impacts on humanity with respect to trauma.

Traumatogenic Change, Trauma Society, and Evil Humanity

Society is constantly changing. The triumphalism and optimism of the nineteenth century meant that change was seen to be synonymous with progress and the betterment of society; it used to be considered good and valued.¹³¹ Social change, however, has not always been positive and progressive in every regard. The development of modern society has produced various tragic side effects, including the problems of alienation, ecological destruction, technologically-advanced wars, genocide, and the spread of new types of crime and violence—which can hardly be considered progress! Social change often comes through “blood, sweat, and tears,” triggering breakdowns or reversals; so that genuine progress does not occur in all domains of social life and does not equally, or fairly, benefit all members of society—in fact in some cases it promotes social inequality.¹³² As a result, social change can be oftentimes traumatic.

Not all social change is, of course, traumatic. Sztompka well articulates the variables of social change that specifically promote trauma. First, such change happens “suddenly”, producing a rapid rise in threats that had been ignored up until that time.

¹³¹Piotr Sztompka, “The Trauma of Social Change: A Case of Postcommunist Societies,” in *Cultural Trauma and Collective Identity* (Berkeley, CA: University of California Press, 2004), 155–56.

¹³²*Ibid.*, 156–57.

Second, it impacts “comprehensive” areas of the society, such as politics, law, economy, and culture. Third, the change transforms the “fundamental” aspects of social and personal life, including dominant values and power, cultural norms, and overturning of hierarchy. As a result societal members feel pressure to change their previous lifestyles in public or private. Fourth, it promotes the shared response of “unexpected” shock among the social groups.¹³³ In other words, when social change suddenly occurs in unexpected ways and comprehensively impacts the society and fundamentally alters individuals’ lives, society members at first suffer alone, but later become aware of common difficulties and struggles of others, having shared thoughts, beliefs, and moods. In this way, they collectively enter into the experience of cultural trauma.

Sztompka further explains the sequence of how the traumatogenic social change actually facilitates cultural trauma.¹³⁴ During the change, previous cultural norms, systems, and habits are challenged and broken. Within the chaos of ordinary life, people normally experience anxiety, uncertainty, and insecurity. In unstable circumstances, if a social-trauma event occurs, such as unemployment, inflation, poverty, increased crime rate, and transitions of political and economic hierarchy, then some members of the society exhibit a set of cultural traumatic responses, including a prevailing sense of distrust and anxiety, disorientation of their collective identity, pessimism concerning future, and nostalgic images of the past. These symptoms, according to Sztompka, may affect several generations and bring a well-functioning society to ruin. In this case, however, if people develop posttraumatic adaptation through various coping strategies, accepting a new identity, new ideology, and new habits, the society can overcome the trauma and cultivate a new culture.¹³⁵

¹³³Sztompka, “The Trauma of Social Change,” 158–59.

¹³⁴Ibid., 165–70.

¹³⁵Ibid., 169–70.

Sztompka's theory is beneficial in providing a sociological framework of understanding which societal components possibly contribute to cultural trauma and how people can collectively experience trauma as a result of social change. His explanation, however, does not sufficiently articulate how, in such events, some groups become perpetrators while other groups become victims in a given society. The most serious problem, according to the sociocultural perspective, is not the social system itself, but the fact that groups of people attempt to overcome the crisis by creating systems that radically sacrifice the needs of others resulting in oppression. As an example, Hitler's government developed "the Final Solution" to create a "pure Arian kingdom" by annihilating Jews.¹³⁶ The "solution" was presented as a way of improving German society, but for Jews it was unimaginable trauma. When those in power systematically oppress other groups and earn unjust benefits as a result, the society is considered a trauma-prone society.

Researchers have explored how cultures develop traumatic social structures. The key is located in associating certain others with evil in a threatening situation. Dubois, Levers, and Esposito argue that oppressive systems come from an innate human tendency to project one's inner evil and darkness onto others, which is related to dichotomous thinking and discriminatory actions. According to their research, when people feel personal frustration or uncertainty in a competition for power or wealth, they feel a threat to self-esteem and tend to enter into an "othering" process, in which they polarizes evil versus good and associate others with evil and themselves with good.¹³⁷ In so doing, they rationalize their verbally and physically prejudicial actions against

¹³⁶ Adolf Hitler, "Victory Speech of 16, July, 1941," quoted from Alistair McFadyen, *Bound to Sin: Abuse, Holocaust and the Christian Doctrine of Sin* (Cambridge: Cambridge University Press, 2000), 85.

¹³⁷ Alison L. DuBois, Lisa L. Levers, and Charles P. Esposito, "Existential Perspectives on the Psychology of Evil," in *Trauma Counseling: Theories and Interventions*, ed. Lisa Lopez Levers (New York: Springer Publishing Company, 2012), 264–79.

“others” who are different from “us,” and in the process dissolve responsibility for what are, in fact, evil acts.¹³⁸ Dubois, Levers, and Esposito nicely explain the process of distinguishing “us” and “them”:

In this innate quest for survival, human beings have long devised myriad ways to *rank* one another in an effort to ensure the continuity of the group. This *self-segregation* is rooted in an inherent survival instinct, driven by fear. It distinguishes differences by gender, race, religion, social class, intelligence, sexual orientation, age, ability, and political party. As a result of this tendency toward self-imposed classification, prejudices and discrimination against an individual or a group develop. If a person is different from us, they embody *otherness*, and his or her moral compass or worldview orientation must be different; his or her behaviors then take on negative connotations, and our own sense of loathing constitutes the negative attributes that we project onto the Other. Systems of power often have exploited this dynamic to retain influence. By segregating a group as the enemy, leaders can achieve control quite effectively through *othering*. The employment of this dynamic, separating *us* from *them*, whether conscious or unconscious, can be observed in a number of systems, ranging from schools to corporations, and it creates the context for prejudice and discrimination (*italics in original*).¹³⁹

According to Wink, a contemporary, dominant culture which radically distinguishes between good and evil can facilitate such dichotomous, discriminating processes of making others evil. From early life, human thinking is unconsciously colored by typical cartoons, novels, and movies, holding the same patterns of plot: an indestructible good guy finally terminates the bad guys, though the good hero or heroine may suffer grievously at the hand of the villains for the first three-quarters of the story.¹⁴⁰ Indulging in this cultural media, children identify with the good guy, so that they can think of themselves as good, and this enables them to project onto the bad guy their own repressed anger, violence, and rebelliousness, and then vicariously enjoy their own evil

¹³⁸The term “evil” in this context does not refer a spiritual state as in Christianity, but is, rather, a naturalistic concept. Zimbardo nicely defines the naturalistic view of evil as “intentionally behaving in ways that harm, abuse, demean, dehumanize, or destroy innocent others—or using one’s authority and systemic power to encourage or permit others to do so on your behalf.” See Philip Zimbardo, *The Lucifer Effect: Understanding How Good People Turn Evil* (New York: Random House Trade Paperbacks, 2007), 5.

¹³⁹DuBois, Levers, and Esposito, “Existential Perspectives on the Psychology of Evil,” 266.

¹⁴⁰Walter Wink, *The Powers That Be: Theology for a New Millennium* (New York: Penguin Random House, 1999), 42–56.

without coming to any insight about their own inner evil desire.¹⁴¹ This contemporary culture is, he goes on to say, the environment in which children are catechized more effectively than in any Sunday school.¹⁴² Through this psycho-cultural dynamic, people have learned the corollaries dichotomies of good and evil and us and them; dichotomies that, in turn, keep breeding a distorted guilt-free bias that “our” discriminatory action, including violence, is for goodness and justice. In Wink’s words, today society is “under the conditions of the Domination System,” where violence to “evil” individuals or groups is rationalized and even encouraged to maintain social order, avoid chaos, and reestablish justice.¹⁴³

In a similar vein, John Swinton argues that human beings have a common tendency to assume “the myth of pure evil,” functioning as a “cultural defense mechanism” to hide distasteful and wicked aspects of oneself and one’s own culture by projecting them onto another person or object, which is culturally acceptable to call evil.¹⁴⁴ This unconscious defensive activity often leads to the thought that evil and good are opposite poles and that the evil-doer cannot belong to that which is considered good. Since people naturally consider themselves as good, evil must always lie in others, outside of “us,” deforming a person into the essence of evil and dehumanizing and “decreationizing” the person. This myth of absolute evil creates a comfortable distance between the goodness of us and the monstrosity of the others. Swinton insightfully states, “we keep evil on the margins of our world view, framed as something that is radically different from us. When this happens we turn people into monsters and act

¹⁴¹Wink, *The Powers That Be*, 49.

¹⁴²Surprisingly, the American average child is reported to log roughly 36,000 hours of television by age eighteen, viewing some 15,000 murders. *Ibid.*, 54.

¹⁴³Walter Wink, *Engaging the Powers: Discernment and Resistance in a World of Domination* (Minneapolis: Fortress Press, 1992), 72.

¹⁴⁴John Swinton, *Raging with Compassion: Pastoral Responses to the Problem of Evil* (Grand Rapids: Wm. B. Eerdmans Publishing, 2007), 153.

accordingly.”¹⁴⁵ Lamentably, the judgment of good and evil—us and them—has often been distorted by a culturally-biased standard, such as race, gender, color, and any other creational differences.

The bottom line of those approaches is that human beings have a tendency of devaluing “others,” by unconsciously projecting inner badness and negative emotions onto them and adding on culturally- and socially-learned prejudice that is believed to promote their own survival and benefit. As a result, this tendency promotes a “groupthink” that increases devaluing thoughts, feelings of disgust, discrimination and even aggressive behavior toward “others.”¹⁴⁶ When this kind of dichotomy takes root, a trauma-prone-society, in which a certain group has been unfairly oppressed and discriminated, develops. Indeed, human history has recorded many forms of oppression toward others, ranging from verbal, physical, sexual abuse to institutionalized hate crimes and genocide. It is beyond the scope of this dissertation to engage in an in-depth analysis of the long history of discriminatory oppression. Yet, it is crucial to briefly recall salient types in human history, in order to get a glimpse of how people have been traumatized within such sociocultural distortions.

Trauma and Racism

One of the most salient examples of social oppression derived from “othering” has occurred around race. Race in Western culture has been largely understood as the division between whites and peoples of color. From the eighteenth to early twentieth centuries, research about race was informed by the assumption that differences in physical/psychological traits, intelligence, education, and wealth and the resulting cultural hierarchy was inevitable because such differences were biologically tied to

¹⁴⁵Swinton, *Raging with Compassion*, 143.

¹⁴⁶For details of groupthink, see Irving L. Janis, *Groupthink: Psychological Studies of Policy Decisions and Fiascoes*, 2nd ed. (Boston: Cengage Learning, 1982).

race.¹⁴⁷ Such assumptions supported the prejudicial categories of innate inferiority and superiority. For example, it was believed that Blacks were less intelligent than Whites, while it was conceded that they excel in athletics. This kind of thinking leads to the justification of unequal treatment of others based on race and the promotion of racial hatred, repulsion, and discrimination. In fact, eugenic studies that distinguish between inferior and superior traits based on racist pseudo-evidence, led to political moves to strictly control contact between certain racial groups and even rationalized mass murder.¹⁴⁸

Contemporary science is skeptical of the past racialized research. Recent studies argue that the qualities previously attributed to race are a socially- and culturally-defined construction rather than biologically-based. Advanced Mitochondrial DNA tests comparing genetic similarities among participants, including different races, show that the most genetically similar humans are founded not in the same racial category of colors but in a different race.¹⁴⁹ Obviously, the variation in skin color is a genetic trait, but given that all people share over 35,000 genes in common, the single factor of skin color cannot be the criteria to subdivide humanity into classes. Furthermore, studies have revealed that there are no genetic correlations between skin color and intellectual potential, athletic ability, or emotional stability as some people have assumed.¹⁵⁰ In other words, the idea of qualitative differences based on skin color is not scientifically supported; rather it is more likely derived from social and cultural biases. Beverly Daniel Tatum says that racial

¹⁴⁷John Dixon and Mark Levine, eds., *Beyond Prejudice: Extending the Social Psychology of Conflict, Inequality and Social Change* (Cambridge: Cambridge University Press, 2012), 3.

¹⁴⁸Kent L. Koppelman, *Understanding Human Differences: Multicultural Education for a Diverse America*, 4th ed. (Boston: Pearson, 2013), 94; Dixon and Levine, *Beyond Prejudice*, 4; Robert Gellately, *Backing Hitler: Consent and Coercion in Nazi Germany* (Oxford: Oxford University Press, 2001).

¹⁴⁹Larry Adelman, "Race—the Power of an Illusion Episode I: The Difference between Us," DVD (PBS, 2003).

¹⁵⁰*Ibid.* Those differences are more about personal differences rather than racial.

differences, in terms of biology, are myths and individual differences are more salient and meaningful than that of race.¹⁵¹ Many other scholars also agree that racial differences are social and political constructions based on visible skin color, which is mostly used for nefarious purposes of projecting negative feelings of anxiety, guilt, resentment, and hostility onto other races.¹⁵² Race, which is marked by the physical difference of skin color, has no part in determining the inherited superiority or inferiority of a certain group.

Still, however, the color-based racial division is a powerful social construction that impacts real circumstances of a person's life. Any discriminative and unfair treatment of an individual or group based on such concepts of race, based on superficial characteristics, is considered racism.¹⁵³ In a society where racism occurs, those who are being oppressed can experience trauma.

African American history, for example, has been characterized by racial oppression. From the perspective of African Americans, the history of America was built on a foundation of racism, that is, a system of slavery. In 1526, the Spanish first established their colony in the American continent by using Africans as slaves. Since the Catholic doctrine of human dignity excluded the practice of slavery, slave traders quickly redefined Africans as “nonhuman” property like cows or pigs and thus eventually imported an estimated 60 million Africans slaves into America.¹⁵⁴ In the slave system, the humanity, lives, and culture of these Africans were devastated by racism. They were

¹⁵¹Beverly Daniel Tatum, *Why Are All the Black Kids Sitting Together in the Cafeteria: And Other Conversations about Race* (New York: Basic Books, 2003), 15–16.

¹⁵²Emma Mosley, “Racial and Ethnic Intolerance: A Framework for Violence and Trauma,” in *Trauma Counseling: Theories and Interventions*, ed. Lisa Lopez Levers (New York: Springer Publishing Company, 2012), 280–96; Linda J. Myers, *Understanding an Afrocentric World View: Introduction to Optimal Psychology* (Dubuque, IA: Kendall Hunt Publishing, 1988), 14; Ruth Frankenberg, *White Women, Race Matters: The Social Construction of Whiteness* (Minneapolis: University Of Minnesota Press, 1993), 1–22.

¹⁵³Mosley, “Racial and Ethnic Intolerance,” 282.

¹⁵⁴*Ibid.*, 285. See also Carroll A. Watkins Ali, *Survival and Liberation* (St. Louis, MO: Chalice Press, 1999), 18.

forced to work as slaves to support their White masters' household, fields, and factories without human rights. They were frequently physically and sexually abused by their White slaveholders. Many African slaves were killed and slave women were repeatedly raped, but the racist culture protected the perpetrators, instead of the black victims. The Southern states even enacted laws to keep the white race from "mongrelization" and "miscegenation."¹⁵⁵ Africans in the slave system also lost their history, cultural heritage, and language. Since African slaves were prohibited from conveying their ancestral stories to their children or to speak in their mother tongue, many were not able to trace their family history and culture beyond 1865.¹⁵⁶ They did not even have last names until that point in time. As a result, they often adopted their masters' names or simply made them up.¹⁵⁷ Such losses can cause a disconnection from one's cultural identity and thereby snatch away a sense of belonging.¹⁵⁸ This is made especially obvious in the case of an African who adopted his master's last name and would forever be tied to his miserable experience of racial oppression.

Even with the abolition of slavery, with the ratification of the Thirteenth Amendment in December of 1865, socio-cultural discrimination, such as segregation, hate-crimes and maltreatment, continued. For example, the "Jim Crow Laws," which continued until 1965, mandated the segregation of public school, public places, public transportation, housing, and the job market, particularly in the southern United States.¹⁵⁹ The social conditions of African Americans, even after the proclamation of liberation, were consistently poorer and undeveloped, compared to those of Whites.

¹⁵⁵Mosley, "Racial and Ethnic Intolerance," 285.

¹⁵⁶Ibid., 286.

¹⁵⁷Ibid.

¹⁵⁸For the impacts of disconnection, see Herman, *Trauma and Recovery*, 51-73.

¹⁵⁹Henry Louis Gate and Anthony Appiah, *Africana: The Encyclopedia of the African and African-American Experience* (Oxford: Oxford University Press, 1999), 1211.

Still today, African Americans suffer in a racially discriminative system. During the long history of slavery and oppression, society was built upon systems favoring those who are White and the exploitation of African slave labor has never been compensated.¹⁶⁰ Thus, many African Americans are now thrown to the field of competitive free markets without sufficient foundations of education, economy and welfare compared to the Whites. In addition, most African Americans say that they have frequently experienced various subtle forms of institutional racism in their daily life, including workplace, school, and public service.¹⁶¹ It is a grossly unfair game for African Americans to try surviving and thriving in such White-dominated contexts. Ali nicely describes the asymmetrical reality of contemporary African Americans:

On the whole, African Americans have not been able to overcome the effects of systematic racism. Today the majority of African Americans live under conditions of genocidal poverty. Systematic racism has prevented Blacks from being able to amass an economic base that would ensure that Black, as a people, are not disproportionately filling the prisons, unemployed, underemployed, undereducated, forced to comply with welfare systems, and living in ghettos as we currently are.

Some people assert that white privilege does not exist anymore, but countless narratives of African Americans show undeniably that racial discrimination is still prevalent throughout the States. The lack of awareness of the unequal status of Black people originates from an innate human defense to deny and unlearn the uncomfortable reality, resulting in the avoidance of responsible actions of dominate groups.¹⁶² Honesty about the racism of the past and the present is essential for contemporary society to empower people with the possibility of change.

The legacy of racial oppression and discrimination continues to have destructive consequences for African American's life. In the midst of racism, African

¹⁶⁰Tatum, *Why Are All the Black Kids Sitting Together in the Cafeteria*, 15–18.

¹⁶¹Ali, *Survival and Liberation*, 26–28.

¹⁶²Tatum, *Why Are All the Black Kids Sitting Together in the Cafeteria*, 18–23.

Americans often exhibit evidence of psychocultural trauma. They frequently show low self-esteem, hopelessness, depression, and general self destructive behaviors.¹⁶³ They also display emotional turmoil ranging from rage and anger to feelings of vulnerability and pain, and suffer from chronic feelings of disempowerment, insecurity, and self-doubt.¹⁶⁴ Some Blacks have come to internalize their oppression, accepting their false inferiority to Whites and end up distrusting, disrespecting, and hating themselves and their race.¹⁶⁵

One black formerly enslaved woman said, “It is the black’s destiny to suffer cause we are black and that God generally smiles on white people and not black people and that we are black because we did something wrong and this is punishment of our lives. And maybe if we get it right this time we might be rewarded and come back as a white person.”¹⁶⁶ Her confession indicates how powerfully racism impacts a person’s identity and self-concept. Moreover, according to Grier and Cobbs, after generations of devastating oppression, every African American has consciously and unconsciously appropriated a growing sense of rage, regardless of whether it is visible or invisible, in their daily life. They further say that collective Black rage is justifiable given the injustice that Black people have continuously experienced in the United States.¹⁶⁷ Physical, psychological, economic, and social exploitation during slavery and segregation has resulted in a lack of constructive, participative sociocultural activity among the Black

¹⁶³Joy DeGruy, *Post Traumatic Slave Syndrome: America’s Legacy of Enduring Injury and Healing* (Portland, OR: Joy DeGruy Publications, 2012); Nancy Boyd-Franklin, *Black Families in Therapy: Understanding the African American Experience*, 2nd ed. (New York: Guilford Publications, 2013), 28-51.

¹⁶⁴Arthur C. Jones, “Psychological Functioning in Black Americans: A Conceptual Guide for Use in Psychotherapy,” 2nd ser., 10 (1985): 363–69.

¹⁶⁵Ali, *Survival and Liberation*, 72.

¹⁶⁶Phillis Isabella Sheppard, *Self, Culture, and Others in Womanist Practical Theology* (New York: Palgrave Macmillan, 2011), 32–33.

¹⁶⁷William H. Grier and Price M. Cobbs, *Black Rage* (Eugene, OR: Wipf and Stock Publishers, 2000), 200–213.

community , and this lack, along with their rage, is connected with socially destructive behaviors such as gang activity, homicide, and sexual and drug abuse.¹⁶⁸ In other words, African Americans have suffered in a trauma-prone society.

In this context, African Americans have not merely been passive, but have developed their unique *modus operandi*. Many black scholars argue that African Americans emphasized “survival” and “community” throughout the history of slavery and racial discrimination.¹⁶⁹ In an impingent environment, their primary need was to survive, and thus they developed a community to support one another in order to increase their chances of survival. This necessary solidarity associated with the survival of the people has become their collective identity and foundation for living, which is called *ubuntu*, which means that a human being is not merely an individual, but is understood through their relationship with others in community.¹⁷⁰ In this perspective, personhood is a gift that is given within community and interpersonal relationships with others are vital to a person’s identity and humanness. They would say, “I am, because we are.” Through *ubuntu*, they mutually re-humanize one another, overcoming the experience of dehumanization in the midst of a traumatic context.

Moreover, some African Americans have developed the collective spirit of black liberation to resist oppressive systems. The rise of “Afrocentrism,” for example, is the shared mindset of liberated black people, which emphasizes African philosophy and black cultural inheritance and experiences as the heart of their worldview, rejecting the White-centered paradigm that has permeated many institutional systems.¹⁷¹ There has

¹⁶⁸Ali, *Survival and Liberation*, 71.

¹⁶⁹W. Nobles, “African Philosophy: Foundations for Black Psychology,” in *Black Psychology*, ed. R. L. Jones (Berkeley, CA: Cobb and Henry, 1991), 47–63; Ali, *Survival and Liberation*; Arthur C. Jones, *Wade in the Water: The Wisdom of the Spirituals*, 3rd ed. (Boulder, CO: Leave a Little Room, 2005).

¹⁷⁰Swinton, *Raging with Compassion*, 202.

¹⁷¹Molefi K. Asante, *Afrocentricity: The Theory of Social Change* (Sauk Villiage, IL: African American Images, 2003).

also been an effort to eliminate the terms “negro” and “colored,” which carried over from the slave system, and to consciously call themselves “African Americans,” “Blacks,” or “Afro-Americans.”¹⁷² They have also conveyed the voices of resistance and struggle for freedom in the public square, in a nonviolent way, by creating black-soulful forms of music, such as jazz and blues, in the midst of unspeakable experiences of oppression.¹⁷³ These cultural and collective emphases have enabled African Americans to survive and thrive together, assuming that they are a honorable people, even in the trauma-prone context of racial oppression, and such black uniqueness has, in turn, become a vital resource of fostering more and more the black identity, solidarity and fortitude.

In summary, the human tendency of “othering” with regard to race has created a prejudicial sociocultural context in which people consciously and unconsciously engage in oppressing a certain racial group, resulting in trauma. In such an environment, the oppressed people develop unique mindsets and ways of life to survive and liberate themselves from the distorted context. Therefore, when a trauma matter is associated with race, it is necessary for a therapist to sensitively consider the person’s sociocultural contexts in order to provide sufficient understanding and proper healing, avoiding any possible bias from the dominating party’s paradigm. Indeed, according to Myer, the psychology of oppression within white-dominated traditional psychoanalysis and therapies, lack understanding of marginalized races and have often been abusive, rather than as therapeutic to other races as they might have supposed:

We [African Americans] have as a people experienced the psychology of oppression, and it is the sub-optimal worldview that is oppressive. We have been led to believe that our very physical survival was in the hands of another man; we have been denied access to the truth about our cultural heritage and history; our cultural heritage and history have been negated and that of sub-optimal thinkers elevated.¹⁷⁴

¹⁷²Ali, *Survival and Liberation*, 77.

¹⁷³Burton W. Peretti, *Lift Every Voice: The History of African American Music* (Plymouth, England: Rowman & Littlefield Publishers, 2009), 143–45.

¹⁷⁴Myers, *Understanding an Afrocentric World View*, 15.

In order to eradicate such distortion, the present work of Christian psychology includes the sociocultural paradigm in its psychopathology.

Trauma and Sexism

Sociocultural trauma also frequently results from sexism, which refers to prejudice or discrimination based on a person's sex or gender. Sexism is experienced by both genders,¹⁷⁵ but it is usually defined as “any act, attitude, or institutional configuration that systematically subordinates or devalues women.”¹⁷⁶ Sexism presupposes that men are innately superior to women, thereby justifying male dominance over women in various settings, including familial, economic, and social life.¹⁷⁷ Of course, God created men and women with biopsychosocial differences, so it is natural that there are sexual and gender differences. However, those differences are to serve each other, as one body, and they are not to be used for oppressing the other sex.

Sexual oppression against women often derives from three sociocultural distortions: unreasonable stereotypes of women, objectification of women, and patriarchal systems. First, women have been devalued through stereotyping. Stereotypes refer to cultural beliefs or assumptions about a group of individuals, which often promote negative emotional reactions (prejudice) and resultant behavioral responses (discrimination).¹⁷⁸ Empirical studies have found widely-shared cultural beliefs regarding women's roles and behaviors. For example, some people believe that men are more

¹⁷⁵According to David Benatar, sex discrimination to women is “the first sexism,” and discrimination against males is called as “the second sexism.” David Benatar, *The Second Sexism: Discrimination Against Men and Boys* (Malden, MA: Wiley-Blackwell, 2012), 1–12.

¹⁷⁶James T. Sears, ed., *The Greenwood Encyclopedia of Love, Courtship, and Sexuality through History*, vol. 6, *The Modern World* (Westport, CT: Greenwood, 2007), “Sexism.”

¹⁷⁷Judith Lorber, *Gender Inequality: Feminist Theories and Politics*, 5th ed. (New York: Oxford University Press, 2011), 4–6.

¹⁷⁸Maria-Christina Stewart et al., “Stereotypes, Prejudice and Discrimination of Women with Anorexia Nervosa,” *European Eating Disorders Review: The Journal of the Eating Disorders Association* 16, no. 4 (July 2008): 311–18.

dexterous and competent while women are warmer interpersonally and social; as a result women are expected to play the role of a wife or mother rather than a professional.¹⁷⁹ Working mothers in this context are often considered more selfish than housewives, working fathers, or stay-at-home fathers, because they seem to violate the traditional role expected for females.¹⁸⁰ “Employment skepticism,” which assumes that women have less ability to succeed in the workplace because they are supposed to be “nice” and “not hard-nosed,” is another stereotype derogating women’s value.¹⁸¹ Women who are professionally successful are often unfairly considered to be less likeable and more hostile than equally successful men.¹⁸² A woman who is overweight is sometimes seen as lacking management and leadership skills, while an overweight man is not connected with those negative qualities.¹⁸³

More seriously, female survivors of sexual violence are not free from negative stereotypes. Rape survivors are stigmatized by social judgment labeling them as “defiled” and the conventional social attitude has a tendency to consider most rapes as “consensual” sexual activity for which the victim is also responsible.¹⁸⁴ The victim, not the perpetrator, often receives public shame and guilt. A victim depicts her experience of social blame in the aftermath of tragedy saying:

It was just so awful that [my mother] didn’t believe I had gotten raped. She was sure

¹⁷⁹David G. Wagner and Joseph Berger, “Gender and Interpersonal Task Behaviors: Status Expectation Accounts,” *Sociological Perspectives* 40, no. 1 (1997): 1–32; Andrew N. Christopher and Mark R. Wojda, “Social Dominance Orientation, Right-Wing Authoritarianism, Sexism, and Prejudice Toward Women in the Workforce,” *Psychology of Women Quarterly* 32, no. 1 (March 1, 2008): 65–73.

¹⁸⁰Christopher and Wojda, “Social Dominance Orientation,” 65–66.

¹⁸¹Sean Valentine, “Development of a Brief Multidimensional Aversion to Women Who Work Scale,” *Sex Roles* 44, nos. 11–12 (June 2001): 773–87.

¹⁸²Madeline E. Heilman et al., “Penalties for Success: Reactions to Women Who Succeed at Male Gender-Typed Tasks,” *The Journal of Applied Psychology* 89, no. 3 (June 2004): 416–27.

¹⁸³Patricia V. Roehling et al., “Weight Discrimination and the Glass Ceiling Effect among Top US CEOs,” *Equal Opportunities International* 28, no. 2 (February 13, 2009): 179–96.

¹⁸⁴Herman, *Trauma and Recovery*, 67.

I had asked for it. . . . [My parents] so totally brainwashed me that I wasn't raped that I actually began to doubt it. Or maybe I really wanted it. People said a woman can't get raped if she doesn't want to.¹⁸⁵

This unsympathetic climate re-traumatizes victims of rape, after the violence they have experienced. Thus, most rape victims decide not to report the crime, and instead they keep silent, swallowing their suffering and pain.¹⁸⁶ These examples show that women's lives are often trapped by cultural stereotypes.

Second, along with stereotypes of women, women are harmed by objectification of the female body. Women have been used as sexual objects in everything from advertisements, to pornography, to prostitution. Empirical research has found that one out of every two advertisements in most popular U.S. magazines that features women presents them as sex objects.¹⁸⁷ These advertisements harm women because they are connected to negative attitudes towards women, including sexual aggression and rape, and they also present unrealistic body images which frequently lead to eating disorders.¹⁸⁸ Pornography is an obvious evidence of objectifying females sexually. In pornography, women exist only for men's sexual pleasure. Pornography dehumanizes women as sexual objects by depicting them as being used for men's satisfaction and sexual violence, including pain and humiliation in rape or sexual assaults.¹⁸⁹ Such images imply that it is permissible to treat women in such ways and women are pleased to be violated and abused by men.¹⁹⁰

¹⁸⁵Herman, *Trauma and Recovery*, 67.

¹⁸⁶According to Herman, less than one rape in ten is reported to police. *Ibid.*, 73.

¹⁸⁷Julie M. Stankiewicz and Francine Rosselli, "Women as Sex Objects and Victims in Print Advertisements," *Sex Roles* 58, nos. 7–8 (January 15, 2008): 579–89.

¹⁸⁸Katharina Lindner, "Images of Women in General Interest and Fashion Magazine Advertisements from 1955 to 2002," *Sex Roles* 51, nos. 7–8 (October 2004): 409–21; E. Stice et al., "Relation of Media Exposure to Eating Disorder Symptomatology: An Examination of Mediating Mechanisms," *Journal of Abnormal Psychology* 103, no. 4 (November 1994): 836–40.

¹⁸⁹Evangelia Papadaki, "Feminist Perspectives on Objectification," in *Stanford Encyclopedia of Philosophy*, accessed at December 1, 2013, <http://plato.stanford.edu/entries/feminism-objectification>.

¹⁹⁰*Ibid.*

In prostitution, a woman's body is violated in order to use sex as a tool for making money. Culturally distorted constructions of social power and control lead many women and children to enter into the trap of prostitution. Women from backgrounds in which they were economically and vocationally discriminated against become more vulnerable to recruitment or entrapment in prostitution, and the majority of prostitutes have been sexually abused at a young age, usually by a father or step-father, or they have experienced physical abuse and neglect from their families-of-origin.¹⁹¹ The only way to stop the violence in such an oppressive environment is to run away. However, those young runaway girls, frightened and unable to find a job, become easy prey for pimps who lure them into prostitution with false promises of friendship, romance, and riches.¹⁹² As a result, many girls fall into a life of prostitution at a young age—tragically the average age that young women in the United States enter prostitution is fourteen.¹⁹³ The following confession of a survivor of prostitution and incest is heartbreaking:

My father battered my mother. I was prostituted throughout my childhood, teen years and young adulthood. I was used in many systems of prostitution, including live sex shows, pornography, domestic trafficking, and brothels. Stripping was part of the training I endured as a girl to season me to a lifetime of abuse. The sexual abuse I suffered began when I was a young girl and extended into my early twenties. The men who prostituted me—my father, his father, my father's uncles and various friends of theirs—were extremely well organized and knew exactly how to sexually torture women and girls into submission. The men who prostituted me, known as pimps and handlers in everyday parlance, were rapists and batterers who used brainwashing techniques along with sexual torture to create and maintain control over women and girls whom they then sold in systems of prostitution, especially pornography. . . . When I pull up pornography on my computer I find the first twenty odd years of my life on display, splayed, trussed, raped, bruised, and chained. I see myself in the faces and poses of the women and girls for sale on my computer screen. I see myself when I was a sex slave, a girl child bred to be a prostitute, bred to make money for men.¹⁹⁴

¹⁹¹Vednta Carter and Evelina Giobbe, "Duet: Prostitution, Racism, and Feminist Discourse," in *Prostitution and Pornography: Philosophical Debate about the Sex Industry*, ed. Jessica Spector (Redwood City, CA: Stanford University Press, 2006), 24–28.

¹⁹²Ibid., 24.

¹⁹³Ibid.

¹⁹⁴Christine Stark, "Stripping as a System of Prostitution," in *Prostitution and Pornography: Philosophical Debate about the Sex Industry*, ed. Jessica Spector (Redwood City, CA: Stanford University

She describes prostitution as a “large organized industry of oppression” and “slavery-as-business for the slaver.”¹⁹⁵ Regardless of the darkness of prostitution, a large number of men still buy women for their sex and forcefully practice perverse and violent sexual contact, as if it is their right in turn for the payment. Sex workers thus face higher rates of violence and sexual assault, but those are often dismissed, ignored and not taken seriously by authorities.¹⁹⁶ In so doing, many men actively and explicitly support the oppressive system of sexual objectification.

Third, women can suffer in a patriarchal culture. Patriarchy refers to social hierarchical systems that privilege males structurally and ideologically. At the macro level, there are bureaucracies, law, and markets, and, to delve deeper at the micro level, there are interactions, families, and organizations.¹⁹⁷ In such systems, women are oppressed in various forms, including economically, socially, and through politically unequal opportunities and rewards. Women are even subject to violence. Such oppression in patriarchy has been traditionally explained as a power struggle.¹⁹⁸ Since humans engage in a constant struggle for maximizing their status and advantage, men have developed societies in which they exert power over women. After these male-dominant societies have been established, such oppression is easily fostered both habitually and culturally by men who romanticize suffering and rationalize affliction towards women.¹⁹⁹

Press, 2006), 41–42.

¹⁹⁵Stark, “Stripping as a System of Prostitution,” 40.

¹⁹⁶Barbara Sullivan, “Rape, Prostitution and Consent,” *Australian & New Zealand Journal of Criminology* 40, no. 2 (August 1, 2007): 127–42.

¹⁹⁷Gwen Hunnicutt, “Varieties of Patriarchy and Violence against Women Resurrecting ‘Patriarchy’ as a Theoretical Tool,” *Violence against Women* 15, no. 5 (May 1, 2009): 557.

¹⁹⁸Jane Caputi, “The Sexual Politics of Murder,” *Gender & Society* 3, no. 4 (December 1, 1989): 437–56; Susan Brownmiller, *Against Our Will: Men, Women, and Rape* (New York: Ballantine Books, 1993).

¹⁹⁹Hunnicutt, “Varieties of Patriarchy and Violence Against Women,” 561–65.

Korean society provides an example of the structure where women have been oppressed by a patriarchal system. Korean women have traditionally been expected to be *Hyun-Mo-Yang-Chu*, which means “a wise mother and good wife,” and this traditional concept remains the ideal image of Korean women.²⁰⁰ The ideal carries with it a cultural expectation that a woman will “perfectly” sacrifice for the sake of her family.²⁰¹ Thus, Korean society has traditionally required a woman, after marriage, to quit her job and fully focus on house work and parenting in order to support the financial and social success of her husband and children.²⁰² Such a perfectionistic expectation imposed on Korean women does not take into account her personal health. Ironically, while setting a high standard of sacrifice and perfection for women, at the same time the patriarchal culture sends the message that they never can be perfect, because they are women.²⁰³ Moreover, in spite of their sacrifice, when something negative happens in a family, women are most likely blamed for their insufficient support for their family.²⁰⁴ This unfair dilemma causes them to experience chronic frustration and leaves them exhausted in their endless pursuit of the impossible goal of perfection.

Recently, the traditional pressure on “stay-at-home” women seems to have decreased, and growing numbers of women are working outside the home, but the expectation of women’s sacrificial work for family has not changed. Rather, the expectation of success for career women is an added pressure. According to Hee An Choi, Korean society now requires “superwomen.”²⁰⁵ If a woman in this culture has a

²⁰⁰Hee An Choi, *Korean Women and God: Experiencing God in a Multi-Religious Colonial Context* (Maryknoll, NY: Orbis Books, 2005), 69.

²⁰¹Korean women are living under the pressure of the sociocultural expectation of the “perfect-mother myth,” meaning that “mothers must be perfect and totally responsible for childbearing and child-raising.” *Ibid.*, 64.

²⁰²*Ibid.*, 69.

²⁰³*Ibid.*, 64.

²⁰⁴*Ibid.*, 77.

²⁰⁵*Ibid.*, 45.

professional job, but fails to satisfy both the traditional and the added expectations, then the woman will be more negatively evaluated than a woman who stays at home. “The systems of patriarchy and hierarchy [in Korea] have not truly changed,” Hee An says, “Instead, these systems have become stronger and operate in more hidden and ingenious ways to ensure that the strong patriarchal value of family is still passed down from generation to generation in an unbroken chain.”²⁰⁶

In this reality of oppression, Korean women bear *Han*. The unique Korean term, *Han*, refers to a complex mixture of long-term suppressed emotions in the midst of unjust suffering. *Han* includes a grievous feeling of experiencing both a sense of unresolved resentment regarding injustice and a sense of helplessness because of overwhelming situations.²⁰⁷ *Han* also includes both senses of hatred and love; it is a chronic state of emotional tension between the hatred and the love of the object that causes suffering.²⁰⁸ A *han-ful* Korean woman in a patriarchal family, for example, feels a sense of anger at the situation in which she must unfairly sacrifice her life for the sake of her family, but because of her love for them, she suppresses the bitterness, which remains in an unresolved state throughout her life. *Han* also contains both states of hope and frustration.²⁰⁹ A *han-ful* individual may have a hope that the current situation of suffering and injustice will change one day, though it seems currently impossible, because they lack power. That hope, however, has no promise, so the person is endlessly wavering between hope and frustration.

²⁰⁶Choi, *Korean Women and God*, 45-46.

²⁰⁷Roland Bleiker and Hoang Young-ju, “Korean Sources of Conflict Resolution: An Inquiry into the Concept of Han,” in *Mediating across Difference: Oceanic and Asian Approaches to Conflict Resolution* (Honolulu: University of Hawaii Press, 2011), 248–69; Boo-Woong Yoo, *Korean Pentecostalism: Its History and Theology* (Frankfurt: Peter Lang International Academic Publishers, 1988), 221.

²⁰⁸Jae Hoon Lee, *The Exploration of the Inner Wound—Han* (Atlanta: Oxford University Press, 1994), 11–26.

²⁰⁹Jin Kim, “The Hope-Philosophic Interpretation of Han,” *Philosophy* 78 (2004): 319–45; Jae Soon Park, “Han and Shinmyong: The Suffering Soul and Liberating Life of the Oppressed People,” *Korean Journal of Systematic Theology* 3 (1999): 195–224.

Because of its long-term effect of suppression and tension, the consistent experience of *han* makes one's whole body and soul wither and often causes *Hwa-Byung*, a Korean cultural syndrome.²¹⁰ The symptoms of *Hwa-Byung* include not only physical factors (e.g., chest pains, heart palpitation, chronic fatigue, dull headache, insomnia, indigestion) and emotional factors (e.g., anxiety, anger, and depression), but also behavioral and social problems (e.g., unceasing crying, divorce, running away from home).²¹¹ These symptoms are not very different from those of chronic trauma. Research shows a high prevalence of these syndromes among middle-class, middle-aged women in Korea.²¹² Given the overwhelming situation that Korean women live in, it is not surprising that the rate of *Hwa-Byung* in Korean women is much higher than that of men. These unpleasant examples are a real part of today's Korean society, which are often hidden.

Sociocultural systems in which women are marginalized and psychologically wounded are prevalent all over the world. The purpose of this section, however, is to underline the value of contextual considerations regarding women who are oppressed, because of their gender, in order to provide a proper understanding of their suffering and wise interventions for their healing. In fact, many formal systems of society today have not sufficiently or sensitively considered the oppression of women. As a result, female survivors frequently describe their contact with social systems, such as the medical, legal, and mental health institutions, as negative and re-traumatizing. They often report

²¹⁰Sung Kil Min, "Clinical Correlates of Hwa-Byung and a Proposal for a New Anger Disorder," *Psychiatry Investigation* 5, no. 3 (2008): 125-41; Y. K. Kim, "Won-Haan and Hwa-Zung (Hwabyung)" in *Proceeding of "Hwabyung of Koreans-the Cultural Diagnosis and Treatment,"* ed. The Academy of Korean Studies (Seoul: the Academy of Korean Studies, 1997), 5-17.

²¹¹Bou-Young Rhi, "Hwabyung-An Overview," *Psychiatry Investigation* 1, no. 1 (2004): 21-24; K. Y. Pang, "Hwabyung: The Construction of a Korean Popular Illness among Korean Elderly Immigrant Women in the United States," *Culture, Medicine and Psychiatry* 14, no. 4 (December 1990): 495-512.

²¹²Jieun Lee, Amy Wachholtz, and Keum-Hyeong Choi, "A Review of the Korean Cultural Syndrome Hwa-Byung: Suggestions for Theory and Intervention," *Asia Taepyongyang Sangdam Yongu* 4, no. 1 (January 2014): 49-64.

experiencing a sense of guilt, shame, and mistrust, and the exacerbation of their trauma symptoms.²¹³ It is particularly common for sexual trauma survivors to experience victim blaming and minimization from insensitive professionals in such systems.²¹⁴ It is thus an essential task to discern the abusive aspects of today's social structures and demand sociocultural changes that sensitively consider the complex contextual background of trauma survivors.

Trauma and Genocide

Genocide is one of the most salient examples of massive trauma derived from distorted sociocultural contexts. Genocide is defined as “any of the following acts committed with intent to destroy, in whole or in part, a national, ethnic, racial or religious group, as such”

- a) Killing members of the group;
- b) Causing serious bodily or mental harm to members of the group;
- c) Deliberately inflicting on the group living conditions calculated to bring about its physical destruction in whole or in part;
- d) Imposing measures intended to prevent childbirth within the group;
- e) Forcibly transferring children of the group to another group.²¹⁵

Though the UN Convention on the Prevention and Punishment of the Crime of Genocide has developed tools for preventing mass violence and punishing perpetrators of genocidal crimes, genocide continues throughout the world, for example, Armenian genocide (1915-1917), the Holocaust (1933-1945), and genocides in Korea (1910-1945), Cambodia (1975-1979), Bosnia (1992-1995), Rwanda (1994), Sudan Darfur (2003-2009) and others. In those areas, there were prevalent, horrendous traumatic events, such as

²¹³Rebecca Campbell, “Rape Survivors’ Experiences with the Legal and Medical Systems: Do Rape Victim Advocates Make a Difference?” *Violence against Women* 12, no. 1 (January 1, 2006): 30–45.

²¹⁴Laura Hensley Choate, “Sexual Trauma: An Ecological Approach to Conceptualization and Treatment,” in *Trauma Counseling: Theories and Interventions*, ed. Lisa Lopez Levers (New York: Springer Publishing Company, 2012), 116–31.

²¹⁵United Nations, “Convention on the Prevention and Punishment of the Crime of Genocide,” (December 9, 1948), Article II, accessed August 10, 2016, <http://www.un-documents.net/cppcg.htm>.

mass murder, extermination, enslavement, imprisonment, torture, rape, sexual slavery, and persecution. Such genocidal crimes, mostly rooted by racial groupthink, have developed collective, systemic violence for ethnic cleansing.²¹⁶

For example, the genocide of the Jews, known as the Holocaust, was “a highly rational project” supported by social systems, dehumanizing another race and using “it” as an instrument for the betterment of Nazi Germany.²¹⁷ Motivated by the fantasy of a “pure, objective” rationality of natural science intertwined with an interpretation of social Darwinism applied to racial classification, Hitler’s goal was to re-create his picture of a “Garden of Eden” which consisted of creating a pure race by exterminating inferior races (Slavic and Poles), racial enemies (Gypsies and Jews), and enemies of true Aryanism (Communists and liberal democrats).²¹⁸ The Jews, wrongly devalued as inferior, were considered by the Nazis to be the “evils” that hindered the recreation of “Eden” for the Aryans. Nazis thus first prohibited the Aryans from having sexual relationships or marriages with the Jews, but they soon restricted the rights of Jews as citizens and attempted to resettle them in particular neighborhoods, and eventually attempted the systematic extermination of the whole race. Every aspect of the Nazi government participated in this genocidal system; the routine activities of genocide became normalized to the point that people no longer recognized the horror of what they were doing.²¹⁹ The Nazi society became “a genocidal state.”²²⁰

²¹⁶Pells and Treisman, “Genocide, Ethnic, Conflict, and Political Violence,” 390–91.

²¹⁷McFadyen, *Bound to Sin*, 83.

²¹⁸Ibid., 85. See Adolf Hitler, “Victory Speech” of July 16, 1941.

²¹⁹McFadyen, *Bound to Sin*, 96.

²²⁰Michael Berenbaum, Arnold Kramer, and United States Holocaust Memorial Museum, *The World Must Know: The History of the Holocaust as Told in the United States Holocaust Memorial Museum* (Boston: United States Holocaust Memorial Museum, 2005), 103.

In such an impingent social environment, abnormal responses are normal. Facing the genocide, according to Frankl, the first reaction of the Jews was “shock.”²²¹ Most of them were frightened and stunned in the midst of incomprehensible oppression, such as brutal punishment, torture, and executions. In this stage, they felt horror and disgust for the evildoers and pity for those who suffered and died. As suffering and dying continued and became more common, however, these emotions disappeared and “apathy” took over.²²² During this second stage, people became less and less responsive to the suffering, pain, and death of others. Such emotional deadness was a “very necessary protective shell,” keeping one’s distance from emotional disturbances.²²³ As they remained in such a dehumanizing environment, they lost their sense of the self; such a person no longer struggled to hold onto self-respect, personal value, and inner freedom.²²⁴ This illustrates that people in the midst of a life-threatening system of oppression lose their concern for and trust of humanity and will to live, and as a result, they are passively subjugated to suffering, without a hope of improvement in the future. Even after liberation, unfortunately, these symptoms often remained, and as a result, survivors often failed to experience a new state of freedom and suffered from a felt sense of despair and lost a sense of the meaning of life—in Frankl’s word, they experienced “depersonalization.”²²⁵ When they reached this state, they lost the will to live. They made no effort to find food, to warm themselves, and to avoid being harmed.²²⁶ Losing the will

²²¹Frankl, *Man’s Search for Meaning*, 8.

²²²*Ibid.*, 23.

²²³*Ibid.*

²²⁴*Ibid.*, 50.

²²⁵*Ibid.*, 88. Of course, some people can survive and thrive even in the midst of such an impingent environment. I will discuss those cases in chap. 4

²²⁶Herman, *Trauma and Recovery*, 84.

to live has been called a state of “absolute passivity.”²²⁷ They are like the “living dead.”²²⁸

For those who are exposed to such genocide, trauma is nearly universal, very much ongoing, and embedded in their daily lives, relationships, and environments. They suffer from PTSD symptoms, such as insomnia, flashbacks, nightmares, and extreme psychosomatic reactions.²²⁹ For those survivors who remain in the areas where the atrocities were perpetrated, a challenge is that everyday encounters and objects can serve as a constant reminder of the past.²³⁰ The past events for them are not considered as mere past events but instead have come “to be incorporated through an individual’s thoughts and actions into the temporal structure of relationships,” causing the destruction of social relations within families and the community.²³¹ They also suffer from multidimensional levels of loss by genocide: the loss of home, health, language and culture; the loss and separation from family and friends; the loss of identity, dignity, purpose and opportunity in life; the loss of hope of justice, safety, protection and the hope of a life without fear.²³² This condition of massive losses causes ongoing struggles for survival and the feelings of disempowerment and abandonment. Moreover, even after the trauma event, they are frequently exposed to insensitive legal systems, poverty, difficulties in accessing health

²²⁷Herman, *Trauma and Recovery*, 84.

²²⁸*Ibid.*

²²⁹W. De Loos, “Psychosomatic Manifestations of Chronic PTSD,” in *Posttraumatic Stress Disorder: Etiology, Phenomenology, and Treatment*, ed. Marion E. Wolf and A. D. Mosnaim (Washington, DC: American Psychiatric Publishing, 1990), 94–105; W. W. Eaton, J. J. Sigal, and M. Weinfeld, “Impairment in Holocaust Survivors after 33 Years: Data from an Unbiased Community Sample,” *The American Journal of Psychiatry* 139, no. 6 (June 1982): 773–77.

²³⁰Kirily Pells, “‘Keep Going Despite Everything’: Legacies of Genocide for Rwanda’s Children and Youth,” *International Journal of Sociology and Social Policy* 31, nos. 9-10 (September 6, 2011): 594–606.

²³¹Veena Das, “The Act of Witnessing: Violence, Poisonous Knowledge, and Subjectivity,” in *Violence and Subjectivity*, ed. Veena Das et al. (Oakland, CA: University of California Press, 2000), 220.

²³²Nimisha Patel, “Clinical Psychology: Reinforcing Inequalities or Facilitating Empowerment?” *The International Journal of Human Rights* 7, no. 1 (March 1, 2003): 16-39.

services and care, thus some of them say: “this is worse than the torture I suffered before” or “this is torture in an open prison, there are no four walls, but we are imprisoned and treated like criminals, not even like humans.”²³³ In short, trauma becomes a common language of those survivors in genocidal contexts.

Unfortunately, the trauma of one generation pathologically impacts subsequent generations. Vamik Volkan explains how trauma can be passed on for generations:

Transgenerational transmission is when an older person unconsciously externalized his traumatized self onto a developing child’s personality. A child then becomes a reservoir for the unwanted, troublesome parts of an older generation. Because the elders have influence on a child, the child absorbs their wishes and expectations and is driven to act on them. It becomes the child’s task to mourn, to reverse the humiliation and feelings of helplessness pertaining to the trauma of his forebears. . . . Because the traumatized self-images passed down by members of the group all refer to the same calamity, they become part of the group identity, and ethnic marker on the canvas of the ethnic tent.²³⁴

Studies have found that the trauma of survivors is often directly and indirectly transmitted to the next generation.²³⁵ Some children of holocaust victims have lived out aspects of their parents’ trauma as if they had directly experienced them. Such a case is often called a “direct specific transmission” of trauma.²³⁶ These children feel that the holocaust was the most critical event that has impacted their lives, though it happened before their births.²³⁷ That event shapes their worldview: they internalize their parents’ representation of the world and thus describe the world as “chaotic and unpredictable,

²³³Patel, “Clinical Psychology, 18.

²³⁴Vamik Volkan, *Blood Lines: From Ethnic Pride to Ethnic Terrorism* (New York: Farrar Straus & Giroux, 1997), 43, 45.

²³⁵S. Schwartz, B. P. Dohrenwend, and I. Levav, “Nongenetic Familial Transmission of Psychiatric Disorders? Evidence from Children of Holocaust Survivors,” *Journal of Health and Social Behavior* 35, no. 4 (December 1994): 385–402; Micha Weiss and Sima Weiss, “Second Generation to Holocaust Survivors: Enhanced Differentiation of Trauma Transmission,” *American Journal of Psychotherapy* 54, no. 3 (July 1, 2000): 372-85; Samuel Juni, “Second-Generation Holocaust Survivors: Psychological, Theological, and Moral Challenges,” *Journal of Trauma & Dissociation* 17, no. 1 (January 2016): 97–111.

²³⁶Weiss and Weiss, “Second Generation to Holocaust Survivors,” 373.

²³⁷Harvey A. Barocas and Carol B. Barocas, “Wounds of the Fathers: The Next Generation of Holocaust Victims,” *International Review of Psycho-Analysis* 6, no. 3 (1979): 331–40.

lacking any moral authority, and portray trauma itself as ultimately unrepresentable and unexplainable beyond the scope of language.”²³⁸ They thus frequently repeat aspects of their parents’ trauma, including the lack of memory and incoherent narratives, as modeled by their parents.²³⁹ Furthermore, some of them share the tormenting memory of the Nazi camps in their dreams, waking up with terrifying nightmares of persecution, barbed wire, gas chambers, firing squads, torture, mutilation, escaping from soldiers and fears of extermination.²⁴⁰ They often feel a sense of abandonment, depression and guilt derived from their parents’ psychological states.²⁴¹ Researchers agree that the large number of children of survivors who suffer from distrust, fear, and many other psychological and functional difficulties is a clear indication of social pathology transmitted from the first generation to the next.²⁴² In these cases, the trauma itself, therefore, appears to be at least partially transmitted from the survivors to their children.

The children of survivors also suffer from an indirect impact of the trauma of their parents, so-called “indirect general transmission.”²⁴³ In this case, trauma itself is not transmitted, but the psychological damage experienced by parents because the trauma of the genocide hinders them from providing the “good-enough” parenting necessary for the healthy development of children. In many cases, survivors have severely impaired capacities for empathy, so they fail to properly respond to their children’s pain and

²³⁸David Janzen, *The Violent Gift: Trauma’s Subversion of the Deuteronomistic History’s Narrative* (London: T&T Clark, 2013), 34.

²³⁹Marianne Hirsch, “Marked by Memory: Feminist Reflections on Trauma and Transmission,” in *Extremities: Trauma, Testimony, Community*, ed. Nancy K. Miller and Jason Tougas (Chicago: Illinois University Press, 2002), 71–91.

²⁴⁰Barocas and Barocas, “Wounds of the Fathers,” 331.

²⁴¹Ilany Kogan, *The Cry of Mute Children: A Psychoanalytic Perspective of the Second Generation of the Holocaust* (London: Free Association Books, 1995), 6–28.

²⁴²Helen Epstein, *Children of the Holocaust: Conversations with Sons and Daughters of Survivors* (London: Penguin Books, 1979), 108. See also Juni, “Second-Generation Holocaust Survivors,” 97–111.

²⁴³Weiss and Weiss, “Second Generation to Holocaust Survivors,” 373.

suffering, leaving their children feeling abandoned, isolated, and empty.²⁴⁴ This lack of empathy in turn may cause various pathological symptoms to develop, as discussed previously. The survivor parents are also unable to mourn their suffering, because of the emotional numbness that resulted from suffering too many losses.²⁴⁵ In such cases, their children unconsciously feel the pressure of “invisible loyalties” to compensate for the losses of parents by satisfying all their needs, which is not possible.²⁴⁶ The inevitable failure to satisfy this impossible expectation can lead children to become frustrated and to suffer from guilt, shame, low self-esteem, and a limited capacity for intimate relationship.²⁴⁷ Moreover, children of survivors often react with rage, which seems to be internalized and suppressed from their relationships with the survivor parents, in situations that are relationally similar to what they experienced from the parents.²⁴⁸ In other words, the massive sociocultural trauma of the first generation not only transmits its impact to the next generation, but also causes an insecure family environment in which the children may become vulnerable to further relational conflict.²⁴⁹

The present chapter has briefly introduced three distinct approaches to trauma, each of which emphasizes different aspects, so that together, we are given a better

²⁴⁴Weiss and Weiss, “Second Generation to Holocaust Survivors,” 378.

²⁴⁵*Ibid.*, 374.

²⁴⁶The term “invisible loyalty” refers to a silent oppression for a child to compensate for the loss of their parents or grandparents. For the formation and intergenerational structuring of loyalties, see Ivan Boszormenyi-Nagy and Geraldine Spark, *Invisible Loyalties: Reciprocity in Intergenerational Family Therapy* (New York: Routledge, 2013), 37–52.

²⁴⁷Weiss and Weiss, “Second Generation to Holocaust Survivors,” 374–76.

²⁴⁸*Ibid.*, 376.

²⁴⁹Studies of direct or indirect transmission of trauma between generations of course do not mean that all family members of the survivors undergo secondary traumatization. See Marinus H. Van Ijzendoorn, Marian J. Bakermans-Kranenburg, and Abraham Sagi-Schwartz, “Are Children of Holocaust Survivors Less Well-Adapted? A Meta-Analytic Investigation of Secondary Traumatization,” *Journal of Traumatic Stress* 16, no. 5 (October 2003): 459–69. Admittedly, evidence is insufficient to prove the cause-and-effect relationship of trauma transmission from generation to generation. However, given the number of pathological cases frequently found among children and grandchildren of trauma survivors, it is undeniable that there are meaningful correlations between traumatized parents and that of their children.

understanding of the effects of trauma. However, each approach needs to be evaluated from a Christian standpoint, because those approaches have largely been developed without reference to God and his revelation. Since God created the universe (Gen 1:1) and governs everything (e.g., Ps 135:6; Isa 43:13; 45:9-10; 46:10), any knowledge devoid of God's revelation is insufficient to provide the holistic picture needed. It is thus necessary to consider how to embrace and reconstruct the valid insights of those naturalistic approaches according to Christianity.

CHAPTER 3

CHRISTIAN REFLECTIONS AND CHRISTIAN PSYCHOPATHOLOGY OF TRAUMA

This chapter will provide a Christian framework for understanding and treating trauma. The present section will first present reflections on the contributions and limitations of each modern psychological perspective from a Christian viewpoint, and second, introduce “Christian perspectivalism” as a way of thinking that comprehensively embraces diverse perspectives in modern psychology under the primary authority of God’s special revelation. Based on this epistemological method, I will construct a Christian psychopathology of trauma, which attempts to take into account every aspect of human life, including sin, biopsychosocial disorder, and suffering.¹

Christian Reflections

God created human beings in his image (Gen 1:26). The image of God (*Imago Dei*) includes, in a broad sense, multi-dimensional aspects of human beings, such as biological, psychological, relational, sociocultural, and ethicospiritual orders.² From this broad understanding of Christian anthropology, each approach to trauma in modern psychology can be constructively, but critically accepted.

Neurobiological Order

As seen in the previous chapter, neurobiological research has contributed a

¹The division of these three categories is developed from Eric L. Johnson, *God and Soul Care* (Grand Rapids: InterVarsity Press, forthcoming).

²Johnson nicely recapitulates the concepts of *Imago Dei* as formal resemblance to God (biopsychosocial wholeness), holy resemblance to God (holiness), and reflection of God’s glory (active receptivity and participation). Johnson, *God and Soul Care*, chap. 3.

great deal to trauma study, focusing on such diverse issues as a trauma survivor's physiological symptomatology, drug abuse, addiction, violence, attachment, and social interactions.³ Johnson calls this aspect of human nature the "biological order," and explains that it provides "the material *platform*" for all higher orders.⁴ In other words, without the basic organization of the neurobiological order, it would not be possible to develop properly functioning psychological, relational, ethical, and spiritual orders. Therefore, neurobiological study and its applications must be included in a therapeutic understanding of human trauma.

From a Christian standpoint, this natural scientific understanding serves to increase human knowledge of God's creation, particularly the human body. Since human beings are created to have a material existence, it is legitimate, and even necessary, to seek knowledge of embodied human nature through the means of neurobiology. The more thorough our neurobiological knowledge of human nature is, the more we will understand the physical/biological orders created by God, which in turn enriches our understanding of the holistic nature of humanity.

By itself, however, the neurobiological perspective has several limitations. First, this model is not sufficient to address the complexity of trauma. In fact, scholars have recently begun integrating neurobiological research with a consideration of psychosocial dynamics, such as the influence of childhood trauma experiences, attachment styles, and the quality of social interactions.⁵ Nevertheless, those studies are

³Lori Keyser-Marcus et al., "Trauma, Gender, and Mental Health Symptoms in Individuals with Substance Use Disorders," *Journal of Interpersonal Violence* 30, no. 1 (2015): 3–24; Rajita Sinha, "Chronic Stress, Drug Use, and Vulnerability to Addiction," *NYAS Annals of the New York Academy of Sciences* 1141, no. 1 (2008): 105–30; Mary C. McCarthy and Kathryn M. Tchorz, "Addictive Disorders in Trauma Center Patients," in *Addictive Disorders in Medical Populations*, ed. Norman S. Miller and Mark S. Gold (Hoboken, NJ: Wiley-Blackwell, 2010), 181–96; Peter Fonagy, "Early-Life Trauma and the Psychogenesis and Prevention of Violence," *NYAS Annals of the New York Academy of Sciences* 1036, no. 1 (2004): 181–200; Louis J. Cozolino, *The Neuroscience of Human Relationships: Attachment and the Developing Social Brain* (New York: Norton, 2006).

⁴Eric L. Johnson, *Foundations for Soul Care: A Christian Psychology Proposal* (Downers Grove, IL: IVP Academic, 2007), 336.

⁵Some neurobiological research introduces the dynamic of neuroplasticity, indicating the

still primarily focused on the correlation between such factors and embodied functioning, and thus do not address adequately how neurobiology interacts with the other aspects of functioning.

Second, treatment based on this approach runs the risk of falling into an exclusive reliance on medication. Admittedly, medication is an effective therapeutic tool for trauma survivors by helping to restore some neurobiological functioning. Van der Kolk points out that treatment through medication has steadily increased over the past few decades.⁶ For example, antidepressants used in PTSD treatments are helpful in managing trauma symptoms.⁷ Many other medications have proven effective in trauma treatment. But while medication can reduce some physiological symptoms, it cannot fundamentally resolve the damage caused to the brain/soul by trauma. Trauma is more than a bodily symptom. Trauma interventions, thus, need to include broader considerations of other orders.

Psychosocial Order

The psychosocial model emphasizes that a human being is ontologically a self-in-representation and, therefore, the human psyche is shaped by relationship. The emphasis on relationality is deeply compatible with a Christian psychosocial anthropology.⁸ Just as

importance of early relationship with primary caregivers and attachment histories. For example, Bruce D. Perry et al., "Childhood Trauma, the Neurobiology of Adaptation, and 'use-Dependent' Development of the Brain: How 'states' Become 'traits,'" *Infant Mental Health Journal* 16, no. 4 (December 1, 1995): 271–91; Jill L. Kays, Robin A. Hurley, and Katherine H. Taber, "The Dynamic Brain: Neuroplasticity and Mental Health," *The Journal of Neuropsychiatry and Clinical Neurosciences* 24, no. 2 (April 1, 2012): 118–24; Iris-Tatjana Kolassa and Thomas Elbert, "Structural and Functional Neuroplasticity in Relation to Traumatic Stress," *Current Directions in Psychological Science* 16, no. 6 (December 1, 2007): 321–25.

⁶Bessel A. Van der Kolk, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (New York: Viking, 2014), 37.

⁷Major antidepressants used in PTSD are Selective Serotonin Reuptake Inhibitors, Serotonin-Norepinephrine Reuptake Inhibitors, Tricyclic Antidepressants, and Monoamine Oxidase Inhibitors. See Tomko, "Neurobiological Effects of Trauma and Psychopharmacology," 63-70.

⁸Johnson introduces the label "psychosocial" which is described to "encompass the relational and systemic dynamics that contribute to the constitution of the psychological—for example, dyadic relations (especially those within the family) and family and group dynamics and influences, as well as broader, indirect social dynamics, including subcultural, cultural, technological, and global influences." I have no disagreement with this definition, but I divide it into "psychosocial" and "socio-cultural" for the

Father, Son and Holy Spirit exist in the relational dynamic of perfect love and unity, human beings have been created in the image of God to be relational. Human relationality can be understood as relationship with God, relationship with others, and relationship with the self.⁹

First, God created human beings for relationship with himself. God declared through the voice of the prophets that he is *Immanuel*, which means “God with us” (Isa 7:14; Matt 1:23). The Son of God emptied himself, put on human flesh, and made his dwelling among humanity (Phil 2:7; John 1:14). The Spirit of God dwells in the hearts of his people (1 Cor 3:16). God knows each person so intimately as to know the number of hairs on his or her head (Matt 10:30). He is able to know the heart of each person (1 Sam 16:7; Ps 139:23). Even in humankind’s depravity, God has never forsaken us; instead he sent Jesus Christ to bear our sin on the cross and thus reconcile us with him for eternity (Ps 27:10; Mark 10:45; Luke 19:10; John 3:16). God made an eternal covenant with the elect to be their Father and adopt them as his own children.¹⁰ In this way all those who believe cannot be separated from relationship with God (John 1:3). As the psalmist confesses, all human beings long for relationship with God as “the deer pants for streams of water” (Ps 42:1-2). In this sense, Augustine’s confession is legitimate, “for Thou madest us for Thyself, and our hearts [are] restless, unless [they] rest in Thee.”¹¹ This spiritual relationship with God is the most essential part of being image-bearers of God.

purpose of discussing the different impacts of trauma in a disordered relationship and in a distorted socio-cultural environment. For Johnson’s definition, see Johnson, *Foundations for Soul Care*, 338.

⁹Robert W. Kelleman, *Gospel-Centered Counseling: How Christ Changes Lives* (Grand Rapids: Zondervan, 2014), 103–9; Johnson, *Foundations for Soul Care*, 581–84.

¹⁰Gregg R. Allison, *Sojourners and Strangers: The Doctrine of the Church* (Wheaton, IL: Crossway, 2012), 123–32.

¹¹Augustine, *The Confessions of St. Augustine*, ed. Rosalie De Rosset, trans. E. B. Pusey (Chicago: Moody Publishers, 2007), 19.

Second, human beings by nature long for relationships with other humans. Kellemen argues that God created human beings to yearn for a mutually loving connection.¹² God considered it “not good” for man to be alone and created marriage to be a profound relationship bond between a man and a woman (Gen 2:18). After the creation of Adam and Eve, human relationships expanded to include parents and children, siblings, neighbors, and tribes/nations. Through the dynamics of these diverse relationships, human history has been constructed. Some relationships have promoted love, joy, and peace, while others have produced hatred, murder, and even war. The kind of relationships one has experienced in the past shapes one’s relational history.

Moreover, as Christians enter into union with Christ, they enter into relationship with the Church. Christians are part of the body of Christ; they are united by the Spirit of God and given one hope and one faith; they are called to build up the body of Christ by equipping one another for the work of service, being fitted and held together, speaking the truth in love, and in interdependence, with each person fulfilling his or her role (Eph 4:3-16). Allison describes this relationship as a “covenant relationship with one another” that naturally follows entrance into “the new covenant relationship with God through Christ.”¹³ Through Christ’s merit, believers are accepted, saved, and beloved children of God. At the same time, they become brothers and sisters in Christ. In this covenant relationship, they worship and serve God together from this life into eternity.¹⁴

Third, through relational experiences with God and others, human beings discover their own identities and roles. Human beings, alone among God’s creatures, have the ability to reflect on themselves,¹⁵ and they can deepen in their understanding of

¹²Kellemen, *Gospel-Centered Counseling*, 104–5.

¹³Allison, *Sojourners and Strangers*, 124.

¹⁴*Ibid.*

¹⁵Based on this created nature of self-reflection, Kellemen labels a human being as a “self-aware relational being.” See Kellemen, *Gospel-Centered Counseling*, 105.

the self within relationships with God and others. As believers enter into an in-depth relationship with God, they can become more and more aware of their sinfulness, weakness, and finitude, and furthermore, they can see the “true self” declared by God to be saved, forgiven, and beloved, because of Christ’s merit, regardless of their depravity.¹⁶ Also, relationships with others, particularly early primary relationships, significantly shape one’s self structure, including one’s emotional schemas, self-image, implicit memories, and interaction styles.¹⁷ If the Bible is a spiritual mirror through which one can reflect on the self before God, the “Other” can be understood as a psychosocial mirror through which one can discover the self in relationship with others, who are also image-bearers of God.

To summarize, humans are psychosocial beings who discover and develop in relationship with God, others, and the self. This relational dynamic is an essential part of the way God created human beings to be. Thus, secular psychosocial theories can contribute to the development of a comprehensive Christian approach to trauma study. However, they must be evaluated and understood from a Christian perspective. This being said, they provide two positive contributions to a Christian understanding of trauma.

First, this approach helps to demonstrate the necessity of a relational paradigm in human life. As mentioned previously, an individual’s personal story is always intertwined with relationships. If a person fails to get help or protection from those to whom one is attached, the sense of basic trust is shattered; the individual can feel abandoned, shamed, guilty, and doubts others and the world throughout life.¹⁸ In other

¹⁶John Calvin, *Institutes of the Christian Religion* (Peabody, MA: Hendrickson Publishers, 2007), 1.1.1–2.; Johnson, *God and Soul Care*, chap. 15.

¹⁷Johnson, *Foundations for Soul Care*, 507–8.

¹⁸Judith L. Herman, *Trauma and Recovery: The Aftermath of Violence—From Domestic Abuse to Political Terror* (New York: Basic Books, 2015), 51-55.

words, relationship, depending on its quality, can be either a source of trauma or healing. This paradigm can allow people to understand one's hardship in the framework of broader interactions with others, thereby avoiding unfairly attributing all the causes of one's problem to oneself, and leading people to seek a relational intervention.

Second, this approach suggests a possible correlation between a person's relational experience with God and with others. Researchers have studied the *God image* in relation to human attachment, having found that one's attachment style with primary caregivers largely impacts one's implicit, emotional experience with a divine being.¹⁹ Whereas those who have a secure attachment with their caregiver are more likely to develop a secure relationship with God, feeling that God is trustworthy, loving and caring, those who have an insecure attachment tend to develop a distant relationship with God, experiencing God as aloof, indifferent, and displeased.²⁰ Empirical studies further indicate that one's intellectual knowledge of God shows no correlation with human attachment experiences. Rather, such intellectual knowledge appears to compensate for insecure human attachment, at an explicit level, while implicitly, emotional experiences of God have been severely distorted by poor human attachments.²¹ In other words, those who have been raised in a traumatic attachment environment can cognitively understand God's love and grace, but may fail to emotionally experience them. Such correlations

¹⁹In contrast to one's *God concept*, which is one's cognitive, rational understanding of God, *God image* refers to an affective, experiential understanding of God. Glendon L. Moriarty, Louis Hoffman, and Christopher Grimes, "Understanding the God Image through Attachment Theory," *Journal of Spirituality in Mental Health* 9, no. 2 (2006): 43–56; Ana-Maria Rizzuto, *The Birth of the Living God: A Psychoanalytic Study* (Chicago: University of Chicago Press, 1979); Jacqueline L. Noffke and Todd W. Hall, "Attachment Psychotherapy and God Image," in *God Image Handbook for Spiritual Counseling and Psychotherapy: Research, Theory, and Practice*, ed. Glendon Moriarty and Louis Hoffman (Binghamton, NY: Haworth Pastoral Press, 2007), 57–78.

²⁰The positive correlation between a secure attachment to parents and that of God was true for some individuals, but others sometimes compensated by developing a secure attachment to God. Further studies may be needed to discern what factors cause the difference. See Noffke and Hall, "Attachment Psychotherapy and God Image," 59–66; Lauren E. Maltby and Todd W. Hall, "Trauma, Attachment, and Spirituality: A Case Study," *Journal of Psychology & Theology* 40, no. 4 (2012): 302–12.

²¹T. W. Hall et al., "Attachment to God and Implicit Spirituality: Clarifying Correspondence and Compensation Models," *Journal of Psychology and Theology* 37, no. 4 (2009): 227–44.

show that the quality of human relationship one experiences early in life has a significant influence on one's relationship with God.

However, from a Christian standpoint, this psychosocial perspective has two significant limitations. First, secular psychosocial theorists do not seriously consider the axiological priority of a person's relationship with God. According to attachment research, as mentioned above, one's early relationship with primary caregivers becomes a platform for future relationships. The danger of the secular version of this paradigm is that it focuses on the quality of human relationship without reference to one's relationship with God. Secular researchers hold the naturalistic assumption that God-image is a mere psychological representation that is nothing more than a projection on to the universe and based on one's early attachment experiences; they, therefore, miss the most important relationship of life, each individual's relationship with God.²² They do not acknowledge that God is a real person to be experienced first-hand. This is a huge loss in terms of human understanding, because without the priority of one's relationship with God, human beings are unable to understand the ultimate end of their existence, faithful ways of life, and the means of ethical and spiritual growth; they also cannot experience God's grace, love, and healing in Christ.

From a Christian perspective, one's relationship with God is ultimately more important than one's relationship with other humans. A relationship with God provides people with means powerful enough to overcome the worst impact of disordered human relationships and to change their relational style. God makes his people to "lie down in green pastures and lead them beside the quiet water; He restores their souls and guides

²²For example, Jacques Janssen, Joep De Hart, and Marcel Gerardts, "Images of God in Adolescence," *The International Journal for the Psychology of Religion* 4, no. 2 (1994): 105–21; Leslie Francis, Harry Gibson, and Mandy Robbins, "God Images and Self-Worth Among Adolescents in Scotland," *Mental Health, Religion & Culture* 4, no. 2 (2001): 103–8; Rizzuto, *The Birth of the Living God*. For the critique against to these atheistic view, see Kari O'Gardy and P. Scott Richards, "Theistic Psychotherapy and the God Image," in *God Image Handbook for Spiritual Counseling and Psychotherapy: Research, Theory, and Practice*, ed. Glendon Moriarty and Louis Hoffman (Binghamton, NY: Haworth Pastoral Press, 2007), 183–209.

them in the paths of righteousness” (Ps 23:2-3). Though human parents may forsake their children, God never abandons them (Ps 27:10). In Christ, God shows his everlasting love for his people and leads them to the light, transforming their lives (John 3:16-21). God is “greater than all; and no one can snatch them from his hand” (John 10:29). In other words, God’s children can experience with him the most secure and sincere relationship.

Thus, one’s relationship with God is, and should be, the most decisive factor in shaping one’s self-worth, self-image, and relational style. Emphasizing the declarative aspect of Christ’s salvation, Johnson explains that God’s declaration regarding an individual in Christ is the primary source of identifying the true self in relationship. According to Johnson, God reappraises believers on the basis of Christ’s life, death, resurrection, and ascension. His declaration, thus, “*establishes* their good and beauty by pronouncement, and announcing what is now true of all believers since they are in Christ. As a result, believers are already considered by God to be as loving, patient, kind, humble, good, and gentle as Jesus Christ is” (emphasis in original).²³ This new self is the true identity of each believer in relationship with God (2 Cor 5:17). The new self, having faith in Christ, then enters into communion with God. John Piper says, “God himself took the initiative to be reconciled to his enemies. He sent his Son, Jesus Christ, to die in our place and bear the curse that we deserved from God. . . . Because God gave Christ as our substitute, we can be reconciled to God and enjoy peaceful communion with him.”²⁴ Communion with God, Piper continues, is “the end for which we were created” and we are glorifying God not by “something we do *after* communing with him, but *by* communing with him”²⁵ (emphasis in original). Nothing in all the creation will be able to

²³Johnson, *God and Soul Care*, chap. 15.

²⁴John Piper, “Reading the Bible in Prayer and Communion with God,” in *Understanding Scripture: An Overview of the Bible’s Origin, Reliability, and Meaning*, ed. Wayne Grudem, C. John Collins, and Thomas R. Schreiner (Wheaton, IL: Crossway, 2012), 47.

²⁵*Ibid.*, 46.

break this communion with him (Rom 8:36-39). This communion is for his children the most secure attachment relationship imaginable, thereby providing them with the greatest source of developing a healthy relational self-structure and providing a core kind of healing from their relational trauma. In this sense, the attachment-focused paradigm, must be revised in terms of the priority of one's attachment relationship with God.

This critique, however, does not negate the impact of early human attachment. The Christian psychological approach admits its significance, but believes that God is more important than any other person and that one's relationship with God actually lies mysteriously at the core of all other relationships. In other words, if one enters into relationship with God and God changes one's heart and life by the Holy Spirit, then from there, a new relationship with other people may slowly grow as well. Jesus says that the great and foremost commandment is to love God, and the second is to love neighbors (Matt 22:38-39). If the love of God is planted in one's heart, it should follow that it bears the fruit of the love of neighbor. Therefore, a Christian psychological approach takes seriously the impact of relationship with other humans, especially one's earliest attachment relationships, but at the same time especially prioritizes developing a healthy relational experience with God. In this sense, Christian psychology presupposes the spiritual relationship with God behind human therapeutic relationships. In fact, many counselees can only emotionally connect to God after they have experienced restorative human relationships. Even in those cases, God is behind their relationships: God is behind the healing whether the change begins with human relationship or begins with God.

Second, the psychosocial paradigm by itself does not attend to sociocultural concerns. The psychosocial model largely focuses on the impact on one's immediate relationships. Trauma, however, is often related to a disordered society and culture in which devaluing stereotypes and antagonistic ideologies exist. In such a society, children, women, those with disabilities, different races and those that are weak are often

marginalized and dehumanized, which often contribute to their traumatic experiences. The psychosocial approach by itself often neglects the influence of such broader contextual issues. As a result, it is necessary to give consideration to the broader context surrounding trauma.

Sociocultural Order

A sociocultural approach addresses the broader context of trauma. We have seen in Chapter two that diverse sociocultural variables have greatly impacted its members' identity and psychosocial functioning. Particularly, the process of "othering" has produced sociocultural prejudice and discrimination in the forms of racism, sexism, genocide, or social oppression, resulting sometimes in collective trauma. Such distortion is far from God's good intended order for human society. Given that the two greatest commandments are to love God and love others (Luke 10:27), a trauma-prone sociocultural system is absolutely contrary to God's design plan for creation. In order to renew society according to God's design plan, so that people are less wounded, it is necessary to discern the sociocultural distortions that exist and attempt to transform them with God's help. In this sense, the sociocultural approach can provide contributions in three ways—though it also has limitations from a Christian perspective.

First, this model sheds light on the fact that trauma is not always an internal problem of an individual, but rather can also be a sociocultural issue. When therapy stays only at an individual level, it is rarely possible to provide proper care for trauma derived from sociocultural oppression, because the problematic social structure still remains unchanged and therefore can keep traumatizing the person. Consequently, the sociocultural model can contribute to a more comprehensive understanding of trauma, by taking into account the contexts of the trauma survivor, and so reduce false shame and guilt.

Second, this model recognizes the importance of the diversity of culture. According to this paradigm, individuals are significantly shaped by their cultural background. A black woman, for example, may feel sickened and enraged when singing a song that says, “wash me and make me whiter than snow,” because the symbol that connects white with the sacred recalls past negative experiences of cultural discrimination that split the gift of being black and what is holy even in religious liturgy.²⁶ The same song, however, may not have any negative implications for a person who is white. If a white counselor approaches this black woman ignoring her cultural background, he may misinterpret her displeasure as a problem with religion or due to something developmental, since white people cannot see the problem. The sociocultural paradigm highlights the importance of considering different cultural perspectives and experiences, which have been often ignored in the past, and thereby facilitates greater multicultural sensitivity.

Third, this model offers a way to interpret the contextual reality of human existence through the lens of a counselee’s cultural perspective. According to this paradigm, an individual’s story is not purely personal, but is always intertwined with a broader context. A full narrative accounting of one’s traumatic wounds should include cultural biases and systematic discrimination and violence. To recall an example, the discourse of a Korean woman who suffered from chronic *Hwa-Byung*²⁷ revealed a distorted system of patriarchy in which women are endlessly forced to sacrifice their lives for the sake of the family, particularity for men, which used to be culturally—but wrongly—interpreted as good. As Mead pointed out, this damage to the self was fostered

²⁶Phillis Isabella Sheppard, *Self, Culture, and Others in Womanist Practical Theology* (New York: Palgrave Macmillan, 2011), 25.

²⁷Sung Kil Min, “Clinical Correlates of Hwa-Byung and a Proposal for a New Anger Disorder,” *Psychiatry Investigation* 5, no. 3 (2008): 125-41; Y. K. Kim, “Won-Haan and Hwa-Zung (Hwabyung)” in *Proceeding of “Hwabyung of Koreans-the Cultural Diagnosis and Treatment,”* ed. The Academy of Korean Studies (Seoul: the Academy of Korean Studies, 1997), 5–17.

by social structure.²⁸ The sociocultural approach can help counselors discern aspects of society that are broken and which groups are marginalized and wounded, in order to facilitate possible change.

Though the ultimate goal of healing according to this paradigm is the reform of social systems and culture in therapeutic ways, it has practical challenges. In reality, counseling usually occurs face-to-face. Even in the case of group counseling, participants are mostly in groups of no more than ten to twelve; more than that is virtually unheard of. Given this limited representation of the population, it seems unrealistic to think that a culture or society can be changed through counseling. At best, then, this model can only provide a better understanding of the role of culture in trauma and perhaps promote greater empathy for the wounded in an oppressive society.

Common Limitations of Secular Approaches

The present study has reviewed contributions and limitations of three major approaches to trauma in modern psychology. Though those perspectives can contribute to understanding trauma more fully by highlighting different aspects of human beings, they have two common, significant limitations from a Christian standpoint.

First, all three approaches—as commonly understood—presuppose a naturalistic worldview. Naturalism is a philosophical movement that uses “the methods of science, evidence, and reason to understand nature and the place of human species within it” which is “skeptical of the postulation of a transcendental realm beyond nature, or of the claim that nature can be understood without using the methods of reason and evidence”²⁹ Modern psychology developed from this naturalistic perspective.³⁰ One

²⁸George Herbert Mead, *Mind, Self, and Society: From the Standpoint of a Social Behaviorist* (Chicago: University of Chicago Press, 2009).

²⁹Paul Kurtz, *Philosophical Essays in Pragmatic Naturalism* (Amherst, NY: Prometheus Books, 1990), 7.

³⁰Johnson, *Psychology & Christianity: Five Views* (Downers Grove: IVP Academic, 2010), 25.

problem of this view is it is reductionistic and ignores any consideration of the supernatural. Naturalists wrongly assume, according to Johnson, that their worldview is universal and its methods are sufficient for exploring all the complexity of human nature and the world; thus, no other methods are considered legitimate means of knowledge.³¹ Vanhoozer also argues that “these modes of viewing the world do not improve our vision but *reduce* it.”³² In the naturalistic paradigm, only the natural is real and the supernatural is not-real. Thus, this worldview has become synonymous with secularism, which excludes religious beliefs and norms from public discourse, including politics and education.³³ As a result, naturalism does not consider the spiritual realm, including sin, evil, and God; its vocabulary only encompass portion of reality, that can be empirically validated—seen, to put in more familiar terms, including human behaviors, words, thoughts, and emotions.³⁴ However, all of those actually extend beyond the natural order. The Scripture encourages readers to look not only at the things that are seen, but also those that are unseen (2 Cor 4:18). At the center of the naturalistic worldview is a human-centered pride that denies the reality of the divine being and a transcendent realm beyond this universe, because the limited and fallen perspective of sinful humanity cannot understand God’s infinite wisdom, which cannot be seen with the spectacles of sensory experience and reason alone, knowing nothing of the “spectacles of faith” (viz., Scripture).³⁵ The truth, however, is that God and supernatural realities exist. It is, then, a

³¹Eric L. Johnson, “Let’s Talk: Embeddedness, Majority-Minority Relations, Principled Pluralism, and the Importance of Dialogue,” *Journal of Psychology & Theology* 40, no. 1 (March 1, 2012): 26–31.

³²Kevin J. Vanhoozer, *The Drama of Doctrine: A Canonical-Linguistic Approach to Christian Theology* (Louisville, KY: Westminster John Knox Press, 2005), 80.

³³Charles Taylor, *A Secular Age* (Cambridge, MA: The Belknap Press of Harvard University Press, 2007), 3.

³⁴Diane Langberg, *Suffering and the Heart of God: How Trauma Destroys and Christ Restores* (Greensboro, NC: New Growth Press, 2015), 31.

³⁵John Calvin, *Institutes of the Christian Religion*, rev. ed. (Peabody, MA: Hendrickson Publishers, 2007), 1.6.1.

more reasonable and faithful conclusion to accept that God and his transcendent reality are beyond unaided human knowledge than that they are unreal.

Second, a thorough-going naturalism cannot provide an ethicospiritual perspective on human life, because they do not assume the supernatural order.³⁶ Some may say that naturalism does account for ethics and spirituality. Indeed, some studies of trauma present a naturalistic version of ethics, and some recent research on trauma has attempted to integrate its treatment with religion.³⁷ Naturalistic ethics, however, tends to collapse when faced with conflicting ethical principles from a different cultural context, because naturalistic ethics are merely principles for regulating social behavior among a culturally-limited community; there can be no absolute ethical standard, such as God's Word. Without acknowledging the God of the Bible as the only true God from the perspective of Christianity, religion or spirituality in general are nothing more than culturally-shared beliefs, values, and practices of a certain people-group. In other words, ethics and religion, according to naturalism, are closer to social phenomena and are not truly ethical or spiritual. In this dissertation, which assumes a Christian worldview, the true ethical order is based on God's word and the true spiritual perspective is to see everything according to God's revelation—that is, to understand the world and human beings as much as possible as God does. Consequently, a secular approach to the neurobiological, psychosocial, and socio-cultural orders are distorted without reference to the ethical and spiritual orders.

³⁶Johnson, *Psychology & Christianity*, 14–22.

³⁷For example, Leanh Nguyen, "The Ethics of Trauma: Re-Traumatization in Society's Approach to the Traumatized Subject," *International Journal of Group Psychotherapy* 61, no. 1 (January 2011): 26–47; Patricia J. Bartzak, "Moral Injury Is the Wound: PTSD Is the Manifestation," *Medsurg Nursing: Official Journal of the Academy of Medical-Surgical Nurses* 24, no. 3 (June 2015): 10–11; Yael Israel-Cohen et al., "Religiosity as a Moderator of Self-Efficacy and Social Support in Predicting Traumatic Stress among Combat Soldiers," *Journal of Religion and Health* 55, no. 4 (January 2016): 1160–71; Christian Gostečnik et al., "Trauma and Religiousness," *Journal of Religion and Health* 53, no. 3 (June 2014): 690–701; Cari Jo Clark et al., "Trauma-Sensitive Yoga as an Adjunct Mental Health Treatment in Group Therapy for Survivors of Domestic Violence: A Feasibility Study," *Complementary Therapies in Clinical Practice* 20, no. 3 (August 2014): 152–58; Kathleen Brewer-Smyth and Harold G. Koenig, "Could Spirituality and Religion Promote Stress Resilience in Survivors of Childhood Trauma?" *Issues in Mental Health Nursing* 35, no. 4 (April 2014): 251–56.

Therefore, a naturalistic approach is inadequate for understanding human life, including trauma, though the research done by those who hold to naturalism have surely provided humanity with valuable information. What, then, would be a Christian way of interpreting these orders that avoids reductionism and takes God’s revelation seriously?

Christian Perspectivalism

This section will present Christian perspectivalism as a Christian psychological way of thinking that comprehensively embraces diverse perspectives under the primary authority of God’s revelation. This discussion will be an epistemological preparation for reconstructing a Christian version of the psychopathology of trauma.

Widely known from the work of Friedrich Nietzsche, perspectivalism—in a *secular* form—is generally understood as the fact that each person has his or her own unique perspective from which to interpret the world, and thus countless different interpretations can arise.³⁸ The Nietzschean concept of perspectivalism asserts that perspectival truth is plastic, and therefore all perspectives are valid. Since this paradigm accepts a plurality of fundamentally different interpretations of an object, some of which may contradict, it is impossible to determine which view is definitively right or wrong, so that no single way of seeing the world can be taken as absolutely true.³⁹ This understanding thus inevitably falls into radical relativism.

In contrast, a *Christian* perspectivalism presupposes the absolute truth of the infinite God. Since God created everything (Gen 1:1) and governs everything in heaven and on earth from the standpoint of eternity (e.g., Ps 135:6; Isa 43:13; 45:9-10; 46:10), nothing is outside of God’s knowledge (1 John 3:20).⁴⁰ God not only knows all actualities

³⁸Richard Rorty, *Philosophy and the Mirror of Nature* (Princeton, NJ: Princeton University Press, 1981), 369-70; Friedrich Nietzsche, *The Will to Power*, trans. Walter Kaufmann and R. J. Hollingdale (New York: Vintage Books, 1968), 481.

³⁹Richard Schach, *Nietzsche* (New York: Routledge, 1985), 61.

⁴⁰Herman Bavinck, *Reformed Dogmatics*, ed. John Bolt (Grand Rapids: Baker Academic,

but also all possibilities from his infinite perspective (Ps 139:1-2, 16).⁴¹ God knows all that is and all that could be. God's knowledge in this sense is *omniperspectival*. In other words, God's infinite perspective embraces all created perspectives, and his omniperspectival knowledge is the entire Truth.

Unlike God, however, human knowledge is always limited by one's perspective, time, and location. Finite human beings can never understand all that God knows. Only God fully knows the Truth, because God is the Truth (John 14:6). Our finitude, however, does not mean that human knowledge is fallacious or that humans cannot obtain the Truth by their abilities given from God. Augustine argues that God's people can and should learn the order of the creation not only from biblical revelation but also from reason and experience. It is a misinterpretation of the Bible, according to Augustine, if an individual denies the ways of knowing based on rationality and experience.⁴² John Calvin also concurs with Augustine's view:

Whenever we come upon these matters in secular writers, let that admirable light of truth shining in them teach us that the mind of man, though fallen and perverted from its wholeness, is nevertheless clothed and ornamented with God's excellent gifts. IF we regard the Spirit of God as the sole fountain of truth, we shall neither reject the truth itself, nor despise it wherever it shall appear, unless we wish to dishonor the Spirit of God. . . . These men whom Scripture call "natural men" were, indeed, sharp and penetrating in their investigation of inferior things. Let us, accordingly, learn by their example how many gifts the Lord left to human nature even after it was despoiled of its true good.⁴³

2011), 199. Here, God's knowledge is not reduced to propositions. His knowledge includes all intellectual, emotional, and volitional knowledge from eternity to eternity.

⁴¹Regarding God's knowledge that sees everything simultaneously at once in their totality, see also Louis Berkhof, *Systematic Theology* (Grand Rapids: W.B. Eerdmans Pub. Co., 1996), 71-74; Wayne A. Grudem, *Systematic Theology: An Introduction to Biblical Doctrine* (Grand Rapids: Inter-Varsity Press ; Zondervan Pub. House, 1994), chap. 12.

⁴²Augustine, *The Literal Meaning of Genesis*, trans. John Hammond Taylor (New York: Newman Press, 1982), 2:42-43.

⁴³Calvin, *Institutes of the Christian Religion*, 2.2.15.

Thus, human knowledge of neurobiological structure and activity, psychological and relational dynamics, and social and cultural influence ought not to be considered unbiblical, even when their articulation has significant limitations due to worldview distortions, as discussed in the previous chapter. Christian perspectivalism stresses that one's limited knowledge can be complemented by other perspectives.⁴⁴ Since each perspective is valid and entails some aspects of true knowledge from the perspectival standpoint, people can get closer and closer to the Truth by mutual dialogue with different views.

Some scholars criticize this concept of perspectivalism for seeming to make human subjective experience matter more than God's objective revelation in Scripture.⁴⁵ Such critics, however, would be confusing Christian perspectivalism and a philosophical concept of perspectivalism. Some perspectivalists, even in Christianity, use the term as it is used in epistemology. They argue that each domain of diverse disciplines, such as physiology, psychology, and theology, is distinct, so there would be no epistemological conflict between different domains; if a conflict occurs, it is because an individual makes a category error to oppose what is claimed in another, distinct domain.⁴⁶ In reality, however, this paradigm only covers up the conflict by taking a pragmatic interpretation of it or by considering the conflicted views as merely complementary ideas in distinct

⁴⁴John M. Frame, "A Primer on Perspectivalism," in *John Frame's Selected Shorter Writings* (Phillipsburg, NJ: P & R Publishing, 2014), 1:15.

⁴⁵Some scholars, like Paul M. Elliott and Russel D. Kosits, criticize perspectivalism because they assume that this view runs a risk of falling into relativism and missing Divine revelation. Paul M. Elliott, *Christianity and Neo-Liberalism: The Spiritual Crisis in the Orthodox Presbyterian Church and Beyond* (Unicoi, TN: The Trinity Foundation, 2005), chap. 8; Russell D. Kosits, "Deeply Engaged and Strongly Perspectival? The Impasse in the Psychology-Christianity Dialogue and Its Missional Resolution," *Perspectives on Science & Christian Faith* 65, no. 3 (September 2013): 163–78. However, they seem to fail to distinguish the Christian perspectivalism from the perspectivalism of Nietzsche. The foundation of the Christian perspectivalism in this dissertation, followed by Frame, is God's absolute knowledge and lordship.

⁴⁶C. Stephen Evans, *Preserving the Person: A Look at the Human Sciences* (Vancouver: Regent College Publishing, 1994), 108-10.

domains.⁴⁷ It is thus illegitimate, according to this view, to consider that there is a conflict among the diversity of views. This approach runs the risk of undermining the authority of God's revelation and also runs the risk of conveying that God's revelation is simply one limited perspective alongside all the others.

Christian perspectivalism, however, does not devalue the authority of Scripture and biblical truth. Rather, it allows Christians to be humbly aware of human limitations and thereby highlights the dependency of human knowledge on God's perfect knowledge. Given that God is omniperspectival, all human knowledge is subordinated to the authority of God's knowledge. Thus, any human perspective, including philosophy, psychology, and science, should be reinterpreted and revised through the lens of biblical revelation. John Frame nicely articulates this point:

A biblical epistemology will also acknowledge these three elements. Secular epistemologies have found it difficult to relate sense experience, reason, and feelings in their accounts of human knowledge. They have also been perplexed by the relation of the subject (the knower), the object (what the knower knows), and the norms or rules of knowledge (logic, reason, etc.) In Scripture, sense experience (as in 1 John 1:1-3) presents us with the truth. But that truth must be understood in the light of God's norms, his verbal revelation. And the knower must not resist the truth. He or she must be in proper shape to receive it (Rom.1). So God has placed the knowing subject into fruitful contact with the objects of knowledge, with the mediation of God's revealed norms for knowledge, particularly the primacy of his revelation. Here the "object" is the world as God has made it and controls it; the norm is God's authoritative revelation; and the subject is the person who lives in the face of God. Sense experience connects us with the world, but only if the self is able to make such connections governed by God's word. So the three aspects of knowledge correspond to the attributes of God's lordship. The object is the world as God's control has made it and maintained it. The norm is God's authority for human knowledge. And the subject is the knower, standing in the presence of God. These three aspects of knowledge are perspectival. You can't have one without the others, and with each, you will have the others. Every item of true human knowledge is the application of God's authoritative norm to a fact of creation, by a person in God's image. Take away one of those, and there is no knowledge at all.⁴⁸

⁴⁷Evans, *Preserving the Person*, 111.

⁴⁸Frame, "A Primer on Perspectivalism," 14–15. Frame names his concept of perspectivalism as "triperspectivalism." Regarding his understanding of perspectivalism, John M. Frame, *The Doctrine of God* (Phillipsburg, NJ: P & R Publishing, 2002), 213; John M. Frame, *Systematic Theology: An Introduction to Christian Belief* (Phillipsburg, NJ: P & R Publishing, 2013), 1109-12; Frame, "A Primer on Perspectivalism."

In other words, Christian perspectivalism is positive toward the absolute truth of God but is resistant to dogmatic, rigid theories based on one limited human perspective. It does not eliminate the distinction between true and false; rather it presumes divine absolutism. However, all finite human perspectives are approached humbly and openly in confidence that together—in dialogue—they yield the closest approximation to the omniperspective of God of which humans are capable, when guided especially by the light of God’s revelation in Scripture.

In the same vein, Eric Johnson describes such a framework as a “multi-views agenda” within the *principle* of God’s knowledge. While Frame argues for Christian perspectivalism in terms of hermeneutics, Johnson deals with it in terms of Christian psychology. In *Psychology and Christianity: Five Views*, Johnson makes room for engaging in constructive dialogue among diverse views about the relationship between psychology and Christianity.⁴⁹ In this dialogue, he puts the perfect understanding of God as a *telos* that all other insufficient understandings move towards corporately. He recapitulates the agenda of Christian perspectivalism:

Such dialogue . . . promotes humility, by assuming that no single finite perspective can comprehend all the relevant knowledge and understanding. It also promotes love by respecting others and demonstrating that we need each other in order to see things more comprehensively. Finally, it promotes God’s glory by reminding us of our individual insufficiency and encouraging us to seek his fullest understanding in our understanding as fully and faithfully as possible. Our finite and fallen capacities simply require a plurality of approaches to complex topics, while working towards the most comprehensive “reproduction” of God’s perfect understanding we can communally attain.⁵⁰

Johnson calls this view “principled pluralism.”⁵¹ From this paradigm, people can enrich their understanding of complex issues by wisely considering a plurality of approaches, while still holding to the principle that God reveals himself in Scripture.

⁴⁹Johnson, *Psychology & Christianity*.

⁵⁰Johnson, “Let’s Talk,” 29.

⁵¹*Ibid.*, 26–31.

In other words, Christian perspectivalism is based on the honest reflection on the absolute, infinite perspective of God and the fallible, finite perspectives of human beings: it means that one's view is, and must be, dependent on God's revelation and interdependent with other's perspectives. Christian perspectivalism is a humble way of reflecting and exploring a comprehensive understanding through a respectful critique and a constructive dialogue with other perspectives under the authority of God's perfect knowledge and with that knowledge as our goal. Based on this Christian way of knowing, the next section will attempt to provide a Christian psychopathology of trauma that can holistically include all biological, psychorelational, and ethicospiritual orders.

A Christian Psychopathology of Trauma

A Christian psychopathology of trauma presupposes Christian perspectivalism. The Christian view of reality, as presented implicitly in the Bible, is that the universe is created and governed by God but corrupted because of human depravity. All the created orders, disorders, and suffering are included within this universe. Trauma, thus, cannot be fully identified only with a naturalistic approach that negates a spiritual reality or only with a spiritual reductionism that rejects all scientific discoveries. It follows, then, that a comprehensive understanding of a problem like trauma requires a Christian perspectivalistic approach that critically embraces the legitimate findings of neurobiological, psychosocial, and sociocultural studies as within the scope of creation grace, in light of the normative ethicospiritual perspective of the Scripture. This section will present a Christian perspectival approach to trauma that reframes the problem according to the categories of sin, damage, and suffering.⁵²

⁵²The division of these three categories is developed from Johnson, *God and Soul Care*.

Sin

A consideration of sin is the most significant difference between Christian psychopathology and secular views. In contrast to the modern therapeutic culture, which is absent of all language of sin, referring to all psychospiritual disorder solely as illness or disorder, a Christian psychology approach emphasizes that sin is, one way or another, at the root of all psychological problems.⁵³ Sin, according to the Christian worldview, is not merely a harmful or morally wrong behavior; but a comprehensive concept accounting for the depravity and corruption of all humanity. Sin is understood in three dimensions: the state of original sin, sin-acts, and the overarching corruption of “the world.”⁵⁴

First, sin is a condition of human depravity derived from the first sin. After Adam and Eve disobeyed in the garden, the state of all human beings became sinful—“not the way it’s supposed to be.”⁵⁵ The Bible clearly declares that all human beings have disobeyed God and are now alienated from their Creator: God saw “how great the wickedness of the human race had become on the earth, and that every inclination of the thoughts of the human heart was only evil all the time” (Gen 6:5, NIV). “The LORD looks down from heaven on all mankind to see if there are any who understand, any who seek God. All have turned away, all have become corrupt; there is no one who does good, not even one” (Ps 14:2-3). “There is no one righteous, not even one. . . . All have turned away, they have together become worthless” (Rom 3:10-12).

Theologians in the Western Church throughout history have held to the doctrine of original sin. Augustine argues that human beings after the fall lost the *posse non peccare*, so that it is not possible for them not to sin.⁵⁶ Calvin, in the same vein, says

⁵³Mark R. McMinn, *Sin and Grace in Christian Counseling: An Integrative Paradigm* (Downers Grove, IL: IVP Academic, 2008), 18. See also Johnson, *God and Soul Care*, chap. 8.

⁵⁴McMinn, *Sin and Grace in Christian Counseling*, 38–45.

⁵⁵Cornelius Plantinga, *Not the Way It’s Supposed to Be: A Breviary of Sin* (Grand Rapids: Wm. B. Eerdmans Publishing Co., 1996).

⁵⁶Augustine, *Handbook on Faith, Hope, and Love*, trans. Albert C. Outler (Christian Classics Ethereal Library), 28, 105.

that all humans are totally depraved: “everything in man, the understanding and will, the soul and body, is polluted and engrossed . . . man is of himself nothing else but concupiscence.”⁵⁷ John Owen also says that indwelling sin always abides in all believers, and it produces soul-destroying sins that are opposed to the law of God.⁵⁸ Packer points out the inborn nature of humans who are “enslaved to sin.”⁵⁹ Plantinga states that human beings are “mired in a desperate and deplorable condition.”⁶⁰ Johnson observes that human beings have an inborn propensity to resist God’s centrality and glory, and being separated from God, their thoughts, feelings, dispositions, and relationships are all distorted.⁶¹ McFadyen argues that original sin is essentially an ontological structure of human existence; it “pre-conditions” human freedom.⁶² Human beings, he argues, are already “infected with the pathologies of our situation, alienating us from God and the good.”⁶³ These Bible scholars all agree that every person is born in original sin and as a result, their entire psychological being is disordered ethically and spiritually.

This biblical truth reveals that the root of all human psychopathology, including trauma, is found in original sin. As a result of their ethicospiritual corruption, humans are now naturally resistant to God’s words and defiantly commit sin-acts, and as a consequence, God’s created order is corrupted. In this deepest sense, total depravity is the foundational cause of trauma.⁶⁴

⁵⁷Calvin, *Institutes of the Christian Religion*, 1.2.1.

⁵⁸John Owen, *Overcoming Sin and Temptation: Three Classic Works by John Owen* (Wheaton, IL: Crossway, 2006), 49–56.

⁵⁹J. I. Packer, *Knowing God* (Downers Grove, IL: InterVarsity Press, 1993), 83.

⁶⁰Alvin Plantinga, *Warranted Christian Belief* (New York: Oxford University Press, 2000), 207.

⁶¹Johnson, *God and Soul Care*, chap. 8.

⁶²McFadyen, *Bound to Sin*, 28.

⁶³*Ibid.*, 37.

⁶⁴“The whole creation has been groaning” and inevitably “subjugate to vanity” because the condemnation of humankind is imprinted on all creatures, so that all creation “waits in eager expectation for the children of God” in hope that the creation will put off corruption and put on the glory of God (Rom

Second, sin also refers to the “sin-acts” of fallen humans. The sinful nature of the human heart eventually manifests itself in human activity. Such activity includes not only evil behaviors, but also vicious speech and imagined activities. Jesus says, “For it is from within, out of a person’s heart, that evil thoughts come—sexual immorality, theft, murder, adultery, greed, malice, deceit, lewdness, envy, slander, arrogance and folly. All these evils come from inside and defile a person” (Mark 7:21-24). Paul also specifically lists the sinful acts of humanity and warns God’s people: “The acts of the flesh are obvious: sexual immorality, impurity and debauchery; idolatry and witchcraft; hatred, discord, jealousy, fits of rage, selfish ambition, dissensions, factions and envy; drunkenness, orgies, and the like. I warn you, as I did before, that those who live like this will not inherit the kingdom of God” (Gal 5:19-21). In various passages the Bible shows various sinful activities coming from a rejection of God’s words in order to fulfill the desires of the flesh (e.g., Gen 4:1-8; 6:11-12; 1 Chr 10:13-14; Prov 6:16-19; Rom 1:29-31; Col 3:5-8; 1 Tim 1:9-10) Regarding these sinful activities, Mark McMinn describes how the corrupted freewill is prone to intentionally or unintentionally act sinfully in two ways: acts of *commission* and acts of *omission*. He states,

In the midst of the chronic, low-level noise of our broken world, we sometimes choose evil. We commit sins. Consciously or unconsciously, we make sinful choices, and often we make the same choices over and over again! We willfully violate God’s moral instruction, pulling away from God’s desire for intimate relationship with us. As sinful creatures we rebel against God in our thought, attitudes, behaviors, volition, and relationships. We do and think things we should not, and we fail to do and think the things we should.⁶⁵

A sin-act of *commission* means transgression against God’s will, for example, an individual who disobeys God’s command not to steal thereby ignoring his command to love one’s neighbor. A sin of *omission* would be to leave undone an act that should be

8:19-22) Thus, from a biblical standpoint, the depravity of humankind (i.e., the original sin) is the primary cause of all traumatic events, even including natural disasters and accidents. See John Calvin, *Romans, Calvin’s Bible Commentaries*, vol. 8, trans. John King (London: Forgotten Books, 2007), 19-22.

⁶⁵McMinn, *Sin and Grace in Christian Counseling*, 41–42.

done, for example, a parent who apathetically neglects their children's basic needs of love and care.

Though such a sinful act is the result of a personal choice of the initiator, it always occurs in the context of relationship. According to Johnson, sin is a relational disorder involving God and others.⁶⁶ First and foremost, sin is a vertical relational problem whereby sinners disobey God in a display of an apparently autonomous rejection of God. It is also a horizontal relational problem that leads to blame shifting, distrust, hate, and violence against others. Because of this relational dimension of sin, the effects of personal sin are not limited to the perpetrator, but inevitably cause destructive impact on others. This means that one's personal acts of sin can be a direct cause of trauma to others. If a grown man rapes a young girl in order to satisfy his sexual desire, the abused girl will suffer from an inerasable wound as a result of the man's sinful activity. A child who has been repeatedly beaten by an alcoholic parent is prone to feel that the world is insecure and scary, and thereby, may fail to develop meaningful relationships with others. A terrorist who violently kills innocent bystanders to promote his political and religious purposes will leave in his wake traumatized survivors and family members. Most cases of trauma can be traced to an individual's sinful actions.

Third, sin also includes the corruption of all of human life. The sinful being of humanity and their evil activities contaminate all areas of human society. Plantinga states, "Sin and its effects can be like a contagion that spreads from one to another, eventually corrupting an entire society or segment of it."⁶⁷ Sin is like "a malicious virus" that relentlessly seeks to erase the memory of faithful relationship with a trustworthy God and thus sinners persistently rebel against God, reject the fear of God, and cause interpersonal

⁶⁶Johnson, *God and Soul Care*, chap. 8.

⁶⁷Plantinga, *Warranted Christian Belief*, 207.

and sociocultural vices.⁶⁸ A pattern of sinful choices and behaviors eventually develops systems, cultures, and ideologies that endure as evil patterns that influence many members of a culture. For instance, sexual sins, including sexual violence and homosexual practices, were prevalent among the people of Sodom; as a result “all the men from every part of the city of Sodom—both young and old” surrounded Lot’s house and tried to rape the men visiting Lot, and when Lot dissuaded them they treated him violently (Gen 19: 4-9). Sexual sins became part of Sodom’s culture. Also, wicked people can use the system of Law for their purpose: the groups of chief priests and Pharisees plotted to kill Jesus in order to protect their political positions and economic benefits by using the Jewish law (Jn 11:45-53). When such a sinful system or culture is formed, it often leads to trauma and unfortunately, such patterns, cannot be easily changed—this can also be called a “systemic sin.”

In short, trauma is a result of original sin and distinct sin-acts, and is reinforced in the corrupted contexts of the fallen world. This multi-dimensional understanding of sin provides an ethicospiritual diagnostic tool for trauma. Let’s take survivors of sexual domestic abuse as an example. The doctrine of the original sin indicates that every human has the innate sinfulness to follow the desires of flesh rather than God’s words (the condition of depravity). A perpetrator (e.g., a step-father) in this sinful condition may choose a child to satisfy his sinful desire and sexually and violently abuse her (the personal sin of commission). The same abusive act also indicates that the step-father neglected his responsibility to take care of his step-daughter (the personal sin of omission) As a result of the parent’s sins, the child has been victimized (interpersonal corruption).

In many cases of child abuse in a domestic setting, such destructive acts are often concealed. Particularly when the perpetrator is an important member of the family,

⁶⁸Kellemen, *Gospel-Centered Counseling*, 84.

family members will often deny or silence the victim in order to keep their social statuses and to avoid shame (exemplifying social corruption). Furthermore, if the traumatized individual is female, non-white, poor, or disabled, the cases are more often ignored and mishandled by those in power, whose sinful biases are shaped by gender, race, and social discrimination (cultural corruption). This diagnosis of trauma of sin offers a distinctive Christian psychopathological approach that shows its ultimate ethicospiritual context and thereby calls for ethicospiritual interventions.

Damage

The category of damage seems to overlap with the corruption of sin. However, while understanding of the corruption of sin focuses more on ethicospiritual aspects, damage refers more to the corruption of natural conditions. Distrust of God's goodness, for example, is in the scope of sin, but an intellectual disability is an example of neurobiological damage. Taking advantage of others for the sake of one's selfish desire is a sin, but the inability to trust others because of early relational trauma is a sign of psychosocial damage. Though all damage indirectly originates from the corruption of sin, in that it is a consequence of the primordial sin of Adam and Eve (Gen 3), it is not itself considered sin per se. When the disciples asked Jesus whose sin caused a certain man to be born blind, he answered, "Neither this man nor his parents sinned," said Jesus, "but this happened so that the works of God might be displayed in him." (John 9:3) Paul also had "a thorn of [his] flesh" to torment him, but God used his physical problem as a means for Christ's power to rest on him and through which Paul could be humbled before God (2 Cor 12:7-10). God often uses the broken and damaged parts of a person's story to demonstrate his glory. In this biblical perspective, damage can be defined as a natural disorder (in contrast to an ethicospiritual disorder), and includes any neurobiological, psychosocial, and sociocultural distortion from God's design plan for creation.

The diagnosis of damage in trauma cases, thus, encompasses the same phenomena addressed by the naturalistic approaches to trauma discussed in Chapter Two. Since the details of traumatic damage were already discussed there, they will only be briefly restated here.⁶⁹ In terms of neurobiological damage, trauma survivors often exhibit physical wounds and somatic symptoms, such as hyperarousal, flashbacks, numbness, loss of memory, lack of cognition, and diverse brain malfunctions. In terms of psychosocial damage, traumatized individuals can suffer from distorted self-identity, low self-esteem, lack of trust, inability to form secure relationships, chronic false shame and guilt, unresolved anger and negative emotions, anxiety and fear in relationships, depressive behaviors, and the exhibition of aggressive tendencies. In terms of sociocultural damage, a traumatogenic society can often promote discriminative systems and culture around race, gender, social class, and ability, oppressing certain groups that create conditions of trauma.

At this point, it is noteworthy that damage can overlap with sin. As seen previously, traumatic wounds can make survivors vulnerable psychospiritually, thereby leading to sinful behaviors, such as aggression or addiction. When sinful activities are related to biopsychosocial damage or created weaknesses, according to Johnson, “faults” occur.⁷⁰ This “mixed” diagnostic category is essential to avoid another kind of sin that rationalizes one’s sinful tendencies in the name of traumatic wounds. Even in the case that traumatic damage promotes sinful activity, sin is still sin, which is not excusable before God. In the case of faults, therefore, it is necessary to differentiate damage and sin and provide different interventions for each part.⁷¹

⁶⁹For the details of damage caused by trauma, see chap. 2.

⁷⁰According to Johnson, “fault” is both sin and damage/weakness. Sinful patterns can be related to diverse aspects of damages, such as poor parenting, childhood abuse, neglect, false selves, dissociation, self-hatred, excessive shame and guilt, etc. See Johnson, *God and Soul Care*, chap. 18.

⁷¹The different therapeutic ways of addressing each category of sin, damage, and suffering will be discussed at the end of this chapter.

The observation of damages is understood as part of “creation grace” that can contribute to a comprehensive understanding of trauma. The creation grace principle is described as this: “unredeemed humans are capable of accurately understanding aspects of God’s creation (including human nature, psychopathology and facets of its remediation)—except insofar as it requires spiritual illumination—and this understanding is the gift of God.”⁷² Within creation grace, God made human beings, including the unredeemed, to be free agents who can develop and enrich their knowledge of God’s creation with reason and experience.⁷³ Natural knowledge exists that is derived from reason and experience, rather than special revelation. If a research finding is compatible with God’s word, it may be true knowledge from God revealed through creation grace.

Created as free agents, however, depravity can also distort human knowledge. If the findings of naturalistic research are in conflict with the word of God, they must be determined to be false and distorted in some way by worldview bias. Freud’s classical psychoanalysis of Dora is a good example of such false interpretation. Blinded by male chauvinism and an over-emphasis on sexual instinct, Freud wrongly—even abusively—interpreted a young woman’s trauma. An eighteen-year-old girl, Dora, visited Freud with her father.⁷⁴ Four years before the visit, a friend of Dora’s father had tried to seduce her several times, but she rejected him. Eventually, the man slapped her face and pretended that she sexually tempted him. When Dora visited Freud, she suffered from a frequent cough and a cracking voice, suicidal impulses and severe depression. In his

⁷²The concept of creation grace is the same as “common grace” in the reformed tradition. The difference is that while the term common grace emphasizes the universality of this non-saving grace to humankind, while the term creation grace stresses its continuity with all of God’s goodness in the creation that continues even after the Fall and thus remains an instrument of God’s revelation and love. See Johnson, *Foundations for Soul Care*, 113.

⁷³Augustine, *The Literal Meaning of Genesis*, 2:42–43; Calvin, *Institutes of the Christian Religion*, 2.2.15; Johnson, *Foundation for Soul Care*, 113–14, 342.

⁷⁴For the details of Dora’s case, see Sigmund Freud, *Dora: An Analysis of a Case of Hysteria* (New York: Simon and Schuster, 1997).

psychoanalysis of her case, Freud asserted that when the man rubbed his erected penis on her, she felt sexual excitement. Freud further interpreted her rejection of the man as an intellectual substitute for repression of her inner desire to have sex with him. He diagnosed her cracking voice to be derived from her fantasy of having oral sex with him and her frequent coughing was an imitation of her parents' rough breath in sexual intercourse. Freud eventually attributed Dora's hysterical symptoms to the repression of her sexual drive and her regret of rejecting the perpetrator in spite of her unconscious desire to have sex with the man. It is clear that Freud's psychoanalysis was itself abusive rather than therapeutic. Women, for Freud, were simply considered to be men without penises, and penis envy in women was a problem that could never be completely resolved; therefore, Freud believed that all women never fully developed superegos and as a result they will always be morally inferior to men.⁷⁵ This Freudian assumption was a sinful rejection of God's word that he created male and female in his image and declared them both to be good (Gen 1:27; 31). It was also a distorted way of thinking shaped by male chauvinism, and therefore was an example of false sociocultural ideology. Through such distortions, Freud deceived himself and his followers, distracting from the true knowledge of God.

This example indicates that developing a Christian psychopathology should involve identifying naturalistic distortions, according to the word of God. The process of discernment is a responsibility of redeemed personal agents who receive the word to govern the creation according to God's will (Gen 1:28). In other words, the diagnosis of damage in Christian psychopathology is not a mere acceptance of any idea found in secular psychology. Rather it involves developing a biblically-grounded framework that recognizes damaged parts of our created form of life. As a result, secular theories, when

⁷⁵Duane P. Schultz and Sydney E. Schultz, *Theories of Personality*, 10th ed. (Belmont, CA: Wadsworth Publishing, 2012), 42–80.

interpreted according to God's revelation thereby can provide a fuller picture of human damage *as God sees it*, than is available in Scripture alone.

Suffering

This work views the suffering of trauma in a broad and a narrow sense. While suffering in a broad sense contains all kinds of difficulties in human life, the narrow sense of suffering refers to emotional pain or disturbances derived specifically from traumatic events.

The Reformed tradition has viewed suffering in three ways. First, God sometimes disciplines his children through suffering. The sinful nature of all human beings continuously produces sin-acts. Thus, God wants to lead his beloved children to turn away from sin by giving them suffering as a rebuke of their sinful acts. The Bible and the Christian tradition clearly reveal this disciplinary aspect of suffering. "My Son, do not despise the Lord's discipline, and do not resent his rebuke, because the Lord disciplines those he loves, as a father the son he delights in" (Prov 3:11-12). It is noteworthy that the author of Hebrews states that everyone of God's children will suffer:

The Lord disciplines the one he loves, and he chastens everyone he accepts as his son. Endure hardship as discipline; God is treating you as his children. For what children are not disciplined by their father? If you are not disciplined—and everyone undergoes discipline—then you are not legitimate, not true sons and daughters at all. (Heb 12:6-8)

And a little later,

God disciplines us for our good, in order that we may share his holiness. No discipline seems pleasant at the time, but painful. Later on, however, it produces a harvest of righteousness and peace for those who have been trained by it. (Heb 12:10-11)

Augustine echoes that sinners can be brought to recognize their wickedness, immorality, and sinfulness through their suffering, and in so doing God leads them to

seek the kingdom of God rather than their own pleasure.⁷⁶ Calvin describes the discipline of suffering as a necessary “means of the cross”:

The kindness of God should allure us to ponder and love his goodness; but since such is our malignity, that we are invariably corrupted by his indulgence, it is more than necessary for us to be restrained by discipline from breaking forth into such petulance. Thus, lest we become emboldened by an over-abundance of wealth; lest elated with honour, we grow proud; lest inflated with other advantages of body, or mind, or fortune, we grow insolent, the Lord himself interferes as he sees to be expedient by means of the cross, subduing and curbing the arrogance of our flesh, and that in various ways, as the advantage of each requires.⁷⁷

In other words, suffering can be a tool of God’s correction for sinful human beings to become aware of their sinfulness, finitude, and dependency on God. Suffering, in this sense, is God’s “megaphone to arouse a deaf world.”⁷⁸

In this kind of suffering, believers engage in the process of sanctification. The purpose of God’s discipline is not to destroy sinners but to make his people holy. “Under the lash” of God, as Calvin rightly points out, believers should “behave as obedient docile sons rather than rebelliously imitate desperate men, who are hardened in wickedness.”⁷⁹ In suffering, unbelievers are “the slaves of inveterate and deep-seated iniquity,” who become “worse and more obstinate,” whereas believers are “free-born sons [who] turn to repentance.”⁸⁰ The aim of disciplinary suffering is to “wean us from the world and set our hope fully in God alone.”⁸¹

Second, suffering can be an inevitable cross for the sake of redeeming others. Suffering is sometimes necessary to save people. Jesus laid down his life on the cross in order to redeem his children, for “the Son of Man did not come to be served, but to serve,

⁷⁶Augustine, *Nicene and Post-Nicene Fathers*, vol. 2, *St. Augustine: City of God, Christian Doctrine*, ed. Phillip Schaff (Grand Rapids: W.B. Eerdmans Publishing Company, 1983), 6–7.

⁷⁷Calvin, *Institutes of Christian Religion*, 3.8.5.

⁷⁸C. S. Lewis, *The Problem of Pain* (San Francisco: HarperSanFrancisco, 2001), 91.

⁷⁹Calvin, *Institutes of Christian Religion*, 3.8.6.

⁸⁰*Ibid.*

⁸¹Piper, “Why God Appoints Suffering for His Servants,” 92.

and to give his life as a ransom for many” (Mark 10:45). Jesus “was pierced for our transgressions, he was crushed for our iniquities; the punishment that brought us peace was on him, and by his wounds we are healed” (Isa 53:5). His suffering was “redemptive suffering” that bore the sins of all humanity and thereby redeemed all those who believe.⁸²

Stephen was stoned for preaching the Gospel about Jesus to those who denied him, but by this event believers were scattered throughout Judea and Samaria and thereby triggering the spread of the Gospel to those regions (Acts 7:1-8:1). Paul experienced various forms of suffering, such as having been frequently imprisoned, severely beaten, stoned, experiencing danger, hunger, cold, and nakedness, in order to spread the truth of redemption among the Gentiles (2 Cor 11:23-28; Rom 1:1-5). In fact, throughout the Bible, a large number of prophets and disciples of Christ were persecuted because of their labor on behalf of God’s people. As Christ redeemed his people by bearing the cross and as prophets and apostles proclaimed Christ’s righteous redemption even in the midst of persecution, insofar as the suffering of believers is for the sake of God’s name, it can be their cross to lead others to Christ the redeemer. Depicting this suffering for Christ’s sake as “the special badge of his soldiers,” Calvin says that though those soldiers endanger their lives, fortunes, or honors; their suffering will turn into happiness, because they will be welcomed into God’s family and will have a higher place in God’s kingdom in eternity.⁸³ As they participate in Christ’s suffering, they will get Christ’s glory. Jesus thus says, “Blessed are those who are persecuted because of righteousness, for theirs is the kingdom of heaven. Blessed are you when people insult you, persecute you and falsely say all kind of evil against you because of me. Rejoice and be glad, because great is your

⁸²Mary Vandenberg, “Redemptive Suffering: Christ’s Alone,” *Scottish Journal of Theology* 60, no. 4 (November 2007): 397-411.

⁸³Calvin, *Institutes of Christian Religion*, 3.8.7.

reward in heaven, for in the same way they persecuted the prophets who were before you” (Matt 5:10-12). In other words, suffering for righteousness is not only a way of revealing Christ’s redemptive grace to others, but also a channel of the grace of Heaven’s reward.

Third, suffering is a part of God’s greater plan. Suffering is not always God’s rebuke for human sins or a cross we bear to increase our righteousness. It is a part of God’s providence. This means that God continually conserves and rules over the creation for his purposes; it does not merely mean that God has the power and right to govern all things, but that God does, in fact, govern all things.⁸⁴ God himself declares his sovereignty over everything: “See now that I myself am he! There is no god besides me. I put to death and I bring to life, I have wounded and I will heal, and no one can deliver out of my hand” (Deut 32:39). “I make known the end from the beginning, from ancient times, what is still to come. I say, ‘My purpose will stand, and I will do all that I please’” (Isa 46: 10). Given the sovereign decree of God, human suffering, no matter what form it takes, is always in God’s hand. Even a sparrow cannot fall to the ground without God’s permission (Matt 10:29), and God values human lives more than these.

The purposes of the sovereign God over the reality of suffering can be varied. As we have seen, it is sometimes allowed for the spiritual development of the sufferers;⁸⁵ it can train people in how to comfort others in their suffering, and makes them God’s ambassadors.⁸⁶ It can also serve to enlarge one’s blessing, awaken others to the kingdom

⁸⁴John Piper, “Suffering of Christ and the Sovereignty of God: Ten Aspects of God’s Sovereignty over Suffering and Satan’s Hand in It,” in *Suffering and the Sovereignty of God*, ed. Justin Taylor and John Piper (Wheaton, IL: Crossway Books, 2006), 19; Grudem, *Systematic Theology*, 315.

⁸⁵Ronald K. Rittgers, *The Reformation of Suffering: Pastoral Theology and Lay Piety in Late Medieval and Early Modern Germany* (New York: Oxford University Press, 2012), 257; Calvin, *Institutes*, 1.17.1.

⁸⁶Paul David Tripp, *Instruments in the Redeemer’s Hands: Helping People in Need of Change* (Phillipsburg, NJ: P & R Publishing, 2002), 145.

of God, and make people bold to engage in obedience and mission.⁸⁷ The most important purpose, however, is the glory of God. According to Piper, “Suffering is an essential part of the created universe in which the greatness of the glory of the grace of God can be most fully revealed. Suffering is an essential part of the tapestry of the universe so that the weaving of grace can be seen for what it really is.”⁸⁸ The suffering of Jesus Christ in the Bible reveals this truth obviously. Even before the beginning of the world, Scripture states that God planned the suffering of Christ for the sake of redemptive grace, which fully reveals the glory of God (2 Tim 1:9; Rev 13:8; Eph 1:4-6).⁸⁹ Facing death on the cross, Jesus prayed, “Father, glorify your name.” Then a voice came from heaven: “I have glorified it, and I will glorify it again” (John 12:27-28). Piper put it this way:

The suffering of the Son of God will never be forgotten. The greatest suffering in history will be at the center of our worship and our wonder forever and ever. This is not an afterthought of God. This is the plan from before the foundation of the world. Everything else is subordinate to this plan. Everything else is put in place for the sake of his plan: the display of the greatness of the glory of the grace of God in the suffering of the Beloved is the goal of the creation and the goal of all history.⁹⁰

As the suffering of Christ was planned for God’s glory, the suffering of believers united with Christ is also for the glory of God. Peter says that believers are called to follow Christ in his suffering, which serves as an example (1 Pet 2:21). He further encourages believers to rejoice inasmuch as they participate in the suffering of Christ, because “the Spirit of glory and of God” rests on them and they will be “overjoyed when God’s glory is revealed.” (1 Pet 4:13). In other words, the suffering of a believer becomes a way of participating in Christ’s suffering, and the suffering of believers in Christ likewise reveals God’s glory in time and space.

⁸⁷Piper, “Why God Appoints Suffering for His Servants.”

⁸⁸John Piper, “The Suffering of Christ and the Sovereignty of God,” in *Suffering and the Sovereignty of God*, ed. Justin Taylor and John Piper (Wheaton, IL: Crossway Books, 2006), 82.

⁸⁹Ibid.

⁹⁰Ibid., 85.

At this point, we should differentiate the suffering of Christ and that of believers. Christ's suffering is redemptive suffering; human suffering, by contrast, cannot be redemptive.⁹¹ Nevertheless, it is a way to participate in Christ's suffering, and thereby is included in God's glory through Christ. Considering suffering as one's glory can be a form of pathology. For that reason, some have criticized this view, believing that if God glorifies suffering itself, then he must be "bloodthirsty," "sadistic," or demanding of sacrifice and a "cosmic child abuser."⁹² What makes human suffering glorifying to God is not the suffering itself; rather it is God's grace and love displayed in Christ's suffering to ultimately overcome human suffering and God's promise in Christ's suffering for a new life in the new heavens and earth beyond human suffering.⁹³ Paul thus states, "Now if we are children, then we are heirs—heirs of God and co-heirs with Christ, if indeed we share in his sufferings in order that we may also share in his glory" (Rom 8:17). Since believers are in Christ, through Christ, and for Christ, sufferers can see and praise God's glory of grace and love, even in the midst of suffering, and God will eventually transform their sufferings into their own, unique glory, as they participate in God's glory through Christ. In this sense, human suffering in Christ fulfills the doxological purpose and plan of God.

While such considerations must be handled with the greatest of care, for God *hates* the suffering of children (Matt 18:6), viewed providentially even suffering in trauma can be interpreted as having meaning that transcends the suffering itself. By promoting such things as human redemption, purification from sin, growth in righteousness, and spiritual development, suffering ultimately becomes a way to

⁹¹VandenBerg, "Redemptive Suffering," 397-411.

⁹²Richard L. Rubenstein, *After Auschwitz: History, Theology, and Contemporary Judaism*, 2nd ed. (Baltimore: Johns Hopkins University Press, 1992), 262; Cynthia S. W. Crysdale, *Embracing Travail: Retrieving the Cross Today* (New York: Bloomsbury Academic, 1999), 115; Stephen Finlan, *Options on Atonement in Christian Thought* (Collegeville, MN: Michael Glazier, 2007), 127; Rita Nakashima Brock, *Journeys by Heart: A Christology of Erotic Power* (Eugene, OR: Wipf & Stock Pub, 2008), 56.

⁹³Piper, "The Suffering of Christ and the Sovereignty of God," 89.

experience and praise the glory of God's amazing grace that is able to transform evil into good. This understanding allows sufferers to see the deeper meaning behind a traumatic event, which can empower them to endure and overcome suffering with hope for a new life within the larger plan of God.

However, viewing suffering only through this broad understanding is incomplete and reductionistic, leading to a minimization of the real pain and difficulty of trauma. Even when people recognize that suffering has meaning, it cannot remove oftentimes the overwhelming pain of suffering. For example, Job recognized that God's will was involved in his suffering (Job 23:10-14), and the second season of his life was more blessed than the first, with twice the riches and an equal number of children (Job 42:10-17), but we might suppose that the loss of his first children, the emotional wounds from that time, and the agonizing memories of those events still remained in his heart. Trauma can be healed, but it does not disappear. It is spiritual triumphalism to assume that one's trauma can be fully erased, or overcome, by simply adding spiritual meaning to the suffering.⁹⁴ Those who have such assumptions simply cover up the reality of pain and have to pretend that they are fine or that the event had never been happened. As a result, they may fail to get proper care and worsen their suffering. In order to avoid this reductionistic over-spiritualization of suffering, a Christian psychopathology of trauma must incorporate the "narrow view" of suffering as well.

This view of suffering refers to a state of emotional and psychological disturbance because of traumatic events or situations, which are not the result of personal sin or physiological or psychological damage. For example, a mother's grief over the loss of a child may have nothing to do with personal sin or damage, but it still presents the sufferer with overwhelming emotional turmoil. If the mother's grief is so severe that it

⁹⁴Ronald J. Nydam, "Facing Cancer: The Spiritual Dangers of a Docetic Engagement of Acute Leukemia," *Calvin Theological Journal* 45, no. 2 (November 2010): 335-44.

produces enduring emotional numbness and inhibited brain function, this case could be an example of damage. However, grief is a normal emotional response to loss, which is a kind of suffering. For the purpose of diagnosing psychopathological aspects of trauma, this Christian psychological study recognizes a kind of suffering that consists of emotional pain that is differentiated from sin and damage.

Suffering produces a range of complex emotions and it is beyond the range of this study to thoroughly cover all possible emotions in trauma. However, the narrow kind of suffering—the emotional pain of trauma—can be experienced in three ways: internally, externally, and avoidantly.

First, one's emotional pain can manifest in an internal way. Grief is a representative emotion of this type.⁹⁵ Grief is a natural reaction to loss of something or someone important, such as a family member, friend, normal bodily function or something of great value. It is the mournful internal process by which people come to grips with a tragedy.⁹⁶ When people are exposed to a traumatic situation (e.g., sudden, unexpected violence, the death of a child, or a severe loss of bodily function), they first experience shock and tend to deny the loss. The inescapable reality of loss, however, brings them to a point of recognizing the change and causing them to enter into an intense feeling of grief, possibly entangled with shame and guilt. Through grieving, they mourn for themselves as they endure what feels unbearable and eventually come to accept the tragedy as a part of their story.⁹⁷ Though painful, grief is a necessary emotional response

⁹⁵Grief is a representative emotion that includes similar emotions such as sorrow and sadness.

⁹⁶Matthew Elliott, *Faithful Feelings: Rethinking Emotion in the New Testament* (Grand Rapids: Kregel, 2006), 204–5.

⁹⁷Serene Jones, *Trauma and Grace: Theology in a Ruptured World*, 3rd ed. (Louisville, KY: Westminster/John Knox Press, 2009), 161–65; Elisabeth Kübler-Ross and Ira Byock, *On Death and Dying: What the Dying Have to Teach Doctors, Nurses, Clergy and Their Own Families* (New York: Scribner Publishing, 2014). Kubler-Ross explains that, in grieving process, people tend to bounce around among the following stages: shock/denial, anger, bargaining, depression, and eventually acceptance.

enabling a person to face the reality of a traumatic experience in a healthy way, instead of more or less denying it.

Grief, however, is not always interpreted as good in Christianity. Elliot distinguishes worldly grief from godly grief. “Grief which is felt over the values of this world is worldly,” according to Elliot, and “that which is felt over God’s values is godly.”⁹⁸ He further argues that those who feel godly grief can be spiritually renewed, but those who feel worldly grief need to repent. Admittedly, if a person loves worldly things more than God and grieves too much over those worldly values, then this “worldly grief” may be considered sinful. This does not, however, mean that all grief over a loss of worldly things is sinful and requires repentance. Since God created the world and saw that it was good, worldly things are not always ungodly. Though corrupted by sin, this world is still God’s creation upheld by God’s sovereign hand.⁹⁹ Grief over loss of good things in this world is a natural human response to life in the world God created. Consider, for example, a man who has lost his house and worldly possessions due to arson. Even though his possessions would be considered worldly goods, nevertheless he has suffered the loss of things that he practically needs to live in the material world that God has created and has therefore experienced a true hardship to be processed through grief. Legitimate belongings can be God’s blessing—maybe in order to serve neighbors as well as oneself—though they are all eventually God’s (e.g., Job 42:12-17; Ps 24:1).¹⁰⁰ Thus, grieving over the loss of such created worldly blessings may not be sin, but a natural response to life in a broken world.

Therefore, this kind of grief should be met with comfort, rather than a call for repentance. The bible commands, “Mourn with those who mourn” (Rom 12:15). The

⁹⁸Elliott, *Faithful Feelings*, 209.

⁹⁹Johnson, *Foundations for Soul Care*, 113.

¹⁰⁰Cornelius Plantinga, *Beyond Doubt: Faith-Building Devotions on Questions Christians Ask* (Grand Rapids: Wm. B. Eerdmans, 2002), 225–27.

bereaved, the poor, the weak, the abused, the orphan, the widow, and the least of these should be met with empathy in their pain.¹⁰¹ Commenting on Jesus' expression of grieving with Mary and Martha and others after the death of Lazarus (Jn 11:33-36), John Rice says, "He weeps with all the broken hearts in the world. He weeps with every mother who loves her baby, every husband who stands at the casket of his wife. He weeps with every mother or father who weeps in the night over a prodigal boy or wayward girl."¹⁰² Jesus does not judge or over-spiritualize the suffering of those who grieve; rather he weeps with them and comforts them. It is a holy duty for the followers of Jesus to show their compassion to those who are suffering. Thus, a Christian psychopathology of suffering does not merely reinterpret grief with spiritual meaning. Rather, the starting point is to seek to understand the sufferer's grief with love and help them mourn fully, thereby encouraging the person to emotionally accept the reality of their suffering. It is essential to differentiate this kind of suffering in order to allow sufferers to reflect on themselves and to guard against retraumatization through the judgment of a helper.

Second, emotional pain in trauma can also be external. Anger is representative of an emotion in this category.¹⁰³ Anger is an antagonistic emotion that occurs in response to a perceived threat or injustice.¹⁰⁴ Research indicates that danger signals from an unjust or threatening environment, person, or memory can stimulate the body's internal alarm

¹⁰¹Everett F. Harrison, *Romans*, vol. 10, in *The Expositor's Bible Commentary*, ed. Frank E. Gaebelin (Grand Rapids: Zondervan, 1977), Rom 12:8-21.

¹⁰²John R. Rice, *The Son of God: A Verse-by-Verse Commentary on the Gospel According to John* (Murfreesboro, TN: Sword of the Lord Publishers, 1976), 233.

¹⁰³Anger as a representative emotion can include similar emotions such as hatred, resentment, irritation, and annoyance.

¹⁰⁴In defining anger, Lester emphasizes "perceived threat," while Allender and Longman highlight "perceived injustice." Given that injustice can feel like threat, and vice versa, the definition of anger used here includes both. See Andrew D. Lester, *The Angry Christian: A Theology for Care and Counseling* (Louisville, KY: Westminster John Knox Press, 2003), 4; Dan Allender and Tremper Longman, *The Cry of the Soul: How Our Emotions Reveal Our Deepest Questions about God* (Colorado Springs, CO: NavPress, 1994), 45-46.

system, resulting in anger.¹⁰⁵ Anger often triggers aggressive or even violent actions directed toward a target which may even be oneself.¹⁰⁶ Anger, at some level, is necessary for survival because it is an instinctual response to threatening circumstances and triggers an impulse to protect oneself and in this way is part of the way God created human beings.

In this regard, being angry in the midst of traumatic suffering may not be always sinful. It is, rather, a capacity that God has bestowed on humanity as a gift. Trauma often involves a “perceived threat” and sometimes a “perceived injustice” that jeopardizes a person’s life, wellbeing, and relationships. When faced with such threats or injustice, God has designed humans to feel anger to enable them to fight for justice and safety. For trauma survivors, anger evidences suffering and a cry for help in the midst of the unjust and unsafe situations in which they have found or find themselves. Thus, Allender and Longmen state, “God designed and blessed anger in order to energize our passion to destroy sin. Anger can be lovely and redemptive.”¹⁰⁷ Therefore, being angry in response to severe trauma may be a legitimate response.

Not all expression of anger, however, is acceptable, because it can become excessive and destructive. Under the guise of self-protection, angry people run the risk of destroying themselves, others, and their communities. In Genesis 4, for example, Cain was angry with God and his brother because he felt rejected and jealous. He felt that it was unfair that God accepted his brother’s offering but rejected his own. God told the angry Cain, “sin is crouching at your door; it desires to have you, but you must rule over it” (Gen 4:7). Cain, however, failed to manage his anger and acted out in murdering his

¹⁰⁵Lester, *Angry Christian*, 78-81. See also Joseph E LeDoux, *The Emotional Brain: The Mysterious Underpinnings of Emotional Life* (New York: Simon & Schuster, 1996); Allender and Longman, *The Cry of the Soul*, 45.

¹⁰⁶Allender and Longman, *The Cry of the Soul*, 46.

¹⁰⁷*Ibid.*, 58.

brother. As a result he fled. His anger destroyed his brother's life, his relationship with his family and with God. Unlike God, who perfectly executes justice and safety, fallen human beings have a distorted perception of these ideals, and therefore their expressions of anger can be ugly and vindictive. Such "unrighteous anger" seeks to condemn, control, possess and even kill others in order to satisfy one's own perceived needs.¹⁰⁸ Thus, while it is understandable for those who have experienced trauma to be angry about the event, the perpetrator, and others who played a role in their pain, violence, revenge, and uncontrolled expressions of anger are not endorsed in Scripture. As the psalmist says, Christians should be angry, but not sin (Ps 4:4).

To do this, one's anger must be addressed in relationship with God. Those who experience unrighteous anger trust themselves too much and do not hope in God, but those who are righteous in anger trust God and depend on him for their vindication. David's psalms provide a good example of this response. David cries out,

You, LORD God Almighty, you who are the God of Israel, rouse yourself to punish all the nations; show no mercy to wicked traitors. . . God will go before me and will let me gloat over those who slander me. . . For the curses and lies they utter, consume them in your wrath, consume them till they are no more. Then it will be known to the ends of the earth that God rules over Jacob. . . But I will sing of your strength, in the morning I will sing of your love; for you are my fortress, my refuge in times of trouble. You are my strength, I sing praise to you; you, God, are my fortress, my God on whom I can rely. (Ps 59:5-17)

In this poem, David honestly exposes his rage against the wicked but relies on God to judge and punish those who are evil. He says in another place, "Be still before the Lord and wait patiently for him; do not fret when men succeed in their ways, when they carry out their wicked schemes" (Ps 37:7); and "In your anger do not sin; when you are on your beds, search your hearts and be silent" (Ps 4:4). The psalmist does not seek to vent his anger on others, putting himself in the place of God; rather he calls upon God to fulfill his role as the righteous judge of the earth and waits for His time and discernment

¹⁰⁸Allender and Longman, *The Cry of the Soul*, 59–62.

regarding the punishment of his enemies. Through these psalms, Allender and Longman insightfully identify the following biblical lessons about anger: righteous anger before God is a rage against evil and sin and righteous ways of expressing it are to “be still,” crying out to God, “waiting to see God’s justice and goodness,” and “pondering” one’s heart, sin, and God.¹⁰⁹ In other words, Christians ought to be angry about the things that anger God, rather than being driven by one’s own selfish perspective, and they should not express their anger in a violent way, but depend on God and hope in his deliverance from the evil.

As a result, a Christian psychopathology of trauma invites survivors to bring their anger before God and face the evil that they have experienced and ask the Holy Spirit to help them discern whether their anger is righteous or not, and whether the desired expression of their anger would be destructive or not. If their anger is unrighteous, based on selfish desires and distorted values and perceptions, a Christian therapist might help them to transform their unrighteous anger to righteous anger by pointing to God’s perspective about the situation in Scriptures. If their anger is aggressive, a Christian therapist may lead them to trust God to judge the wicked and make things right.

As sinful human beings, it is not easy to be righteously angry before God. Humans usually want to pour out their anger immediately, but righteous anger encourages them to wait on God’s timing; they want to avenge their perpetrators, but trust in God exhorts them to be still and wait for God’s justice and goodness. Living in this way in the face of pain can be counter-intuitive and difficult. However, when people endure the pain and experience their anger within the bounds of God’s word, their

¹⁰⁹Allender and Longman, *The Cry of the Soul*, 73-74.

righteous anger participates in God’s wrath against sin and evil, and demonstrates their faith in God’s providence, thereby giving glory to God.¹¹⁰

Finally, emotional pain in trauma can appear in avoidant ways characterized by a flight response. The representative emotions in this category are fear and shame. While fear is an emotion triggering flight from danger, shame is an emotion that leads people to flee from exposure of their sinful or damaged self.

It is common for those who have experienced trauma to experience feelings of intense fear.¹¹¹ In the midst of the threats and persecution of his enemies, David described his heart in this way:

My heart is in anguish within me; the terrors of death have fallen on me. Fear and trembling have beset me; horror has overwhelmed me. I said, “Oh, that I had the wings of a dove! I would fly away and be at rest. I would flee far away and stay in the desert; I would hurry to my place of shelter, far from the tempest and storm. (Ps 55:4-8)

The overwhelming pain experienced in trauma is often seared into the memories of survivors, so that they continue to respond in fear to trauma-related stimuli. As a result, they instinctively turn away from certain dangerous people or situations—this is actually a healthy flight response. In a fallen world, where trauma is prevalent, fear can serve as a “warning light,” signaling a person to take caution or back off, thereby protecting them from harm when danger is near.¹¹² For this reason, fear in the aftermath of trauma is understandable and oftentimes inevitable.

Fear of trauma, however, can be so overwhelming for some that they cannot function in everyday life. In such cases the intense fear of pain has been internalized in a stable emotion scheme after the trauma event, resulting in hyperarousal, startle reactions,

¹¹⁰Allender and Longman, *The Cry of the Soul*, 68-72.

¹¹¹Herman, *Trauma and Recovery*, 33; Maria Anne Briscione, Tanja Jovanovic, and Seth Davin Norrholm, “Conditioned Fear Associated Phenotypes as Robust, Translational Indices of Trauma-, Stressor-, and Anxiety-Related Behaviors,” *Frontiers in Psychiatry* 5 (July 2014): 1–9.

¹¹²*Ibid.*, 87.

and a lack of memories of the event.¹¹³ The fearful scheme can be generalized to the point that symptoms are triggered by very different stimuli.¹¹⁴ Such people can be so sensitive to possible danger in their daily life that they avoid their everyday routines. In this case, fear no longer protects but “imprisons” and isolates the person in a “comfort zone” of “safe familiarity.”¹¹⁵

However, living passively in a comfort zone is not the way that Jesus dealt with fear. When anticipating the cross, he was full of anguish and sweat blood and prayed “Father, if you are willing, take this cup from me; yet not my will, but yours be done” (Luke 22:42). This shows that Jesus completely depended on God even in the face of the fear of death, for Jesus knew that God alone is the almighty who governs the universe (e.g., Gen 17:1; Isa 9:6), and therefore the true object of fear was not man, but God (e.g., Matt 10:28; 1 Pet 5:7; Prov 14:27; Deut 13:4).

In contrast to Jesus, believers who tremble in fear of the world have a distorted perception of themselves and of God. They believe that they cannot cope with the problems facing them, which seem insurmountable.¹¹⁶ They also err in assuming, at least unconsciously, that God is indifferent to them in the midst of their suffering, because it seems that he would not leave them in such a mess if he were concerned about them.¹¹⁷ Such people need to remember that the Bible encourages them to fear God, their creator, savior, and holy judge, rather than anything in this world (e.g., Deut 31:13; Pss 33:8-9; 34:9,11; Prov 9:10; 19:23; 15:16).¹¹⁸ In other words, believers can, and should, overcome

¹¹³Briscione, Jovanovic, and Norrholm, “Conditioned Fear”; A. Ronald Seifert, “Absence of Verbal Recall or Memory for Symptom Acquisition in Fear and Trauma Exposure: A Conceptual Case for Fear Conditioning and Learned Nonuse in Assessment and Treatment,” *Journal of Rehabilitation Research & Development* 49, no. 8 (November 2012): 1209–19.

¹¹⁴Briscione, Jovanovic, and Norrholm, “Conditioned Fear,” 3.

¹¹⁵Allender and Longman, *The Cry of the Soul*, 87.

¹¹⁶*Ibid.*, 99.

¹¹⁷*Ibid.*

¹¹⁸Edward T. Welch, *When People Are Big and God Is Small: Overcoming Peer Pressure*,

the fear of the world by the fear of God, who is the almighty and loving Father. This biblical teaching provides important principles of a Christian psychopathology of fear: Christian therapists should identify patterns of fear and restrictive comfort zones and discern whether a person fears the world and people more than God, and help them recognize that the infinite God is much bigger than the problems of their trauma, no matter how terrible it is.

Shame is another example of an avoidant emotion in trauma. Shame is “the traumatic exposure of nakedness.”¹¹⁹ It is not only a feeling of being exposed, devalued, or dishonored but is also the sense that the self as defective or worthless.¹²⁰ Originally, shame emerged from the sin of Adam and Eve. After the original sin, “then the eyes of both of them were opened, and they realized they were naked; so they sewed fig leaves together and made coverings for themselves” (Gen 3:7). They had been created as glorious, but once marred by sin, they saw themselves as ruined and defective, so they hid from God and from each other.¹²¹ In shame, people think of themselves as stupid, weak, dirty, wrong, and unworthy and therefore, they seek to hide themselves from exposure. Such a desire can be deeply habituated in one’s heart and become a life-long template for a pathological view of one’s identity, low self-esteem and unhealthy relational patterns.¹²²

Trauma begets pathological shame in several ways. If a person experiences a traumatic event, such as emotional, physical or sexual abuse in childhood, instead of

Codependency, and the Fear of Man (Phillipsburg, NJ: P & R Publishing, 1997), 103, 111-27.

¹¹⁹Allender and Longman, *The Cry of the Soul*, 195.

¹²⁰Adriano Schimmenti, “Unveiling the Hidden Self: Developmental Trauma and Pathological Shame,” *Psychodynamic Practice* 18, no. 2 (May 2012): 195–211; Langberg, *Suffering and the Heart of God*, 126.

¹²¹Langberg, *Suffering and the Heart of God*, 124–25.

¹²²William K. Hahn, “Shame: Countertransference Identifications in Individual Psychotherapy,” *Psychotherapy: Theory, Research, Practice, Training* 37, no. 1 (2000): 10–21.

experiencing security, love, and trust, their very being is threatened and undermined, so they tend to feel unworthy and unlovable.¹²³ Such beliefs about the self get embedded in their attachment schemes, and as a result they tend to have a difficult time developing secure, intimate relationships, finding it safer to withdraw from social connection.¹²⁴ At times, a trauma survivor may bear the shame of their perpetrators, because they blame themselves, believing that they have something inherently wrong with them, which led the perpetrator to choose to abuse them.¹²⁵ As Wiesel says, “Shame tortures not the executioners but their victims.”¹²⁶ Langberg calls this “inflicted shame,” that is, shame regarding the wrong behavior perpetrated against the victim, that belongs to the perpetrator, but tragically lives in the victims’ heart.¹²⁷ Shame also emerges when a person who is damaged and deprived by abuse is labeled as a victim, which often incites negative reactions from society, such as minimization, victim blame, and mistreatment.¹²⁸ Survivor syndrome occurs when a person experiences shame, because they have lived through a traumatic event, such as war or genocide, in which others did not.¹²⁹

Traumatized people who have experienced this kind of shame seek to cover their vulnerability in various ways. They frequently have difficulty disclosing the painful experience, because they fear being exposed and being seen as unworthy. They may make sudden defensive shifts in topics and show signs of discomfort, such as laughter, tense

¹²³Schimmenti, “Unveiling the Hidden Self,” 202–3.

¹²⁴Ibid., 203–6.

¹²⁵Langberg, *Suffering and the Heart of God*, 133.

¹²⁶Elie Wiesel, *The Night Trilogy: Night, Dawn, Day* (New York: Hill and Wang, 2008), 262.

¹²⁷Langberg, *Suffering and the Heart of God*, 133.

¹²⁸Heidi Resnick and Ron Acierno, “Emergency Evaluation and Intervention with Female Victims of Rape and Other Violence,” *Journal of Clinical Psychology* 56, no. 10 (October 2000): 1317–33; Rebecca Campbell, “Rape Survivors’ Experiences with the Legal and Medical Systems: Do Rape Victim Advocates Make a Difference?” *Violence against Women* 12, no. 1 (January 1, 2006): 30–45.

¹²⁹For the examples of survivor syndromes in the past, see David M. Noer, *Healing the Wounds: Overcoming the Trauma of Layoffs and Revitalizing Downsized Organizations* (San Francisco: John Wiley and Sons, 2009), 33–46.

facial expressions, and averted gaze.¹³⁰ Some isolate themselves from all social contact while others exhibit aggressive behaviors toward others. Those who feel that their entire self is weak, stupid or worthless may become so enraged that they attack others in order to prove to themselves that they still have power to control others, but this is just the opposite form of hiding their shameful feelings.¹³¹ Some attack themselves instead of others through self harm and eating disorders.¹³² Others seek distraction from their shame through thrill-seeking, including drug, alcohol, pornography, sex, internet, and any alternative, which can make them avoid feeling the emotional pain.¹³³ These strategies are intended to hide shame and defend the self, but in reality they are only stop-gap measures that merely cover up the problem, rather than a true path to freedom from shame.

Shame causes human beings to have difficulty tolerating being seen, but God wants to see them. When Adam and Eve hid, God pursued them asking, “Where are you?” (Gen 3:9). God wants people to stand honestly before him, even when they are ashamed and vulnerable, for God knows that all human hearts, as well as the problem of shame—and not only that of sin—are ultimately resolved in Him. (e.g., Ps 139:1-17; Isa 4:1-6) It was humiliating that Jesus Christ, who is in the very nature of God, took the flesh of human beings (Phil 2:6). It was also humiliating that Jesus, the Son of God, was

¹³⁰Schimmenti, “Unveiling the Hidden Self,” 206–7.

¹³¹Ibid., 204.

¹³²They project the shameful self onto a part of their body, and pathologically seek to control or attack that part. See Philip M. Bromberg, “Treating Patients with Symptoms and Symptoms with Patience,” *Psychoanalytic Dialogues* 11, no. 6 (December 2001): 891; Rhonda-Jane Milligan and Bernice Andrews, “Suicidal and Other Self-Harming Behaviour in Offender Women: The Role of Shame, Anger and Childhood Abuse,” *Legal & Criminological Psychology* 10, no. 1 (February 2005): 13–25.

¹³³Myles Chisholm and Terry Lynn Gall, “Shame and the X-Rated Addiction: The Role of Spirituality in Treating Male Pornography Addiction,” *Sexual Addiction & Compulsivity* 22, no. 4 (October 2015): 259–72; Raluca Petrican, Christopher T. Burris, and Morris Moscovitch, “Shame, Sexual Compulsivity, and Eroticizing Flirtatious Others: An Experimental Study,” *Journal of Sex Research* 52, no. 1 (January 2015): 98–109; Giuseppe Craparo et al., “The Relationships between Self-Efficacy, Internet Addiction and Shame,” *Indian Journal of Psychological Medicine* 36, no. 3 (July 2014): 304–7.

born as a son of a sinful man, was beaten, stripped, ridiculed, pierced, and killed on a cross, which was considered the punishment of a cursed man.¹³⁴ His life and death demonstrate his experience of human shame. In shame, Jesus did not hide his face. He entrusted himself to the Sovereign God, who he knew would prevent him from being disgraced, and therefore, he was enabled to confront the shame of the world and deepen his resolve to accomplish the purpose of his life according to God's will (Isa 50:6-8).¹³⁵ When, God raised Jesus from the dead and made him to sit at the right hand of the throne of God (Heb 12:2), his "shame" was turned into his glory. Likewise, since believers who suffer from shame are united with Christ, putting to death the old shameful self and being raised to their new self through his resurrection, they also can be free from pathological shame and boldly follow God's purpose for their lives.¹³⁶

Based on this perspective, a Christian psychopathology of shame sensitively acknowledges survivors' different reactions of avoidance, such as withdrawing, aggression, or addiction, and discerns the hidden pathological problems of shame. During this diagnosis, Christian therapists may help the survivors lay their shameful experiences before God as a way of eventually leading them to gain freedom from their emotional pain through Christ.

What has been discussed so far may foster discernment regarding diverse psychopathological aspects of trauma, from a biblical standpoint. This study, however, is only an initial attempt at developing a Christian psychopathology of trauma. Many avenues for further study remain, particularly in deepening each aspect of this trauma

¹³⁴For the details of Christ's humiliation, see Herman Bavinck, "The Servant Savior: Christ's Humiliation" in *Reformed Dogmatics: Abridged in One Volume*, ed. John Bolt (Grand Rapids: Baker Academic, 2011), 423–48.

¹³⁵Allender and Longman, *The Cry of the Soul*, 210–11.

¹³⁶Johnson, *God and Soul Care*, chap. 19.

psychopathology and broadening its scope in order to continue developing a better Christian understanding of trauma.

Christian Psychopathology and Therapeutic Implications

This chapter concludes with a discussion of some therapeutic implications that can be derived from a Christian psychopathology of trauma. Each aspect of the psychopathological frame (sin, damage, and suffering) provides distinct implications for therapy.¹³⁷

The first therapeutic implication is that the doctrine of sin provides therapists and counselees with the grounds for universal empathy. All human beings, including therapists, victims, and perpetrators “have sinned and fall short of the glory of God” (Rom 3:23). This awareness can promote compassion for one another, and therefore, make people grieve and lament together for the far-reaching, terrible effects of sin.¹³⁸ In this sense, a therapeutic environment regarding trauma can be a place in which both therapists and counselees mourn over all the sins related to trauma events. In listening to the discourse of a traumatized counselee, a Christian therapist can discern the sinfulness of the event and the world around us, and can share in their counselees’ grief and righteous anger over sin, just as Christ was grieved by and angry over human sin (e.g., Luke 19:41; Mark 3:4-5; John 2:14-16). The experience of sharing grief and anger over the sin with the therapist may help counselees feel that they are not alone in the midst of this sinful world and strengthen them with a sense of solidarity.

Second, the awareness of the sinful nature of all human beings should lead everyone to put their hope only in Christ. Because all humans are sinners, they cannot

¹³⁷This section briefly discusses therapeutic reflections of each dimension. I will suggest specific strategies of a Christian therapy for healing trauma in chap. 5.

¹³⁸McMinn, *Sin and Grace in Christian Counseling*, 37–38.

redeem themselves and obtain righteousness by themselves. (Rom 3:23) The only way of resolving the problem of sin is in Christ. Jesus says, “I am the way and the truth and the life. No one comes to the Father except through me” (John 14:6). Since Christ died as a ransom for believers (1 Tim 2:6), those who are in Christ are released from the bonds of sin. God declares those believers to be righteous because of the merit of Christ.¹³⁹ Only in Christ can the problem of human sin be eternally resolved, along with the associated guilt and shame.

Therefore, a vital principle of Christian therapy derived from a Christian psychopathology of sin is repentance before God through Christ. Repentance of sin is actually the work of the Holy Spirit to renew sinners’ hearts and lives; it is a work of God’s grace because of Christ’s merit, not because of any righteous things humans have done (Tit 3:5).¹⁴⁰ God, however, uses his people as instruments of repentance.¹⁴¹ As therapists create space for confession and grieving over human sins, including those of the counselee, their perpetrators and all of humanity, they and their counsees will create conditions for more appropriation of God’s grace through Christ in the counseling room. However, it must be added, that counsees who are coming to address their trauma should be encouraged, first, to focus on the sins of their perpetrators, rather than their own. Otherwise, the counselor may confuse and re-traumatize the survivor by unwittingly communicating that the survivor is to blame for the abuse.

In addition, sharing the word of God plays an important role in the healing. God’s word penetrates the human heart, uncovers everything, and thus refreshes the soul and makes people wise for salvation (Heb 4:12-13; Ps 19:7; 2 Tim 3:15). As Calvin rightly put it, the Bible, like a “mirror,” makes people reflect on themselves, the world, and God,

¹³⁹Johnson, *God and Soul Care*, chap.15.

¹⁴⁰Joseph Alleine, *An Alarm to the Unconverted* (Mulberry, IN: Sovereign Grace Publishers, 2007), 9.

¹⁴¹*Ibid.*, 11.

so they can see the sinfulness of the entire universe before God.¹⁴² Inspired by the Holy Spirit, the living, active word of God itself points out sin—not a therapist or other fallen person (Heb 4:12). Thus, when Christian therapists wisely share God’s word as it relates to the counselees’ story—not by way of lecture, but through dialogical communication—the counselee may be able to discern as-yet-unacknowledged sinfulness surrounding the traumatic events, and seek afresh God’s grace and deeper healing.

With regard to damage due to trauma, the first therapeutic implication is to recognize that such damage is a real problem that may affect one’s everyday life, and thus it requires practical interventions and healing. As discussed before, traumatic damage is manifested in natural disorders and therefore may be addressed in some degree by natural means, including medical treatment, psychotherapy, and social support. These therapeutic approaches are manifestations of creation grace that God has given humanity.¹⁴³ Within this grace, Christian therapists have freedom to apply a variety of therapeutic methods, depending on the counselees’ relation to Christ, to help them cope with the effects of traumatic damage and promote healing.

Second, sometimes traumatic wounds remain with survivors their entire life. God’s way of dealing with human damage is not always to bring about full recovery in this life. Though Jesus’ resurrected body was “imperishable” and “raised in glory and power,” he still had the nail marks in his hands and a pierced hole in his side (1 Cor 15:42-43). God did not remove these signs of his suffering at the resurrection. As a result, Jesus was free to show his wounds as a means of promoting the faith of his disciples, “Put your finger here; see my hands. Reach out your hand and put it into my side. Stop doubting and believe” (John 20:27). The wounds of the cross remained in Jesus’

¹⁴²Eric Kayayan, “The Mirror Metaphor in Calvin’s Institutes: A Central Epistemological Notion?” *In Die Skriflig* 30 (December 1996): 419–41. He argues that the mirror metaphor is a central image of Calvin’s Institutes, relating to creation, Scripture, Christ, selected people, sacraments and ministers.

¹⁴³Johnson, *Foundations for Soul Care*, 113–14.

resurrected body and became part of his message of redemption. God can use the damaged parts of one's life for the purpose of changing his people—themselves and others. In this sense, embracing one's wounds as a part of one's self and using them to bring transformation to oneself and others can be a glorious way of participating in God's redemptive work.

In terms of suffering, first, Christian therapists must seek to comfort those who suffer. Jesus did not overlook human suffering, but was intentional in comforting those who suffered. Even when Jesus knew that he would raise Lazarus from the dead, he grieved with those who mourned his death (John 11:33-35) His tears were not only his lament over death, but they also served to comfort those grieving over the death of a well-loved man.¹⁴⁴ In his incarnation and crucifixion Jesus directly participated in the reality of human suffering and showed his great compassion for sufferers.¹⁴⁵ The Bible encourages Christ's followers to "weep with those who weep" (Rom 12:15). The practices of comforting sufferers, including listening to the counselee's discourse without condescension, accepting their difficult emotions with the compassion of Christ and training them in lament before God, are, thus, requisite for Christian therapists.¹⁴⁶ In such an environment of comfort and safety, counselees may be able to lower their defenses and experience and express their true emotions, such as grief, anger, fear, and shame. Through re-experiencing these emotions with a therapist who shows Christ's love and care, sufferers may be empowered by solidarity with the therapist, rather than be overwhelmed, and as a result, be strengthened to endure and catch a glimpse of what God is doing in their lives.

¹⁴⁴William Stewart, Heinrich August Wilhelm Meyer, and William Purdie Dickson, *Critical and Exegetical Commentary on the New Testament: John* (Charleston, SC: Nabu Press, 2012), John 11:35.

¹⁴⁵Elyse M. Fitzpatrick, *Found in Him: The Joy of the Incarnation and Our Union with Christ* (Wheaton, IL: Crossway), 77–111.

¹⁴⁶Johnson, *God and Soul Care*, chap. 9.

Second, faith in God's goodness and sovereignty is the ground of hope in a final victory over one's suffering. Traumatic suffering may not cease in a day. Persevering in suffering over the long haul is exhausting. Christian therapists may remind sufferers that the good and all-powerful God is present in their sufferings. God will reveal his wrath against all evil in this fallen world, and he is mighty enough to punish and set right all injustice, making it possible for those who believe in God to hope that in the end he will redeem them from their torment.¹⁴⁷ Based on these truths, believers can see that God is bigger than their problems and is therefore capable of sustaining them in the midst of future suffering, as they look ahead in hope of the promised good ending.

In this chapter we have examined a Christian psychopathology of trauma, which includes diverse dimensions of human life: sin focuses on the ethicospiritual perspective, damage focuses on human disorders from a bio-psycho-sociocultural perspective, and suffering focuses on emotional pain. Though these different aspects are not completely distinct, such categories are helpful in understanding the complexity of trauma. A Christian psychopathology seeks to provide a biblically-based diagnosis of trauma in a deep, comprehensive way, seeking to wisely interpret the knowledge from research done mostly by non-Christians as creation grace, in light of God's word in Scripture.

This Christian psychopathological approach to trauma, however, is still limited by the fact that pathology focuses on the causes and symptoms of a given problem. If all human events, including traumatic tragedy, are under God's sovereign control, a traumatic event cannot be separated from God's grand plan. One's experience of trauma, beyond a mere pathological event, can be a stage of God's redemptive drama, though painful and overwhelming. In order to grasp trauma as part of one's God-designed story,

¹⁴⁷Calvin, *Institutes of Christian Religion*, 2.7.10; Swinton, *Raging with Compassion*, 244–45.

a broader framework to see human life is required, which is *theodrama*. The next chapter will discuss how trauma can be understood within God's drama.

CHAPTER 4

EMBRACING TRAUMA IN THEODRAMA: EMBODYING CHRISTLIKENESS

The Bible presents a grand story in which God is the author and the Hero. Human authors, inspired by God, wrote the diverse stories of the Bible. Together these provide the overarching narrative of God's sovereign involvement with humanity, in which all other narratives of the world are situated and through which believers can find a way of seeing the world and human life in terms of God's purposes.¹ However, since the Word of God is alive and active (Heb 4:12), the biblical text does not merely give a plot or narrations of the story but invites participants to actively engage in the story.² In other words, while the Bible has the shape of a narrative of God's redemptive history, presenting a Christian worldview, the unfolding actual history of the world and human life is a drama, embodying the narrative in this spatiotemporal world—in this way it might be called a *theodrama*.³

¹Narrative approaches have been developed in practical theology. For example, Gerkin describes the persons in pastoral care as storytellers, trying to make sense of events in their lives. Charles Gerkin, *The Living Human Document: Re-visioning Pastoral Counseling in a Hermeneutical Mode* (Nashville, TN: Abingdon Press, 1984). Hauerwas argues that only when people see themselves within God's story can they truly know themselves, and based on this, he develops a narrative ethics of Christianity. Stanley Hauerwas, *The Peaceable Kingdom: A Primer in Christian Ethics* (Notre Dame, IN: University of Notre Dame Press, 1983). Goldsworthy explores how to use the whole biblical narrative in preaching the gospel. Graeme Goldsworthy, *Preaching the Whole Bible as Christian Scripture: The Application of Biblical Theology to Expository Preaching* (Grand Rapids: Wm. B. Eerdmans, 2000). All of these approaches emphasize that the Bible provides a grand narrative of God's salvation, and its framework is the foundation of shaping human activities and Church ministries.

²Given that narrators play a crucial role and narrative texts have a variety of arrangements of time-space relationships within the biblical narrative, it is reasonable to consider that the biblical text is a cohesive, grand narrative of God's salvation. However, the unified world opened in front of the biblical text is a form of drama configured by human participants' ongoing performances, dialogue and actions, interacting with God. See Craig Bartholomew, *Introducing Biblical Hermeneutics: A Comprehensive Framework for Hearing God in Scripture* (Grand Rapids: Baker Academic, 2015), 76–81.

³Hans Urs von Balthasar, *Theo-Drama: Theological Dramatic Theory*, vol. 1, *Prolegomena* (San Francisco: Ignatius Press, 1998); Kevin J. Vanhoozer, *The Drama of Doctrine: A Canonical-Linguistic Approach to Christian Theology* (Louisville, KY: Westminster John Knox Press, 2005); Kevin J.

From the beginning of the creation to the end, God has governed over the dramatic story of the world, interacting with his people (e.g., Gen 1:1; Ps 93:1; 96:4-10). God speaks and acts; humans respond to him. Christian history, in this sense, is God's drama of redemption in which human persons act out their faith, enacting their own dramas of life in relationship with God; it is, for believers, not mere head knowledge of the biblical text, but rather a lived exhibition of the Bible. According to this way of thinking, all personal dramas ultimately find their fulfillment in the theodrama.⁴

Given that each person's life story is part of God's grand drama of redemption, trauma, which is a part of some people's story, inevitably becomes part of the theodrama.⁵ In such a context, trauma is not viewed as an isolated pathological problem occurring at a particular time and place; rather it is a part of the person's story that is woven into God's story, giving it a new kind of meaning. This chapter will explore in detail what the theodrama is and how trauma can be understood in light of the theodrama and it will be argued that embodying Christiformity is a God-given way of embracing trauma—creating a faithful and therapeutic response for addressing trauma.

Theodrama

The term theodrama comes from the Greek, *theos* (God) and *draō* (to do), and refers to God's providential story of salvation, interacting with humanity by his communicative actions from the beginning of creation to the consummation of the new creation. God, as the author of the drama, has directed all events of the universe

Vanhoozer, "Forming the Performers: How Christians Can Use Canon Sense to Bring Us to Our (Theodramatic) Senses," *Edification: The Transdisciplinary Journal of Christian Psychology* 4, no. 1 (May 2010): 5–16; Wesley Vander Lugt, *Living Theodrama: Reimagining Theological Ethics* (Burlington, VT: Ashgate Publishing, 2014).

⁴Vanhoozer, *The Drama of Doctrine*, 49.

⁵Theodrama macroscopically includes God's narrative from creation to new creation, and also refers to the gospel framework of one's personal narrative of redemption. See Robert W. Kellemen, "Theodrama and Gospel-Centered Counseling: God's Redemptive Drama and Our Ultimate Life Questions" (Paper presented at The Annual Meeting of the Evangelical Theological Society, 2014), 2–3.

according to his plan: he created the world by his word, sustained it by communicating to his people in various ways, called revelation, redeemed believers through Christ's work, and he will bring all things to consummation in the new heavens and new earth. Hans von Balthasar says, "...in theodrama, it is God's stage; the decisive content of the actions is what he does. . . .What God had done is to work salvation, to reconcile the world to himself in Christ (2 Cor 5:19); he has taken this initiative out of love, which simply seeks to give itself."⁶ Vanhoozer in a similar vein says that the "drama-of-redemption" is "a matter of God's taking the initiative to make himself known to others, of God's parting the heavenly curtain in order to reveal and redeem."⁷ In other words, theodrama is the configured space and time of God's action, inviting human participation in the history of redemption.⁸

In this drama, human beings are not passive members of the audience, but involved actors, who are "acting out" what they have heard and received from God.⁹ From the beginning to the end, God requires human actions in the drama according to his words: for example, be fruitful, multiply and rule over the earth (Gen 1:28), love God with your whole heart (Deut 6:5), love your neighbors and enemies (Matt 5:44; 22:37-39), and work out your salvation with fear and trembling (Phil 2:12). Describing the world as "the dazzling theater" of God, Calvin states that human beings are not only

⁶Balthasar, *Theo-Drama*, 18-19.

⁷Vanhoozer, *The Drama of Doctrine*, 7.

⁸Regarding the interaction between God and humanity, Balthasar considers that human involvement is also God's action, saying "It is God who acts, on man, for man and then together with man the involvement of man in the divine action is part of God's action, not a precondition of it" (TD 1, 18). Vanhoozer understands it as God-initiated communication to humanity. Both scholars emphasize God's sovereignty and human responsibility for their actions. In other words, human beings are in theodrama responsible actors in relation to God. See Balthasar, *Theo-Drama: Theological Dramatic Theory*, 18; Kevin J. Vanhoozer, *Remythologizing Theology: Divine Action, Passion, and Authorship* (Cambridge: Cambridge University Press, 2010), 274.

⁹Kevin J. Vanhoozer, *Faith Speaking Understanding: Performing the Drama of Doctrine* (Louisville, KY: Westminster John Knox Press, 2014), 19.

“spectators” of God’s glory in the theater but it is also imperative that they possess existential knowledge of God which is gained only through the reception and fulfillment of God’s words in loving obedience.¹⁰ In other words, human beings are to praise God’s glory in the theater of his creation and to responsibly play their own parts in the theodrama. As drama is shaped by a progressive story of living persons in dialogical interactions,¹¹ theodrama is shaped by the grand story of the living God who interacts with his people through words and acts and by the sub-stories of those who actively and responsibly participate in God’s story.

In fact, some objections have risen against the dramatic view of the redemptive history. Some reflect the Platonic prejudice of drama, which questions the illogicality, immorality, and profanity of drama in general.¹² Others reject the theatrical model because of its pagan religious origins, and its linkage to such things as idolatry, sinful rituals, and practices forbidden in Scripture.¹³ An objection has also been made regarding the matter of authenticity, because a performance in a drama is at best a fictional play that imitates life, rather than being substantive and genuine.¹⁴ Another concern is that a theatrical model of the faith can lead to a counterfeit gospel, making the truth merely what works and a matter of mere performance.¹⁵

¹⁰John Calvin, *Institutes of the Christian Religion* (Peabody, MA: Hendrickson Publishers, 2007). 1.5.8; 1.6.2.

¹¹S. Kurtz, *The Fiery Serpent: A Christian Theory of Film and Theater* (Enumclaw, WA: Pleasant Word, 2007); Vanhoozer, “Forming the Performers,” 7.

¹²For details about this prejudice, see Jonas A. Barish, *The Antitheatrical Prejudice* (Berkeley, CA: University of California Press, 1985), 5–37.

¹³Latin fathers, for example, Tertullian or Augustine, rejected theatrical practices for three main reasons: “Theatrical shows encourage bad behavior (solipsism, lust, devotion to actors, and uncharitable acts); theater is so rooted in pagan religion that a Christian city could not sustain it as an institution; and theatrical representation interferes with Christians’ ability to know God.” See Donnalee Dox, *The Idea of the Theater in Latin Christian Thought: Augustine to the Fourteenth Century* (Ann Arbor, MI: University of Michigan Press, 2009), 12.

¹⁴Vanhoozer, *Faith Speaking Understanding*, 31.

¹⁵Randal Rauser, *Theology in Search of Foundations* (Oxford: Oxford University Press, 2009), 261-64.

A proper understanding of theodrama, however, resolves these objections. In contrast to a negative view of drama, theologians, like Clement of Alexander and John Calvin, have positively employed dramatic/theatrical metaphors to describe God's world and work.¹⁶ Augustine and Kuyper, who objected to drama, because of the prevalence of pagan practices, also affirmed that dramatic imagination and performances themselves are not sinful; rather they assert that these can be gifts of God that reflect the goodness of creation.¹⁷ The real matter for them was sin associated with drama, not the drama itself. Regarding the issue of authenticity, while a human drama in a theater is a fictional performance, the acts in the theodrama are real: nothing is more real than God's actions and human actions.¹⁸ Moreover, the emphasis on "action" in the theodrama does not neglect the truth. On the contrary, theological perception and reflection are always to take place, while actors are participating in the drama, because "there is no moment of pure orthodoxy distinct from and prior to orthopraxy."¹⁹ The knowledge of God is alive within the practices of theodrama. Given these responses to the objections, the theodramatic paradigm is a legitimate framework for Christians to interpret all of life. Whether they acknowledge it or not, all human beings are now living in theodrama.

The Emplotment of Theodrama

The plot of the theodrama consists of four major events: creation, fall, redemption, and consummation.²⁰ This narrative of the Bible lays out a grand story that

¹⁶Lugt, *Living Theodrama*, 2.

¹⁷James K. A. Smith, "Staging the Incarnation: Revisioning Augustine's Critique of Theater," *Literature and Theology* 15, no. 2 (2001): 123–39; Abraham Kuyper, *Lectures on Calvinism* (New York: Cosimo, 2009), 74–5.

¹⁸Vanhoozer, *Faith Speaking Understanding*, 69–71.

¹⁹Balthasar, *Theo-Drama*, 68–9.

²⁰The main events of the theodrama, according to scholars, are slightly different. For example, N. T. Wright configures it as creation, fall, Israel, Jesus, and church; Samuel Wells and Vanhoozer organize it as creation, Israel, Jesus, church, and eschaton; Craig G. Bartholomew and Michael W. Goheen arrange it as creation, fall, redemption initiated, redemption accomplished, the mission of the church, and redemption completed; Lugt's emplotment is formation (creation), deformation (fall), transformation

makes sense of the whole world and human life within it. In this way it is normative and comprehensive—it equips a person to discern what is true and to make sense of one’s own life story,²¹ and is thus the Christian “metanarrative” of human life.²² Let us briefly review the main points of each stage of the story revealed in Scripture.

Act 1: Creation

In the beginning, God created the universe (Gen 1:1). As Calvin understood, the creation is a “glorious theatre,”²³ “the most beautiful theater,”²⁴ a “magnificent theatre of heaven and earth replenished with numberless wonders,”²⁵ in which God exhibits his glory.²⁶ God arranged each creature in the theater, giving the general directions to act together to reflect the divine glory, and God, in his providence, continuously maintains and cares for all creation (e.g., Pss 33:13-15; 104: 1-30; 139:1-16). On this glorious stage, God placed human beings, created in his image as “the most glorious specimen of the

emerged (Israel), transformation embodied (Jesus), transformation empowered (church), and re-formation (new creation). Robert Kellemen’s is community, creation, fall, redemption, church, and consummation. However, all emplotments share the basic redemptive-historical framework: creation, fall, redemption, and consummation, which is Eric Johnson’s configuration of theodrama. This emplotment can be an effective lens not only to understand the grand narrative of God’s drama but also to interpret a personal life within the drama. Given that this dissertation aims to understand a person’s experience of trauma in terms of theodrama, I have decided to follow Johnson’s emplotment. See Nicholas Thomas Wright, *The New Testament and the People of God* (Minneapolis: Fortress Press, 1992), 141–2; Samuel Wells, *Improvisation: The Drama of Christian Ethics* (Grand Rapids: Baker Books, 2004), 53–5; Vanhoozer, the *Drama of Doctrine*, 2-3; Craig G. Bartholomew and Michael W. Goheen, *The Drama of Scripture: Finding Our Place in the Biblical Story* (Grand Rapids: Baker Academic, 2014); Lugt, *Living Theodrama*, 104; Eric L. Johnson, *God and Soul Care: The Therapeutic Resources of the Christian Faith* (Grand Rapids: InterVarsity Press, forthcoming), chap. 5; Kellemen, *Gospel-Centered Counseling*, 28-9; Eric L. Johnson, *Foundations for Soul Care: A Christian Psychology Proposal* (Downers Grove, IL: IVP Academic, 2007), 213-14.

²¹Bartholomew and Goheen, *The Drama of Scripture*, 20–21.

²²Johnson, *Foundations for Soul Care*, 213.

²³Calvin, *Institutes of Christian Religion*, 1.5.8.

²⁴*Ibid.*, 1.14.20.

²⁵*Ibid.*, 2.6.1.

²⁶Jonathan Edwards thus says that the ultimate end of the creation is the glory of God. See Jonathan Edwards, “The End for Which God Created the World,” in *God’s Passion for His Glory*, ed. John Piper (Wheaton, IL: Crossway Books), 125–251.

works of God,²⁷ and made them to be fruitful and multiply, and dominate over the other creatures (Gen 1:26-30). Accordingly, human beings received a calling to reflect God's glorious form and participate in his glory, to see and magnify divine glory in creation, and to rule over the created order according to God's design, all for his glory and praise. When God reflected on all that he had made, He said "it was very good" (Gen 1:31). This good creation is the stage within which human actors began to act in response to God's initiating actions.

Act 2: Fall

The proper response to God's good creation was to give glory to God by living with him, according to his words, but human beings failed to act responsibly before God. Thus, they were corrupted. Beginning with the disobedience of Adam and Eve (Gen 3), all human beings have been born in "original sin," enslaved by the "bondage of sin," and alienated from the Creator (Pss 51:5; 58:3; John 8:34; Rom 5:12; 6:16; 7:14; 2 Pet 2:19). Human freedom allowed Adam and Eve to sin, but the result of the Fall was that human nature became corrupted, so that they were no longer capable of not sinning and thus, no longer fully free.²⁸ As a result, all humans eventually commit sins and God's good creation is now broken and disordered. As scripture states, "there is no one righteous, not even one; there is no one who understands; there is no one who seeks God. All have turned away, they have become worthless; there is no one who does good, not even one" (Rom 3:10-12). "Within the hearts of fallen humanity are evil thoughts that produce immorality, theft, murder, adultery, greed, malice, deceit, lewdness, envy, slander, arrogance and folly" (Mark 7:21-22) and as a result of these evils, people experience

²⁷Calvin, *Institutes of Christian Religion*, 1.14.20.

²⁸Human beings are fallen into the state of *non posse non peccare* (not able not to sin). See Augustine, *Handbook on Faith, Hope, and Love*, trans. Albert C. Outler (Christian Classics Ethereal Library), 28, 105

physical, emotional and cognitive damage, pain and suffering, shame and guilt. The effects of human depravity are so pervasive that all creation has been subjugated to vanity and bondage to corruption (Rom 8:20-21).

In response to human sin, God has acted as both the righteous Judge and the gracious Savior. Since God is holy (Isa 43:15; Lev 19:2), sin cannot exist before him without a righteous judgment against it. For God to simply overlook sin and restrain judgement would be incompatible with his holiness. God the holy Judge has exposed human sin through the Law (Rom 3:20) and imposed death as the just punishment for sin (Rom 6:23). God's holiness and wrath against sin can actually be a source of hope for those who have suffered as a result of living in a sinful, broken world because it gives assurance that God will eventually destroy all sin and eradicate all of its impact in the world.

In spite of the human Fall into sin, God has graciously sustained the goodness of his creation through his providential care. God's wrath is not toward the work of his creation itself, but the corruption of that work.²⁹ By his grace, God has allowed human beings to continue in the image of God, though corrupted by sin, so that they can develop with some relative goodness—though only from a human perspective—and cultivate some degree of human flourishing, through means such as advanced medical treatment, scientific knowledge of creation, and sociocultural welfare.³⁰ However, creation grace alone does not sufficiently address the problem of the Fall. Jesus Christ, the gracious Savior, thus leads the drama into the next stage by redeeming his people.

²⁹Calvin, *Institutes of Christian Religion*, 2.1.11.

³⁰Johnson, *Foundations for Soul Care*, 282.

Act 3: Redemption

God's plan for salvation was set in place even before the beginning of the world (1 Pet 1:20),³¹ was prophesied throughout history in the Old and New Testaments, and was accomplished through the life, death, resurrection, and exaltation of Jesus Christ, the Son of God.³² Christ was the incarnate Word (John 1:1-3) and his life fulfilled the purpose of the Law (Rom 10:4). He was holy, blameless, pure, and set apart from sin (Heb 7:26), yet God laid on him the iniquity of all humanity (Isa 53:6). Jesus was obedient to God's plan to the point of death on the cross, which was necessary to satisfy God's judgment of human sin (Rom 3:25; 5:18; 1 Cor 15:3; Gal 1:4; 3:13). On the third day, Christ was raised from the dead and became the first fruit of the new life now offered to believers (1 Cor 15:20-22). Therefore, those who are in Christ by faith are freed from sin and introduced to the resurrected life (Col 2:12). After resurrection, Jesus the Son ascended to heaven and is now seated on the right hand of God the Father (Mark 16:19). Forty days after the ascension, the Holy Spirit came to the earth and began to apply salvation in and among his people.³³ The Spirit illuminates and empowers his people to have faith and courage to follow the way of Christ and to spread the gospel throughout the world, until Jesus comes again. This stage of redemption has already begun, but is also not yet complete.³⁴

³¹The basis of covenants throughout Christian history is found in "the eternal counsel of God, in a covenant between the very persons of the Trinity, the *pactum salutis* (counsel of peace; covenant of redemption). See Herman Bavinck, *Reformed Dogmatics*, ed. John Bolt (Grand Rapids: Baker Academic, 2011), 397. This eternal decree is a dialogical work of more than one communicative agent. See also Vanhoozer, *Faith Speaking Understanding*, 78.

³²The *pactum salutis* in the Triune God have consistently revealed in the covenants between God and humanity throughout the human history from the beginning of the creation, to Israel's history, and to the new covenant of Christ. See Michael Horton, *Introducing Covenant Theology* (Grand Rapids: Baker Books, 2009), 35-76.

³³Robert A. Peterson thoroughly explains the Spirit's ministry of applying salvation in terms of union with Christ. See Robert A. Peterson, *Salvation Applied by the Spirit: Union with Christ* (Wheaton, IL: Crossway Books, 2014), chaps. 22-24.

³⁴Anthony A. Hoekema, *The Bible and the Future* (Grand Rapids: Wm. B. Eerdmans Publishing, 1994), 68-78.

Act 4: Consummation

In the last day, when Jesus comes again, the drama of redemption will finally be consummated (e.g., Matt 19:28-29; Mk 10:30; Lk 18:30; 20:35; 1 Cor 15:23). On that day, God will preside over the final judgment and every human being will be there and will be assessed. In this ultimate courtroom, everyone will be judged with respect to their faith. God will judge believers in terms of their union with Christ and will accept them into heaven (1 Cor 15:42-29; 2 Cor 1:9); they will be made perfect, will no longer suffer and mourn, and will live in mutual love with God (John 17:23-26; Rev 21:3-4). Unbelievers, however, will be removed from whatever common grace they had received in their earthly life, and they will be forever separated from God and suffer eternal torment (Rev 20:12-15)

Moreover, that day will be the “period of the restoration of all things” (Acts 3:21). God will re-create the order of the universe. The lamb will live with the wolf; the cow will feed with the bear; the lion will eat straw like the ox; a little child will play with the cobra; there will be no harm or destruction; and the earth will be full of the knowledge of God (Isa 11:6-9). On that day, the order of justice and righteousness will fill the earth (Ams 5:24); the water of life will flow from God’s throne to his people, all nations will be healed, and the curse will be removed (Rev 22:1-3); and all believers will dwell in the new heavens and the new earth, where God will dwell among them and wipe every tear from their eyes, as they delight in joining the everlastingly praise of the glory of the King (Rev 21:1-4; 19:5-8). This consummation will be the completion of God’s *telos*, the fulfillment of his purposes for creation, the ultimate realization of the glory of God.

The Personal Dramas of Believers Are Woven into the Grand Theodrama

The concept of theodrama does not only refer to God’s grand narrative of redemption from the beginning of the universe to the end, but it also includes the

believer's personal narrative of redemption.³⁵ God's action initiates salvation: a believer's drama of redemption begins with God's election, is achieved by Christ, and applied through the Holy Spirit. In response to God's action, each believer lives out his or her own personal drama through speaking and acting by faith. The grand narrative of theodrama is the foundational pattern for that drama, and therefore the plotline of the theodrama becomes a lens for interpreting one's personal life as well.³⁶

The birth of each individual is a part of God's creation grace. God knew and elected each believer before the creation of the world, and he forms each one in the womb by his providence (Jer 1:5; 1 Sam 2:5-6; Eph 1:4). However, each person is also born into the corruption of original sin, and thereby will commit sins and at the same time suffers as the victim of sins committed against him or her. As a result, no one is free from the physical, psychosocial, and spiritual corruption of this fallen world (Rom 3:23). Sin separates all humans from God (Isa 53:6). Nevertheless, God so loved the world that he gave his only Son to bear the sins of all humanity (John 3:16; Isa 53:6). Therefore, having confessed faith in Christ, a believer receives the grace of redemption to be justified not by means of the work of the law but by faith (Gal 2:16), and therefore will not perish but have eternal life (John 3:16). Through Christ, the curse of sin, condemnation, and eternal punishment have been removed from all who trust in him. However, the final victory over sin and perfection in holiness have not yet been completed. Every believer continues to fight a spiritual battle (1 Tim 6:12; Eph 6:10-12). Therefore, each believer needs to grow in maturity to reach the status of the fullness of Christ through the guidance of the Holy Spirit and the Bible until Christ comes again (Eph 4:13). When Jesus comes again, believers in Christ will experience complete triumph over death and sin; followers of Christ will be perfectly transformed into Christ's image; and saints in Christ will live a

³⁵Kellemen, "Theo-Drama and Gospel-Centered Counseling," 2-3.

³⁶Johnson, *Foundations for Soul Care*, 214; Johnson, *God and Soul Care*, chap. 5.

new way of life, without suffering and pain, in a new heaven and earth in which every nation praises God's glory forever (Isa 11:6-9; John 17:23-26; 1 Cor 15:42-29; 2 Cor 1:9; Rev 19:5-8; 21:1-4).

Viewing a person's individual story of redemption as fitting within the grand theodrama allows us to interpret a believer's life with new eyes. In the theodrama, any event of one's personal life, including evil and suffering, is considered "part of a larger, meaningful plan that transcends the intentions of the human actors and grants a higher significance to all that happens, because it is a part of God's drama: 'you meant evil against me, but God meant it for good' (Gen 50:20)."³⁷ From this perspective, seeing a person's trauma experience through the lens of the theodrama can be powerfully redemptive.

Seeing Trauma with New Eyes

From a Christian perspective, one's story is re-interpreted in terms of the theodrama. For victims of trauma, life often gets stuck in the trauma event. Painful memories and wounds are re-experienced as if the trauma were occurring at the present time, so many trauma victims have difficulty moving on to the next stage. They are largely "fixed and closed" around the trauma event.³⁸ However, according to the theodrama, the trauma experience, regardless of how severe it is, cannot hold a person back. God's plotment is eternally fixed: redemption and consummation follow the fall. When one's life is reframed according to the theodrama, there is an expectation that the trauma is not the end of their story, certainly not the most important part of their story—their personal drama continues, and now it is being incorporated into divine redemption.

³⁷Johnson, *Foundations for Soul Care*, 276,

³⁸Serene Jones, *Trauma and Grace: Theology in a Ruptured World*, 3rd edition (Louisville, KY: Westminster/John Knox Press, 2009), 96.

What theodramatic values contribute to seeing trauma in a new way (i.e., a biblical way) and what implications does this shift entail? An in-depth inquiry into all the relevant aspects of the theodrama for life is beyond the range of this study, so this chapter focuses only on the implications of theodrama relevant for understanding trauma.

Faithful Speech-Act

First, the most important theodramatic theme is that the theodrama is occurring right now, so that one can participate in that story immediately and all of the time.³⁹ In other words, the theodrama is not a mere sequential list of meaningful historical facts written in a text, as in a mere narrative, but it is about an active and ongoing configuration of the speak-acts of the actors on a spatiotemporal stage driven by the Gospel. Accordingly, this drama underscores responsible human action in relationship to God, the sovereign author.⁴⁰

This emphasis on action⁴¹ is important in light of the perennial problem of a dichotomy between knowledge and practice in Christian living.⁴² In theodrama, Christian belief is not limited to one's perceptions about God and his word, but it is "action-oriented, situation-related in the particularities and contingencies of everyday living."⁴³ Being a Christian, thus, is not only to know God through his word, but also to live in God by doing his word. Being an authentic Christian, being real and true to the plan of the

³⁹Lugt, *Living Theodrama*, 7.

⁴⁰It is notable that a human action in theodrama is "response-ability," an aspect of freewill given by God, however it is God who still ultimately controls human involvement. God, the Father, authors creation and redemption in Christ through the Spirit. See Vanhoozer, *Remythologizing Theology*, 331–34, 305; Balthasar, *Theo-Drama*, 19.

⁴¹Speaking is a form of acting. See Vanhoozer, *Faith Speaking Understanding*, 15.

⁴²Benner points out that there is a disconnection in Christian spirituality today between possessing the truth and living in the truth, resulting in the loss of a robust commitment to God's word, which Benner calls "toxic spirituality." See David G. Benner, *Soulful Spirituality: Becoming Fully Alive and Deeply Human* (Grand Rapids: Brazos Press, 2011), 3–7.

⁴³Anthony C. Thiselton, *The Hermeneutics of Doctrine* (Grand Rapids: Wm. B. Eerdmans Publishing, 2007), 21.

Creator, always involves a right response to the divine call that defines the person in the drama.⁴⁴ According to Vanhoozer, “Nothing in this world is more important than this project: *living to God with one another in Christlike ways ‘in accordance with the Scripture’ (1 Cor 15:3)*” (italics mine).⁴⁵

The theodramatic significance of the responsible actions of human actors allows a believer to re-interpret a traumatic experience as an opportunity to manifest and develop faithful commitment to God. Human beings are created as personal agents, who have the capacity to think, plan, and act responsibly.⁴⁶ Trauma can hinder people from developing healthy personal agency. Traumatic experiences and memories force upon the victim distorted automatic thoughts and emotions, resulting in inappropriate behavior, such as self-destructive actions, addiction, or depression.⁴⁷ Admittedly, the impact of trauma on human action should not be minimized, but it also does not need to be the decisive factor, because personal agency, as God designed, is “dipolar and includes the awareness that one is a co-actor—dependent upon God, according to his will and empowered for good by his indwelling Spirit.”⁴⁸ In other words, human beings are enabled to make choices and act faithfully according to God’s will even in spite of a traumatic history through the help of the indwelling Spirit, who is the “co-actor” of their life in the theodrama. Though this capacity is corrupted and weakened after the fall, those who are in Christ, by the help of the indwelling Spirit, can become more aware of their

⁴⁴Vanhoozer, *Faith Speaking Understanding*, 70.

⁴⁵*Ibid.*, 1.

⁴⁶Johnson, *Foundations for Soul Care*, 310-11.

⁴⁷Judith S. Beck, *Cognitive Behavior Therapy: Basics and Beyond*, 2nd ed. (New York: The Guilford Press, 2011), 29-45.

⁴⁸Johnson, *Foundations for Soul Care*, 311.

own sinfulness and weakness and thus develop greater wholehearted, dipolar dependence on God in their actions, which is one of God's main objectives in human development.⁴⁹

In this sense, a trauma experience is a moment in which survivors must decide whether they will succumb to the force of traumatic impingement or fight against it with the co-acting Spirit, promoting a faithful way of life beyond the trauma. God does not want his people to be crushed by trauma; rather he wants them to be victorious over traumatic influences with the Holy Spirit's help, the Spirit of Christ who has already won the victory over the world (John 16:33; 1 John 5:4). By relying on the Spirit and reading Scripture, believers can learn what faithful commitment to God in light of a trauma history is, and thereby gradually become more faithful co-actors in the theodrama— in the process becoming more mature, dipolar personal agents, like Christ, who lived on earth in total dependence on God. In the theodrama, therefore, one's trauma history can be viewed as an opportunity in which believers can practice and develop in their ethicospiritual life before God in any given situation, even though it may be painful and demanding. God knows the way his people take and has said that when they pass through trials, they will come out as gold (Job 23:10).

The Happy Ending

Second, we know that the theodrama is heading toward the happy ending that God has designed for his people. The drama of redemption is not a tragedy: it is a *eucatastrophe*, which means a catastrophic event turned to a good end. According to Tolkien, Christ's incarnation is the eucatastrophe of human depravity, and his resurrection is the eucatastrophe of the crucifixion.⁵⁰ Though Jesus Christ, the central figure of the drama, suffered unjustly and was tragically crucified by sinful humanity, by God's power,

⁴⁹Johnson, *Foundations for Soul Care*, 544.

⁵⁰John Ronald Reuel Tolkien, *The Monsters and the Critics: And Other Essays* (New York: HarperCollins, 1990), 156.

he was raised from the dead and ascended (Matt 28; Mark 16; Luke 24; John 20). In union with Christ, believers enter into the new heavens and earth (Rev 21:1-4).⁵¹ This happy ending will be surely completed according to the Scripture, because God's words will never pass away (Matt 5:18). Vanhoozer called this drama a "divine comedy."⁵² In this happy ending, all performances eventually converge at the eschatological goal—the new creation of God's kingdom which is already established in Christ through the Holy Spirit and will then be brought to completion.

In a person's own narrative, a trauma event is a crisis point that can lead to the breakdown of the human body and soul. This is, for believers, not the end of the story though. The brokenness of fall is followed by the hope of new creation. It is God who directs the times and places of each detail in his people's story.⁵³ That day will be the "period of the restoration of all things" (Acts 3:21) and will be full of love, justice, joy, praise, and glory (e.g., Isa 11:6-9; Am 5:24; Rev 19:5-8; 21:1-4; 22:1-3). God always fulfills what he promises (Num 23:19) and will certainly bring about a new creation for his people, leading them in exodus out of trauma in his perfect time. Acknowledging their presence in the divine comedy, believers discover "the divine reframing" of their story which strengthens them to endure the effects of trauma and offers hope in the promise of a new body and a new life in the new heaven and earth.⁵⁴

⁵¹Vanhoozer, *Faith Speaking Understanding*, 94-5.

⁵²Ibid., 94. Dante was the first person to call the Christian story a divine comedy. His epic poem, *The Divine Comedy*, was completed in 1320. See Alighieri Dante, *The Divine Comedy of Dante Alighieri* (New York: P.F. Collier & Son).

⁵³Vanhoozer, *the Drama of Doctrine*, 44.

⁵⁴Johnson, *Foundations for Soul Care*, 214.

Scripture: The Primary Means of Divine Communication

Third, until Christ comes again to make all things new, Scripture is God's primary mode of communication with his people in the theodrama. Some consider Scripture as the *script* of the drama. They argue that the Bible is not a mere record of previous acts, but a script giving normative directions to actors seeking to live faithfully in the theodrama today.⁵⁵ This assertion is true, so they are rightly emphasizing the perlocutionary intentions of the Bible and the importance of performing scripture along with knowing it. At the same time, it is not the entire picture, because the Bible does not give specific actions and lines of dialogue to perform, as a script in a drama would. In this sense, Scripture is not technically a script. The proper understanding of the Scripture in theodrama is a God-inspired text that communicates everything necessary for human actors to understand and participate in the drama in the form of various kinds of literature, such as prose, letters, songs and poems. Vanhoozer explains it in this way:

The Bible is a collection of various scenes from the one theodrama that, taken together, communicate the meaning and significance of what God is doing as well as what we are to do in response. It follows that *what the church indwells and performs is not the script per se but rather the past, present, and future theodrama that the script transcribes, describes, and prescribes and anticipates. . . . it is Scripture: the authoritative word that transcribes, describes, and prescribes the church's participation in the drama that the Bible presupposes and implies. The point bears repeating: Scripture gives us not a script in the narrow sense of the term—a detailed template for speech and action—but in the broader sense of a collection of authoritative scenarios that serve as lessons, positive and negative, for us (1 Cor 10:6-11). We are to speak and act in situations today as faithful prophets and apostles did in theirs. . . . All Scripture is inspired by God and profitable (2 Tim 3:16 RSV) for governing our understanding of the theodrama and for training in right participation. (italics in original)⁵⁶*

⁵⁵Eugene Peterson describes interpreting Scripture as a process of inhabiting in the biblical script in such a way that understanding and participation are inseparable. Eugene H. Peterson, *Eat This Book: A Conversation in the Art of Spiritual Reading* (Grand Rapids: Wm. B. Eerdmans Publishing, 2006), 69; Brueggemann argues that Scripture presents a "counterscript" that subverts and reforms the ways of thinking and living dominated by the contemporary socio-cultural script. Brueggemann, "Counterscript." Vaden argues that the perlocutionary function of the Bible involves a command to people to live according to its direction. Brett Vaden, "Theodramatic Rehearsal: Fighting Self-Deception through the Dramatic Imagination," *Religions* 5, no. 1 (March 3, 2014): 306.

⁵⁶Vanhoozer, *Faith Speaking Understanding*, 246. See also Lugt, *Living Theodrama*, 94. Lugt understands the Scripture as a "transcript" and a "prescript."

To sum it up, the Bible transcribes the coherent story of theodrama from the beginning to the end. At the same time, the Bible prescribes the normative imperatives of Christian ethicospiritual life in contemporary contexts. Also, the Bible describes general doctrinal pathways that promote human wellbeing that therapy can apply to those who have experienced suffering in a fallen world. Because God is the author of life and knows every person's heart and story,⁵⁷ it is natural that he would be the best source of instruction for wellbeing. God's word heals (Ps 107:20; Prov 4:20-22), gives relief from depression and weariness (Ps 119: 25, 28), and leads to delight and thanksgiving (Ps 119:7, 24).⁵⁸

These functions of the Scripture help believers to interpret their personal experience of trauma in light of the story of Scripture and live faithfully according to his word. The stories of diverse traumas in the Bible show that God has the power to transform any trauma in this sinful world to his goodness. For example, Joseph's brothers attempted to kill him and sold him into slavery, but God used what was intended for evil for the good of saving his family through Joseph (Gen 45:5; 50:20). Also, the crucifixion of Christ was the peak of human depravity, but God used the curse of the cross to bring salvation to his people (Gal 3:13; John 13: 48). In this way, by providing the overall theodramatic plotline, the Bible teaches that one's personal traumatic experience can have a transcendent value within God's redemptive purpose. In this sense, the Bible is the channel of God's grace through which believers who have experienced trauma can

⁵⁷Calvin says that God in his providence and paternal care foresees whatever would be useful and beneficial for a person's life even before they are born. See Calvin, *Institutes of Christian Religion*, 1.14.22.

⁵⁸According to Johnson, the Bible is "not merely diagnostic; it also brings health and well-being." He further illustrates the word of God as a soul-food: "It is often likened to food. 'Man does not live by bread alone but man lives by everything that proceeds out of the mouth of the Lord' (Deut 8:3; See Mt 4:4; Lk 4:4). Food for the body is a symbol of a deeper kind of soul-nourishment. Jesus called himself 'the bread of life' (Jn 6:35, 48), saying that those who believed on him would not hunger or thirst (Jn 6:35). He was teaching that truths about his person and work can feed and strengthen the soul." Johnson, *Foundations for Soul Care*, 423.

picture God's transcendent plan beyond their immediate situation.

Also, the prescriptive word of God provides direction in the midst of trauma. The word of God is “a lamp for [the] feet” and “a light on [the] path” (Ps 199:105). Vanhoozer argues that human actions should be characterized by “fittingness,” as defined by Scripture in the context of the whole drama.⁵⁹ Living according to the Scriptures does not mean to simply repeat robotically the actions depicted in the Bible, but to practice God's will in any given context by utilizing one's biblical imagination—the ability to locate oneself in relation to the grand narrative of the theodrama and discern what language and action fit the immediate situation. Johnson refers to this as a “Scripture based-imagination,”⁶⁰ and Vanhoozer calls it “canon-sense.”⁶¹ Christ is the perfect embodiment of this faithful imagination: he is the completion of the law and the word itself in flesh (Matt 5:17; John 1:14). Therefore, living according to Scripture is to enact faithful imagination of what it looks like for Christ to live within believers today. This is to be the normative way of Christian life in every circumstance even in the midst of trauma. It is in this way that we are to embody the form of Christ.⁶²

Community-based Living

Fourth, theodrama is about community. Each human actor has distinct roles, gifts, and responsibilities given by God, and an individual actor in theodrama is always performing in the context of a larger community.⁶³ Theodramatic living is “not a private affair for individuals but a community-building project.”⁶⁴ God has called his people to

⁵⁹“What is ‘fit’ is what rightly finds its place in the ‘whole.’” Vanhoozer, *The Drama of Doctrine*, 256.

⁶⁰Johnson, *Foundations for Soul Care*, 563.

⁶¹Vanhoozer, “Forming the Performers,” 12.

⁶²I will deal with the embodiment of Christlikeness at the last section of this chapter.

⁶³Lugt, *Living Theodrama*, 10; Todd E. Johnson and Dale Savidge, *Performing the Sacred (Engaging Culture): Theology and Theatre in Dialogue* (Grand Rapids: Baker Academic, 2009), 61-65.

⁶⁴Vanhoozer, *Faith Speaking Understanding*, 10.

build a particular community in which Christ is the head—the Church. The church community participates in God’s redemptive drama by sincerely responding together to God’s calling and faithfully living in Christ, and thereby making the kingdom of God visible. Vanhoozer explains that the church is “the visible presence of the invisible, the tangible experience of the kingdom of God on earth” where people “freely and joyfully do the will of God on earth as it is in heaven.”⁶⁵

While God’s kingdom is already present in the Church on earth, it awaits eschatological consummation in the future.⁶⁶ Today, there are two conflicting kinds of community: one is the Church on earth, the community of people called by God in which Christ rules by his word; the other is the secular community of the world without Christ— “godless congregations,” where people follow whatever is good in their own eyes.⁶⁷

In the midst of this ultimate social conflict, God has called the Church to participate in God’s mission. The church is called to be “the royal theater” exhibiting the word of truth, grace, and the love of God to the world; an “interactive theater” transforming the broader society.⁶⁸ Each member plays a part in the corporate mission by walking together in Christ, preaching the gospel to all nations, and acting as agents of transformation in all realms according to God’s will, until God’s kingdom is fully established. Public reformation is, as Vanhoozer says, “the church’s demonstration of life in Christ—to the glory of God and for the sake of the world. When the people of God display a flourishing life in obedience to Christ in the power of the Spirit, they both glorify God and demonstrate the power and wisdom of the gospel to the world.”⁶⁹

⁶⁵Vanhoozer, *Faith Speaking Understanding*, 6.

⁶⁶*Ibid.*, 100.

⁶⁷*Ibid.*, 152-53.

⁶⁸*Ibid.*, 182-83.

⁶⁹*Ibid.*, 7.

The ecclesial aspect of the theodrama addresses the role of community in healing from trauma. Since each believer is a part of Christ's body, the Church (1 Cor 12:27), a believer's trauma affects the whole church. The reality is, however, that many traumatized people suffer from isolation from family, friends, and the church community. Some families conceal and bury a person's trauma experience because of shame and guilt.⁷⁰ Some people avoid contact with a trauma victim because it makes the relationship uncomfortable or they assume that the person wants to be alone.⁷¹ Many do nothing but feel sorry for trauma survivors because they do not know how to help and fear doing something wrong.⁷² These responses obviously fall short of the role that God intended the Church to play. Just as an injured person does not leave their wound untreated, the Church as the body of Christ should take care of the traumatized member in its midst. Jesus says that whatever we do for a brother or sister in Christ, we do for Christ (Matt 25:40). In this way, serving a traumatized member of the church with love and care is serving Christ, which is a privilege and responsibility of the Church.

Moreover, the theodramatic mission of the church for transforming society calls for reforming distorted sociocultural systems surrounding trauma. The gospel is not only about individual salvation but also about the re-establishment of God's kingdom in which people can experience peace, justice, mutual love, and holiness before God (e.g., Amos 5:24; Isa 11:1-6). Therefore, when the people of God, the Church, meet a person who is suffering from trauma, they need to sensitively discern traumatogenic aspects of the person's surroundings and work to transform them according to the word of God. In this sense, trauma should get the Church's attention and cause them to listen to the issues

⁷⁰Ervin Staub, *The Psychology of Good and Evil: Why Children, Adults, and Groups Help and Harm Others* (Cambridge: Cambridge University Press, 2003).

⁷¹R. Timothy Kearney, *Caring for Sexually Abused Children: A Handbook for Families & Churches* (Downers Grove, IL: InterVarsity Press, 2001), 65.

⁷²*Ibid.*

surrounding the trauma, and perhaps lead them to promote sociocultural reform according to the gospel.

Christlikeness: The Goal of Theodramatic Living

Fifth, at the center of the theodrama is Christ.⁷³ God is reconciling the world to himself through Christ (2 Cor 5:18). Only through Christ's atoning work can humanity experience the grace of redemption and reconciliation with God. Only through union with Christ can human beings be restored to what they were created to be—the image of God.⁷⁴ When believers abide in Christ, the perfect image of God, they put on the perfection of God's image (2 Cor 4:4; Col 1:15). Therefore, entering into this journey of conforming to Christ is the ultimate goal of the theodramatic life.⁷⁵

This life, seeking Christlikeness, provides a new identity and a new way of life. In Christ, the old self “has been crucified with Christ” and Christ comes to live within (Gal 2:19-20). The perfect righteousness of Christ is imputed to believers.⁷⁶ In Christ, sinful, unclean, guilty and shameful humanity is declared by God to be justified, sanctified, righteous, and perfect; they are now accepted as his beloved children following Jesus Christ the first son of God.⁷⁷ The old has gone and the new has come (2 Cor 5:17). The new self in Christ defines who they really are now. This new identity is a gift of God who graciously provides undeserved believers with the declaration of salvation through Christ.⁷⁸

⁷³Balthasar, *Theo-Drama*, 12; Vanhoozer, *Faith Speaking Understanding*, 103; Vanhoozer, *The Drama of Doctrine*, 393.

⁷⁴Vanhoozer explains, “Christ fulfills humanity’s destiny by perfectly obeying God’s will, thereby fulfilling the covenant role first assigned to Adam.” Vanhoozer, *Faith Speaking Understanding*, 127.

⁷⁵Johnson, *Foundations for Soul Care*, 543; Vanhoozer, *Faith Speaking Understanding*, 127.

⁷⁶Calvin, *Institutes of Christian Religion*, 3.11.2.

⁷⁷Johnson, *Foundations for Soul Care*, 397-98.

⁷⁸Johnson calls this aspect of salvation as “declarative salvation.” *Ibid.*, 216.

This new identity in Christ, in turn, leads a new way of life, which Johnson has called, “reformative salvation,” transforming one’s inner and outer life by becoming more and more like Christ.⁷⁹ In union with Christ, he abides in the believers, and they abide in Christ (John 15:4-27; Rev 3:20). Since Christ dwells in believers, they “share or participate in Jesus’ death and resurrection so that events that happened to him now become part of the narrative of [their] own lives.”⁸⁰ Since they are in Christ, every moment of their lives, including suffering, wounds, and victories, has to do with Christ as they gradually put on the form of Christ, thinking, feeling, and acting more like him in every situation. Johnson says that the goal of Christiformity is to develop biopsychosocial wholeness and ethicospiritual holiness.⁸¹ In C.S Lewis’ words, “The church exists for nothing else but to draw men into Christ, to make them little Christs. If they are not doing that, all the cathedrals, clergy, missions, sermons, even the Bible itself, are simply a waste of time.”⁸² In theodrama, therefore, Christ is not only the warrant of redemption but also the epitome of humanity. Christiformity is both a gift of God, in which one can be fully accepted, healed, and redeemed as God’s beloved child through Christ, and a developmental process as a believer seeks to grow into Christ.

The Christ-centeredness of theodrama means that everything in this drama, including trauma experience, has to do with Christ. The eucatastrophic conclusion of a personal drama that includes trauma is actualized only through Christ. In the midst of trauma, the practice of dipolar personal agency is a privilege and responsibility only for those who are in Christ. To live according to Scripture in the midst of trauma is to live like Christ. The Church is the body of Christ in which a traumatized victim can

⁷⁹Johnson, *Foundations for Soul Care*, 216-18.

⁸⁰Vanhoozer, *The Drama of Doctrine*, 393.

⁸¹Johnson, *God and Soul Care*, chap.3.

⁸²C. S. Lewis, *Mere Christianity: Comprising The Case for Christianity, Christian Behaviour, and Beyond Personality* (New York: Touchstone, 1996), 171.

experience God's love and care through his people, and through which a traumatogenic socioculture can be transformed by the justice and love of Christ's gospel. In other words, Christ is the God who will redeem his people from trauma, and he is the very person who all believers need to follow, even in the midst of trauma.

Embodying Christlikeness in Trauma

According to the theodrama, all people today live in the era between redemption and the consummation. The drama of redemption, which, in one sense, began even before creation, has been completed in Christ (Eph 1:1-14) and as a result, our sin-scarred, stained, and damaged souls are saved through Christ's vicarious suffering and death on the cross (2 Cor 5:21). The drama continues until the time of consummation, when all believers will be perfectly transformed into Christ's image (Gal 4:19; Rom 8:29-30; Phil 3:20-21). Since Jesus Christ is the "exact imprint" of God's image (Heb 1:3; Col 1:15; 2 Cor 4:4), he is the perfect model of life for all Christians, who have also been created in the image of God. Therefore, embodying Christlikeness—his humanity, not deity—is the ultimate goal of the Christian life.⁸³

Embodying Christlikeness, Christiformity, is a lifelong journey in understanding the meaning of Christ's words and deeds, holding it as the highest norm of interpreting the world, and following Christ's example of living obediently in the midst of everyday life, even in the midst of trauma. This section will argue that embodying Christlikeness in suffering is a therapeutic and faithful aspect of living out the theodrama that serves as a God-given way to promote healing from trauma. The process of conforming to Christ's image is, for the wounded believer, a therapeutic journey of coming to see God's comfort and compassion and experiencing the ultimate resolution of

⁸³Johnson, *Foundations of Soul Care*, 46-47; Thomas à Kempis earlier pointed out the same theme of imitating Christ. See Thomas à Kempis, *The Imitation of Christ*, trans. Aloysius Croft and Harold Bolton (Minneapolis, NY: Dover Publications, 2003).

the problems of sin, damage, and suffering. Along the way, it also promotes the development of ethicospiritual holiness, which best manifests God's glory by humans. To support the argument, this inquiry will explore diverse aspects of Christlikeness related to the cross and discuss their pastoral significances for healing and holiness.⁸⁴

The Silence on the Cross

Many have noted the significance of Christ's final words on the cross,⁸⁵ however, his silence in the crucifixion is rarely emphasized in Christian preaching and teaching, though it holds great therapeutic implications for sufferers. According to the biblical record, Jesus was alive for about six hours on the cross (Mark 15:33). During that time, he said only seven sentences and otherwise did not speak, "like a lamb before its shearer is silent" (Acts 8:32).⁸⁶ Christ's silence, according to Swinton, indicates the voicelessness of pain.⁸⁷ The Son of God, a perfect human without sin, was broken and humiliated on the cross, rejected by Father for the sake of human redemption, and cursed with the yoke of the sins of humanity. His suffering was "not romantic or heroic but real and terrible."⁸⁸ It was a form of suffering that leads one into silence.⁸⁹

A numbing silence is a normal initial reaction when people encounter traumatic suffering: those who have received an unexpected diagnosis of an incurable disease, a

⁸⁴The practices of Christiformity are diverse. According to Johnson they include holiness, authenticity, unity and purity of heart, reciprocity of humility and gratitude, cruciformity (*Kenosis*), love of God, neighbors, and enemies, faithful imagination and discernment, and maturation and the development of glory-capacity. See Johnson, *Foundations for Soul Care*, 548-63. However, because this study focuses on trauma, this chapter focuses only on the Christiformic aspects around Christ's suffering.

⁸⁵For example, Stanley Hauerwas, *Cross-Shattered Christ: Meditations on the Seven Last Words* (Grand Rapids: Baker Books, 2005); Carlyle Marney, *He Became Like Us: The Words of Identification* (Nashville, TN: Abingdon Press, 1964).

⁸⁶For the seven sentences of Christ on the cross, see Luke 23:34; John 19:26-27; Matt 27:46; Mark 15:34; John 19:28, Luke 23:46; John 19:30.

⁸⁷Swinton, *Raging with Compassion*, 95.

⁸⁸*Ibid.*, 99.

⁸⁹Dorothee Sölle, *Suffering* (Minneapolis: Fortress Press, 1984), 68.

rape, or the death of a child find that they cannot speak because they are so overwhelmed by emotional pain.⁹⁰ The silence of suffering weaves together Jesus' suffering and that of the traumatized person. Put differently, Christ's silence is a sign of invitation to all sufferers that he is willing and able to identify with the suffering of everyone, though the actual identification—union with Christ—is only reserved for believers.

Christ's silence in the midst of suffering provides two therapeutic implications. First, God fully understands those who undergo the suffering of trauma. His silence on the cross indicates that Jesus, the Son of God, entered into human history and actually experienced the most horrible and underserved suffering.⁹¹ Thus, God is able to completely empathize with the pain and horror of trauma and fully knows the experience of suffering. Second, God is with his people in the midst of trauma. Christ demonstrates his love for humanity by bearing suffering silently for his people and thus he became a sufferer himself (Rom 5:8; Heb 2:17). As John Stott puts it, "The cross of Christ is *the proof of God's solidarity love*, that is, of his personal, loving solidarity with us in our pain."⁹² Silence is not a mere absence of words or thoughts but a "fullness of presence."⁹³ Being with those who suffer in silence is a therapeutic practice in which they can see that they are not alone but God is present with them in their suffering.

In other words, Christ's silence on the cross is a powerful message of healing that reveals God's love and care that is available for believers.⁹⁴ Embodying Christlikeness in this sense is to acknowledge Christ's silence in suffering, to identify the

⁹⁰Kathleen D. Billman and Daniel L. Migliore, *Rachel's Cry: Prayer of Lament and Rebirth of Hope* (Eugene, OR: Wipf and Stock Publishers, 2007), 106. Such a reaction of social detachment and emotional anesthesia is called "psychic numbing." See John Preston Wilson and Terence Martin Keane, *Assessing Psychological Trauma and PTSD* (New York: Guilford Press, 2004), 25-26.

⁹¹Swinton, *Raging with Compassion*, 100.

⁹²John Stott, *The Cross of Christ* (Downers Grove, IL: InterVarsity Press, 2006), 329.

⁹³Hopkins and Koppel, *Grounded in the Living Word*, 29.

⁹⁴God's action is a form of his speaking, and his speaking is a form of his action. See Vanhoozer, *Faith Speaking Understanding*, 15.

continuity of a believer's trauma with the cross of Christ, and to experience solidarity with him in the midst of suffering. Therefore, those who take in God's silence can be comforted by his full empathy and presence in the midst of trauma.

The Cry to God: Lament

Christ's silence does not imply that trauma is to remain silent forever. Silence about trauma reinforces isolation and secrecy, and leads to the death of the soul.⁹⁵ The traumatized thus need a voice to speak out and to be heard. On the cross Christ also spoke with a voice of lament: "My God, My God, Why have you forsaken me?" (Matt 27:46). Embodying Christlikeness in trauma includes the practice of lament.

Expressing pain and suffering is not an ungodly practice for Christians. From the time of ancient Israel, Allen Verhey says, "the practices of faith allowed not only for the expression of praise and joy but also for the expression of grief and doubt and fear and anger."⁹⁶ In many cases people try to hide their pain and suffering following a traumatic history or event; they pretend that they are fine and maybe even focus on the "good" of their afflictions, in the name of the Lord. But these are the faces of the false self influenced by the inauthenticity of a distorted religious environment in which they feel others (even God) expects them to rejoice and be grateful for their suffering without adequate preparation.⁹⁷ Nydam calls this spiritual triumphalism and points out that this false religious practice minimizes the reality of suffering under the guise of spirituality.⁹⁸ If a real emotion is continually neglected and concealed, it can be destructive. For

⁹⁵Bessel A. Van der Kolk, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (New York: Viking, 2014), 232.

⁹⁶Allen Verhey, "The Practice of Prayer and Care for the Dying," in *Living Well and Dying Faithfully: Christian Practices for End-of-Life Care*, ed. John Swinton, Richard Payne, and Stanley Hauerwas (Grand Rapids: Wm. B. Eerdmans Publishing, 2009), 98.

⁹⁷Kyubo Kim, "False Self, True Self, and Self-Denial: The Contribution of Object-Relations Theory to Christian Self-Denial," *Journal of Counseling and Gospel* 22, no. 2 (2014): 43–79.

⁹⁸Ronald J. Nydam, "Facing Cancer: The Spiritual Dangers of a Docetic Engagement of Acute Leukemia," *Calvin Theological Journal* 45, no. 2 (November 2010): 335–44.

example, repressed emotions in trauma, such as anger or shame, frequently show up as aggression—either inwardly (towards themselves) or outwardly (towards others).⁹⁹

Lament rejects such false ways of being. Lament is an honest emotional expression of pain and suffering before God. Jesus, when facing death on the cross, did not hide his agony and fear (Lk 22:44). And on the cross, he honestly revealed his intense sense of abandonment by God. (Matt 27:46) In lament, there is “no pretense, no denial, no withdrawal to some otherworldly consolation.”¹⁰⁰ Through lament, sufferers can genuinely experience and speak out their overwhelming feelings. It is a means of sharing one’s emotions with God from the heart. These laments are heard by God who listens to their cries (Ps 6:8-9). The practice of lament is, in this sense, a faithful way of being emotionally authentic in suffering before God. For example, the psalmist in Psalm 88:3-14, frankly confesses his heart in suffering:

I am overwhelmed with troubles and my life draws near to death. I am counted among those who go down to the pit; I am like one without strength. I am set apart with the dead, like the slain who lie in the grave, whom you remember no more, who are cut off from your care. You have put me in the lowest pit, in the darkest depths. . . . My eyes are dim with grief. I call to you, LORD, every day; I spread out my hands to you. Do you show your wonders to the dead? Do their spirits rise up and praise you? . . . But I cry to you for help, LORD; in the morning my prayer comes before you. Why, LORD, do you reject me and hide your face from me?

Here, the psalmist boldly cries out to God asking how he could leave him in such extreme suffering. He even confesses his sense of rejection and abandonment from God. Such emotional protest appears to express doubt about God’s purposes towards him. And indeed, traumatized people often “feel utterly abandoned, utterly alone, cast out of the human and divine systems of care and protection that sustain life,” thus they lose trust in relationship and remain isolated from all connection, including family and God.¹⁰¹ The

⁹⁹David W. Augsburger, *Hate-Work: Working through the Pain and Pleasures of Hate* (Louisville, KY: Westminster John Knox Press, 2004), 37, 86-87.

¹⁰⁰Verhey, “The Practice of Prayer and Care for the Dying,” 100; Soong-Chan Rah, *Prophetic Lament: A Call for Justice in Troubled Times* (Downers Grove, IL: InterVarsity Press, 2015), 21.

¹⁰¹Judith L. Herman, *Trauma and Recovery: The Aftermath of Violence—From Domestic Abuse*

psalmist, however, is seeking God; if he did not continue to have faith in God as good and just, he would not cry and pour out his heart in trust before him. This is reflected in the psalmist's confession of faith that usually precedes his bold expression of emotional pain: "Lord, you are the God who saves me" (Ps 88:1). Swinton rightly says, "Lament is therefore not a mark of faithlessness but an act of faithfulness in situations where faith and hope are challenged."¹⁰² In response to honest and faithful lament, God listens (Ps 106:44), prays for sufferers with wordless groans (Rom 8:26), and provides his comfort (2 Cor 1:4).

Also, lament is a means of entreating God for his help in changing the existing suffering and injustice. Swinton describes it as a "hopeful prayer" that provides sufferers "with a language of outrage that speaks against the way that things are, but always in the hope that the way things are just now is not the way they will always be."¹⁰³ In the midst of the broken reality of distorted orders, injustice, and wickedness, lamenters acknowledge the difficulty of the present life and seek God's transformational work in the world.¹⁰⁴ Lament is a cry to God asking him to turn his face toward those who are suffering and to act on their behalf. Christ modeled this when he prayed, "My Father, if it is possible, let this cup pass from me" (Matt 26:39a). His words were a hopeful prayer, spoken in an attitude of total dependence on God, which reflected in the second part of his prayer, "yet not as I will but as You will" (Matt 26:39b). The hope for survival and salvation only comes from God. Thus, Christ cried out, "Father, into your hands I commit my spirit" (Lk 23:46). Verhey says, "In lament, suffering finds a voice looking heavenward. Looking heavenward, lament moves from distress toward wholeness, from

to *Political Terror* (New York: Basic Books, 2015), 52.

¹⁰²Swinton, *Raging with Compassion*, 109.

¹⁰³Ibid., 105.

¹⁰⁴Rah, *Prophetic Lament*, 23.

powerlessness to the certainty of a hearing, from anger toward confidence in God’s justice, from guilt toward the assurance of God’s forgiveness.”¹⁰⁵ Through lament, sufferers see God as their Heavenly Father who is the only hope of transforming their mourning into joy.

By embodying the form of Christ’s lamentation, sufferers can no longer eschew or deny the reality of the trauma they have experienced, but, rather, face it.¹⁰⁶ By acknowledging their tragic reality in lament, they can fully experience and honestly express the emotions of suffering before God and practice dependence on him as they hope in his redemptive action to destroy the evil and save them. In this sense, it can be profoundly therapeutic, faithful, and hopeful to approach God in lament.

The Vulnerability of Christ: Embracing Wounds

Feelings of vulnerability are generally unwelcome.¹⁰⁷ The term “vulnerable” is a derivative of the Latin word *vunerare*, which means “capable of physical or emotional wounding, hurt or exposure” and “open to attack or damage.” References to “wounding, hurt, and damage” are sufficient to attach negative feelings to the concept of vulnerability. In particular, those who have experienced trauma can develop a pathological sense of shame related to vulnerability and therefore seek to cover their shame by responding with denial, silence, isolation, or aggression.¹⁰⁸ These alternatives are dangerous for a person’s psychological, relational, and spiritual wellbeing, and lead to

¹⁰⁵Verhey, “The Practice of Prayer and Care for the Dying,” 99-100.

¹⁰⁶I will deal with how to incorporate Christ’s lament into our practices in the next chapter, by exploring the palmist’s examples of lament. The principled pattern of lament in the Psalms is to echo Christ’s lamenting voice, to plead to God for help, and to praise God’s glory in hope that God will save those that suffer. See Rah, *Prophetic Lament*, 65.

¹⁰⁷Brené Brown, *Daring Greatly: How the Courage to Be Vulnerable Transforms the Way We Live, Love, Parent, and Lead* (New York: Gotham Books, 2012); Robert Mirow, “The Power of Vulnerability,” *Learning Disability Practices* 6, No 10 (December, 2003): 36. Thomas E. Reynolds, *Vulnerable Communion: A Theology of Disability and Hospitality* (Grand Rapids: Brazos Press, 2008), 108.

¹⁰⁸See chap. 3.

destructive results, such as addiction, depression, eating disorders, bullying, suicide, and abuse.¹⁰⁹ The process of accepting one's vulnerability entails addressing one's feelings of shame, which can be painful, but it is not nearly as dangerous as the consequences of concealing it.

It is therefore crucial for the traumatized to acknowledge their own vulnerability and embrace it as a part of their self. In this sense, Christ's embodiment of human vulnerability is a significant therapeutic focus for the practice of Christiformity through which the traumatized can embrace their wounds.

From his birth to death, Jesus Christ embraced the vulnerability of his humanity. The Bible describes the Son as the Creator and Sustainer of all creation (John 1:1-18; 1 Cor 8:6; Eph 3:9; Col 1:16-17; Heb 1:3; Rev 3:14), the king over all things (Matt 11:27; 28:18; John 3:35; 1 Cor 15:27; Eph 1:20-22), the Lord of the Church (Matt 3:2; 5:11; 10:32, 37; John 18:37; 1 Cor 11:3; Eph 1:22; Col 1:18), and the one who will judge the living and dead (John 5:27; Acts 10:42; Rom 14:10; 2 Cor 5:10).¹¹⁰ Yet, this great and powerful Son, the second person of the Trinity, emptied himself and took on flesh (Phil 2:7; Rom 8:3). In his humanity, the Son grew in Mary's womb until the day arrived for her to give birth (Matt 1:25; Luke 2:6). He was wrapped in cloths and laid in a manger (Luke 2:12), nursed at Mary's breast, was guided by his parents (Matt 2:13-21; Luke 3:51), and grew in wisdom and stature (Luke 2:40; 3:52). Jesus was circumcised

¹⁰⁹See Peter Sheras, *Your Child: Bully or Victim?* (New York: Simon and Schuster, 2010); David Lester, "The Role of Shame in Suicide" *Suicide and Life-Threatening Behavior* (1997), 27:352-61; June P. Tangney et al., "Shamed into Anger? The Relation of Shame and Guilt to Anger and Self-Reported Aggression," *Journal of Personality and Social Psychology* 62, no. 4 (1992): 669-75. Bonnie Moradi, Danielle Dirks, and Alicia V. Matteson, "Roles of Sexual Objectification Experiences and Internalization of Standards of Beauty in Eating Disorder Symptomatology: A Test and Extension of Objectification Theory," *Journal of Counseling Psychology* 52, no. 3 (2005): 420-28; Lynn E. O'Connor et al., "Shame, Guilt, and Depression in Men and Women in Recovery from Addiction," *Journal of Substance Abuse Treatment* 11, no. 6 (November 1994): 503-10.

¹¹⁰Bavinck, *Reformed Dogmatics*, 414.

according to the Law of Moses (Luke 2:21-23) and was tempted in all things as a human (Heb 4:15). He agonized over his coming death (Matt 26:37-38; Mark 14:33; Luke 22:44; John 12:27) and was mocked by sinners (Matt 27:27-31; Mark 15:16-20). He experienced abandonment and misery, and death (Matt 27:32-37; Mark 15:21-26; Luke 23:26-34; 44-48; 19:41-44; John 11:35; Matt 27:45-54; Mark 15:33-39; Phil 2:7-8; 2 Cor 8:9). Even after the resurrection, the wounds of the cross remained on his body (John 20:27). In short, God the Son willingly became vulnerable by entering into time and space in order to live an ordinary human life that included weakness, brokenness, damage, and fragility. Jesus Christ, the invulnerable Savior, played his part in the theodrama, not by rejecting human vulnerability, but by embracing it.

Vulnerability is a part of the universal human experience. Christ put on human vulnerability because to be human is in essence to be vulnerable. God created the world, including humans as “good,” not perfect (Gen 2).¹¹¹ In addition, since the Fall, all humans have gone astray and each continues to turn to his or her own way (Isa 53:6) and all of creation groans and suffers because of sin (Rom 8:22). In this state, deficiency, weakness, and damage are inseparable from human life. Though the level of severity is very different from person to person, human vulnerability is a “shared human experience—something we all go through rather than something that happens to ‘me’ alone.”¹¹²

Some experience vulnerability through traumatic damage which can have lifelong effects, leading to the loss of bodily agency; uncontrollable physical symptoms may recur, scars may remain as visible, tangible reminders, unwanted memories, dreams,

¹¹¹VanGemeran explains that creation, including human beings, is not marked by perfection, but it is suitable for its purpose. The new creation will be perfect, holy, and characterized by the presence of God the Father and the Lord Jesus Christ. See Willem VanGemeran, *Progress of Redemption: The Story of Salvation from Creation to the New Jerusalem* (Grand Rapids: Baker Academic, 1996), 46; 64.

¹¹²Brown, *Daring Greatly*, 132.

and flashbacks may consistently torment the traumatized.¹¹³ Such wounds carved into a victim's heart, body, or memory may not be fully healed as long as he or she is in the flesh. However, all wounds, regardless of their severity, inevitably become a part of the traumatized person, just as Jesus' nail-scarred hands and the pierced side became part of him.

Christformity involves embracing the wound as part of one's being. Avoiding or denying a wound is not helpful in this case; healing comes only when the wound is faced, acknowledged, and embraced.¹¹⁴ If one can acknowledge what the wound is and acknowledge the damage as part of one's story and body, the wound can be incorporated into one's normal functioning. This allows a person to volitionally control the wound for redemptive purposes, rather than allowing symptoms to control oneself. By incorporating the wound into oneself, a person begins to open up to the possibility of using their wound for God's purposes, just as Christ used his wounded body to show God's love for humanity and to transform his disciples (John 20:27). In so doing, the wound can be an instrument of God's ministry to move and transform his people, and the wounded believer can be a living example of Christ.

Therefore, embracing one's traumatic wounds is not shameful for Christians. Rather, it is a therapeutic process to accept the wound as a part of oneself, a faith-filled commitment to use it for God's purposes and a courageous practice of imitating Christ in the midst of radical difficulties.

¹¹³Jones, *Trauma and Grace*, 134-5.

¹¹⁴Brennan Manning, *Abba's Child: The Cry of the Heart for Intimate Belonging* (Colorado Springs: NavPress, 2002), 73-4.

Do Not Sin, but Forgive

Traumatized people may be more likely to fall into certain kinds of sinful activities, such as bitterness, unbelief, revenge, blame-shifting, addiction, or suicide.¹¹⁵ However, no matter how severe their pains and suffering, no matter what psychological and physical abuse they have had to endure, sin can never be a solution. Though the abuse and suffering can help us to understand why some sin occurs, God is righteous and he cannot sanction any sin, no matter the reason (Pss 130:3; 5:4, 5; 7:11; Deut 32:39-42; Heb 12:25-29; Rev 19:1-3). Sin is not excusable, but sinners can be forgiven in Christ. Christ's example in dealing with sin lays out three principles for those who have experienced trauma to follow.

First, Christiformity is experienced through receiving forgiveness of sin on the basis of the merits of Christ. Since Christ died as an atoning sacrifice, those who have faith in him are considered righteous before God (Rom 3:25-26). God's forgiveness of sin is a definitive declaration: "for I will forgive their iniquity, and I will remember their sin no more" (Jer 31:34)—Johnson has termed this "declarative salvation."¹¹⁶ While many people have a cognitive knowledge of the forgiveness of sin in Christ, they often fail to experientially accept this truth. In particular, those who have been traumatized may have such a strong sense of rejection and abandonment that they have difficulty trusting others including family, friends, and God, resulting in emotional numbness.¹¹⁷ As a result, they often have trouble personally accepting with their hearts the truth about forgiveness that they know in their heads. Jonathan Edwards acknowledged that the Christian faith is greater than mere cognitive knowledge; it includes "religious affections," which he called

¹¹⁵Fonagy, "Early-Life Trauma"; Pells and Treisman, "Genocide, Ethnic, Conflict, and Political Violence"; Sinha, "Chronic Stress, Drug Use, and Vulnerability to Addiction"; David Lester, "The Role of Shame in Suicide," *Suicide and Life-Threatening Behavior* 27, no. 4 (December 1, 1997): 352–61.

¹¹⁶Johnson, *Foundations for Soul Care*, 215.

¹¹⁷Herman, *Trauma and Recovery*, 51-52.

spiritual knowledge which includes the love of God and others.¹¹⁸ Johnson, in a similar vein, also highlights the idea of “experiential salvation,” which refers to consciously and emotionally responding to the grace of salvation derived from communion with God through faith.¹¹⁹ Embodying Christlikeness should not be a mere mental assent of the forgiveness of sins available to all in Christ but it should be a personal experience of it. This experience will be temporal and embodied, and it may be sporadic,¹²⁰ but it is an important therapeutic practice to eventually lead to the experience of new affections, such as the joy of being forgiven, a sense of belonging to God, and love of God.¹²¹

Second, another aspect of embodying Christlikeness, regarding sin, is to make the goal of forgiving the perpetrators of trauma as Christ forgave those who crucified him: “Father, forgive them, they do not know what they are doing” (Luke 23:34). Given the severity of traumatic wounds that can promote anger and the seeking of revenge, it can be extremely difficult for survivors to forgive their perpetrators. The problem with unforgiveness, however, is that it hurts the victims by binding their hearts in bitterness with the perpetrator and entrapping them in a potentially endless spiral of sin, hatred or avoidance.¹²² Thus, forgiveness is a necessary goal for righteous living. “Do not repay anyone evil for evil. Be careful to do what is right in the eyes of everybody” (Rom 12:17). Jesus even commends, “Love your enemies and pray for those who persecute you, that you may be sons of your Father in heaven” (Matt 5:44).

¹¹⁸Jonathan Edwards, *The Religious Affections* (Mineola, NY: Dover Publications, 2013), 35–37. The term “cardivive” originates from the Greek, *kardia*, which refers to a heart. See Johnson, *Foundations for Soul Care*, 502.

¹¹⁹Johnson, *God and Soul Care*, chap. 15.

¹²⁰Johnson, *Foundations for Soul Care*, 215.

¹²¹Experiential salvation usually occurs in practicing the presence of God in everyday life, through means such as worship, personal devotions, loving relationships with other Christians, and praising the beauty of God’s creation and his work. Johnson, *God and Soul Care*, chap. 15.

¹²²Swinton, *Raging with Compassion*, 136-38.

This commandment of forgiveness may seem too radical to practice. Some trauma survivors may not be able to forgive their “enemies” until the consummation comes. For them, in reality, forgiveness may not be necessarily achieved in this world, though it will be eventually completed, for believers, on that day in Christ. This biblical principle thus gives survivors an ongoing goal of forgiveness of the perpetrators, but it is not a coercive, abusive demand without a concern for the heart of the victims. Forcing the issue of forgiveness can re-victimize those who have already been wounded by trauma under the guise of grace; Swinton refers to such people as “victims of grace.”¹²³ Therefore, the practice of forgiving the perpetrators can be considered a lifelong task that they may slowly and sensitively work towards through Christ.¹²⁴

Trauma survivors, however, may be helped by the experiential knowledge of Christ first forgiving their sins, enabling them to be able to slowly attempt to forgive a perpetrator. The apostle Paul says, “forgive each other, just as in Christ God forgave you” (Eph 4:32). Some may object to this kind of forgiveness, assuming that “I have never hurt Jesus like the offender hurt me. So, Christ may forgive me, but I cannot forgive that perpetrator.” However, Christ died on the cross for each person’s sin. The Scripture teaches that the result of every person’s sin was the crucifixion of Christ, and all can be forgiven because Christ bore the punishment of our sin instead of us. (e.g., Rom 3:23-26; 5:8-10,18; 1 John 2:1-2; 1 Pet 2:24; Eph 1:7). Therefore, every human being is responsible for Jesus’ death long before a perpetrator had sinned against them, and each believer has experienced Christ’s forgiving grace procured at the cross. As recipients of God’s gracious forgiveness it follows that believers should ideally forgive others with

¹²³Swinton, *Raging with Compassion*, 132.

¹²⁴Regarding the practice of forgiveness, Tracy wisely distinguishes it into three categories: judicial, psychological, and relational forgiveness. This differentiation is helpful to establish a realistic goal of forgiveness, thereby actually practice forgiveness. Steven R. Tracy, *Mending the Soul: Understanding and Healing Abuse* (Grand Rapids: Zondervan, 2009), 180-94. I will discuss differences of three ways of forgiveness in next chapter.

grace as well (Eph 4:32; Col 3:13; Luke 17:4). Forgiveness is, in this sense, for all believers, including trauma survivors, a faithful and desirable imperative—and maybe even a “natural”—response to God’s grace.¹²⁵

When appropriately pursued, the practice of forgiveness in Christ can be profoundly therapeutic. Anyone who has received God’s forgiveness in Christ can experience amazing grace, love, joy and gratitude. These gracious gifts of salvation, along with the help of the indwelling Spirit, promote the development of a heart that desires to extend grace to others.¹²⁶ When people remember the forgiveness they have received, they can participate in the goodness of God, who has the power to forgive and love, rather than relying on their own goodness, which is corrupted and often unable to forgive and love others.¹²⁷ In other words, God’s initiating grace of forgiveness facilitates human forgiveness rather than forcing it. This frees the forgiver from emotional anguish and the destructive spiral of sin. By definition, forgiveness involves releasing one’s bitterness, anger, and desire for revenge which are all expressions of hatred.¹²⁸ Thus, forgiving the perpetrator of evil is a helpful remedy for cleansing one’s heart and avoiding sinning in response to another’s sin. By resolving negative thoughts and bitter feelings, a forgiver can create room for a new future of peace, love and possibly reconciliation.¹²⁹

¹²⁵Though forgiveness is imperative for believers according to the New Testament, it can be extremely difficult for traumatized people to forgive the perpetrators because of rage, fear, or diverse kinds of defenses. Thus, before engaging in the practice of forgiveness, trauma survivors need to deal with their defenses, anger, and fear, and experience God’s forgiving grace. I will discuss these issues in the next chapter.

¹²⁶Edwards, *Religious Affections*, 172.

¹²⁷Ted Peters, *Sin: Radical Evil in Soul and Society* (Grand Rapids: Wm. B. Eerdmans Publishing, 1994), 20.

¹²⁸The Greek term, *aphiemi* (forgive), refers to “send away” or “release. See Timothy Friberg and Barbara Friberg, *Analytical Lexicon of the Greek New Testament* (Bloomington, IN: Trafford Publishing, 2005), “*aphiemi*.”

¹²⁹Desmond Tutu, *No Future without Forgiveness* (New York: Crown Publishing Group, 2009), 320–22.

There is one more problem that we must touch on. Though believers are called to forgive, it may not always be possible to reconcile with the perpetrator. Reconciliation requires repentance and some degree of transformation by the perpetrator. In the case that the offender does not repent and turn from his or her sinful ways, it could be dangerous to seek to be reconciled, because of the real possibility that the offender could harm the victim again. God's commandment to forgive those who persecute and love one's enemies may open the possibility of reconciliation with them, but it does not necessarily mean that one has to live with or befriend them. Placing oneself in danger in this way would be inappropriate, unwise and negligent of self-care. Paul Wadell explains:

We have to be careful about how we understand Jesus' call to nurture a forgiven and forgiving heart. In saying we should put no limits on our willingness to forgive, Jesus does not mean we should stay in situations that are unhealthy and harmful. Forgiveness ought always to be a path to new life, not annihilation. . . Jesus tells us to love our enemies, not necessarily to live with them, and certainly never to allow them to destroy us. . .there is an enormous difference between loving an enemy and loving a friend.¹³⁰

It would be ideal if a trauma survivor's practice of forgiveness always promoted reconciliation, but it may be that this often remains a hope in this fallen world.

Forgiving a perpetrator is not an instantaneous event that suddenly liberates the person from negative thoughts and emotions; it is not a magical means to make reconciliation happen. Rather, it is a gradual process of growing into Christ's image that believers need to repeatedly and steadily exercise every day with the help of the indwelling Spirit who consistently reminds them of Christ's forgiving grace and empowers them to forgive.

In addition, the forgiveness of perpetrators does not excuse their sin. God does not overlook or ignore human sin. If that were the case, Christ's death would not have been necessary. Christ's death was God's judgment and confrontation of human

¹³⁰Paul J. Wadell, *Becoming Friends: Worship, Justice, and the Practice of Christian Friendship* (Grand Rapids: Brazos Press, 2002), 166.

depravity.¹³¹ Through Christ, the punishment and curse of sin has already been addressed by the Judge of the earth and sinners are then forgiven by God. However, sin still remains today in this time between redemption and consummation. Those sins must be acknowledged and mortified.

Third, therefore, embodying Christlikeness includes engaging in self-reflection and mortification of sin. As mentioned in the previous chapter, trauma is always intertwined with sin—whether it stems from original sin, direct sinful activities, or the overarching corruption of creation and culture. Therefore, encountering trauma is encountering human depravity, including our own sins. Even though trauma victims may not directly commit a sinful act correlated with the traumatic event, those who are mature personal agents in Christ can reflect on their remaining sins even through that event.¹³² Job was, for example, “blameless, upright, and a man who fears God and shuns evil” (Job 1:1). It is clear from the biblical account of his story that his suffering was not a result of his own personal sin; rather it was originated from Satan and was permitted in God’s providence (Job 1:11-12; 2:3). Nevertheless, in the last scene of Job’s drama, his spiritual eyes were enlightened, so that he discerned and repented of his remaining sin: “My ears had heard of you but now my eyes have seen you. Therefore I despise myself and repent in dust and ashes” (Job 42:5-6). God was delighted to see Job’s faithfulness even in the midst of suffering and blessed him (Job 41:10-17). Job’s story tells us that mature Christians can sensitively discern their remaining sins as they walk through suffering and its aftermath before God. Given that the theodramatic approach views that trauma experiences are identified with the crucifixion of Christ, which reminds believers of their

¹³¹Gregory L. Jones, “The Judgment of Grace: Forgiveness in Christian Life,” *Theology Matter* 3, no. 4 (August 1997): 7–16.

¹³²According to Johnson, mature personal agents are characterized by rational-linguistic ability, a high level of self-awareness, the capacity of reasons and intentions, imagination, and responsibility. In particular, Christian mature personal agency is dipolar and thus include the ability to be aware of the indwelling Spirit. Only the mature Christian personal agents can see their sinfulness and depravity before God. See Johnson, *Foundations for Soul Care*, 310-12.

own sins, it is a faithful practice of conforming to Christ in trauma to engage in sincere self-reflection of sin.

When believers recognize their remaining sin, they can enter into the process of mortifying sin. The mortification of sin is the putting to death of all vain thoughts, evil affections, and wicked desires of the heart, as well as sinful behaviors.¹³³ Paul encourages Christians to put to death the sinful nature of the body, and to do so, as he himself strikes a blow to his body and makes it a slave for the Spirit (Col 3:5; Rom 8:13; 1 Cor 9:27)¹³⁴ Even “the choicest believers,” like the apostle Paul, “who are assuredly freed from the condemning power of sin,” says John Owen, “ought yet to make it their business *all their days* to mortify the indwelling power of sin” (Italic added).¹³⁵ “All their days” includes the days of trauma, so it is the responsibility of all believers to practice mortification: “For if you live according to the sinful nature, you will die, but if by the Spirit you put to death the misdeeds of the body, you will live” (Rom 8:13).

While the practice of mortification is an individual responsibility, it is carried out by God’s grace. God does not leave his children to walk along this path alone. The Holy Spirit works in them and with them to empower them to willingly obey to the practice.¹³⁶ In other words, only believers are empowered to mortify sin through the presence and work of God in them by his Spirit. Moreover, mortification increases their

¹³³Peter J. Leithart, “Calvin’s Doctrine of the Christian Life, Part II. Mortification,” *The Westminster Theological Journal* 56, no 2 (fall 1993), 195.

¹³⁴In 1 Cor 9:27, Paul says, in Greek, ἀλλὰ ὑποπιᾶζω μου τὸ σῶμα καὶ δουλαγωγῶ, μή πως ἄλλοις κηρύξας αὐτὸς ἀδόκιμος γένωμαι. Here, Paul’s usage of the word is striking. The Greek ὑποπιᾶζω means to “treat roughly, torment, [and] maltreat.” Felix W. Gingrich and Frederick W. Danker, *Shorter Lexicon of the Greek New Testament* (Chicago: University of Chicago Press, 1983), 208.

¹³⁵John Owen, “Of Mortification of Sin in Believers,” in *The Works of John Owen*, vol. 6, ed. William H. Goold (Edinburgh: The Banner of Truth Trust, 1991), 7.

¹³⁶“He doth no so work our mortification in us as not keep it still an act of our obedience. The Holy Ghost works in us and upon us, as we are fit to be wrought in and upon; that is, so as to preserve our own liberty and free obedience.” Owen, *Of the Mortification of Sin*, 20.

spiritual vigor and power,¹³⁷ and thereby they grow more and more into the ethicospiritual perfection of Christ (Eph 4:13; Matt 5:48). The more sin is mortified, the more sanctified a believer becomes.

In short, embodying Christlikeness with regard to the matter of sin is to experience the grace of forgiveness in Christ, to practice forgiveness for the perpetrators based on grace in due time, and to acknowledge and mortify their remaining sins. Through this practice of conformity to Christ, believers can obediently deal with the problem of sin, and therefore come to greater maturity, becoming increasingly holy to the stature of Christ, even in the midst of trauma.

Compassion

The word “compassion” is derived from the Latin words, *com* and *pati*, which together mean “to bear with” or “to suffer with.” It is understood “to be a sympathetic awareness of another’s distress, with a desire to alleviate it in some way.”¹³⁸ It refers to a deep concern for another person’s wellbeing, sharing pain with the person from deep within, which also includes actions for caring the person, which is a kind of love.¹³⁹ According to the Bible, God is compassionate by nature and Christ also embodied compassion during his life on earth (e.g, Exod 33:19; Pss 103:8; 111:3-4; Isa 30:18; 49:13; Neh 9:28; Lam 3:22; Matt 14:14; 15:32; 2 Cor 1:3; Jas 5:11). Jesus Christ had compassion on the large crowds who were hungry and like sheep without a shepherd, and so he acted as their shepherd and fed them (Matt 15:32-39; Mark 6:30-44; 8:3; John 10:11). He was compassionate toward those who were sick and healed them (Matt 14:14;

¹³⁷Owen, “Of Mortification of Sin,” 9.

¹³⁸Andrew Purves, *The Search for Compassion: Spirituality and Ministry* (Louisville, KY: Westminster John Knox Press, 1989), 15.

¹³⁹*Ibid.*, 68-69. Beyond a favorable feeling, agape love in the Scripture includes compassion for the pain and suffering of others, sincere concern about their sins, and specific care for transforming their lives. See Elliot, *Faithful Feelings*, 135-64.

20:29-34; Mark 1:41-45). He also taught people to be compassionate, even to those who were different from themselves, for example, in the parable of the Good Samaritan (Luke 10:25-37). Most of all, He was compassionate toward humanity, which was under the wrath of God, so that he laid down his life as an “atoning sacrifice” to redeem his people (1 John 4:10; 22; Rom 5:8).¹⁴⁰ The cross was the culmination of his compassionate love. Even in the act of dying on the cross, Christ was compassionate toward his fellow sufferers, as he comforted the selected one by extending his saving grace (Luke 23:43; John 19:26-27). Christ is the Lord of compassion (Jas 5:11).

Christ’s radical compassion, even unto death, is a challenging model for all Christians; he urged them “Go and do likewise” (Luke 10:37). Manning relates compassion with the perfection of Christlikeness:

Remember the passage in Matthew where Jesus says, “Be perfect as your heavenly Father is perfect”? In Luke, the same verse is translated, “Be compassionate as your heavenly Father is compassionate.” Biblical scholars say that the two words, *perfect* and *compassionate*, can be reduced to the same reality. Conclusion: To follow Jesus in His ministry of compassion precisely defines the biblical meaning of being perfect as the heavenly Father is perfect.¹⁴¹

Compassion, thus, is for believers, a part of what it means to be conformed to the image of Christ. In relation to trauma, compassion should be practiced in two ways: self-giving love and caring for sufferers.

Self-giving love transcends traumatic evil. In some situations, people respond to trauma instinctively by laying down their lives in love for others. For example, a mother may put herself in the place of being beaten by her alcoholic husband in order to protect her son. A father could be severely wounded during a fight defending his daughter from assault. Such examples are traumatic, but Christians know the divine meaning of self-giving love by identifying with Christ’s vicarious death for us.¹⁴² “This is how we

¹⁴⁰Calvin, *Institutes of Christian Religion*, 2.16.4-5.

¹⁴¹Manning, *Abba’s Child*, 71.

¹⁴²“Meaning-making” is a well-known term in psychotherapy referring to the creation of

know what love is: Jesus Christ laid down his life for us. And we ought to lay down our lives for our brothers and sisters” (1 John 3:16). Sacrifice is the greatest form of love (John 15:13) and the practice of suffering in Christ for righteousness, leads to the promise of heavenly rewards in the kingdom of God (Matt 5:10-12).

This practice of love, however, does not promote self-destruction. Rather, it is based on a healthy self-love. Piper points out that those who have suffered for the gospel consistently testify that their sacrificial lives for God are the most hedonistic, because God’s glory upon them is incomparably greater than their pain and suffering.¹⁴³ In other words, self-sacrifice in seeking God’s glory can be one of the most joyful practices for believers and can therefore be a healthy form of self-love in Christ. Healthy self-love is distinct from blind, selfish self-love. While blind or selfish self-love is self-centered and sinful, healthy self-love means to value and love oneself in Christ. Self-love by itself is not healthy, because it is corrupted by sin, and easily leans towards narcissism. Therefore, believers must mortify *sinful* self-love, as Calvin rightly notes, “For such is the blindness with which we all rush into self-love that each one of us seems to himself to have just cause to be proud of himself and to despise all others in comparison.”¹⁴⁴

When believers are united with Christ in faith, since the old self is crucified with Christ and Christ lives in the believers (Gal 2:20), the pathological self-love of sinners is increasingly put to death, and the healthy self-love can be developed in Christ.¹⁴⁵ In Christ, believers become beloved children of God, receiving every spiritual

transcendent meaning for a certain traumatic event. By contrast the true meaning in theodrama is not derived from a human but given by God’s word, so discovering the meaning of the event is a more precise description than a meaning-making. See Judith L. M. McCoyd, Carolyn A. Walter, and Lisa L. Levers, “Issues of Loss and Grief,” in *Trauma Counseling: Theories and Interventions*, ed. Lisa L. Levers (New York: Springer Publishing Company, 2012), 86.

¹⁴³John Piper, *Desiring God: Meditations of a Christian Hedonist* (Sisters, OR: Multnomah Publishers, 2003), 242-47.

¹⁴⁴Calvin, *Institutes of Christian Religion*, 3.7.4.

¹⁴⁵Johnson, *Foundations for Soul Care*, 559.

blessing in the heavenly realms, forgiveness, redemption, and all wisdom and understanding to know his will according to his good pleasure (Eph 1:3-9). They become new creatures; they can see the glory and beauty of Christ in them, and thereby gradually love themselves regardless of how their self-images have been distorted by trauma. Only those who can see the indwelling spirit of Christ in themselves can see him in others, and only those who can love themselves in Christ as God loves them can love others as God does. Without healthy self-love in Christ, there will be no self-giving love.

If people love others as they love themselves in Christ, then it is natural that they will actively engage in caring for those who suffer. Serving others in love is a radical calling for believers to be servants. The biblical term, to serve (δουλεύω), in Galatians 5:13, refers to performing the duty of a slave.¹⁴⁶ Christ came in “the form of servant” (Phil 2:7 KJV); he came to serve, not to be served, and to “give his life as a ransom for many” (Matt 20:28). Thus, a part of embodying Christlikeness includes being a slave for others in love. It is a privilege for believers to serve as slaves because in this way they are acting as Christ. McGrath and McGrath insightfully point out Christ’s confirmation of the royal role of servanthood:

By becoming a slave for us, Christ confers His dignity on this role. We who are slaves for Christ can know that Christ has brought a new dignity and meaning to the concept. A slave is no longer a despised and reviled person. By becoming a slave Himself, Christ brings a new sense of nobility and honor to his role. To be a slave for Christ is both a privilege and honor.¹⁴⁷

By accepting this role, traumatized people can enter into a new stage of life: from being served by helpers to serving other sufferers as helpers. For those who have been traumatized, a sufferer is not merely a stranger but one to whom they can relate.

¹⁴⁶The biblical term, serve (δουλεύω), by definition, refers to the performance of the duty of a slave. See Timothy Friberg and Barbara Friberg, *Analytical Lexicon of the Greek New Testament* (Bloomington, IN: Trafford Publishing, 2005), “δουλεύω.” See also Purves, *The Search for Compassion*, 15–16.

¹⁴⁷Joanna McGrath and Alister E. McGrath, *Self-Esteem: The Cross and Christian Confidence* (Wheaton, IL: Crossway Books, 2002), 131.

Since survivors experientially know the pain, injustice and evil surrounding the experience, they can be more compassionate, empathetic and specific in their care. Therefore, it might be God's distinctive calling for Christian survivors of trauma to own their traumatic experiences and wounds as part of their self and that actually equips them for the service of others.

This radical, honorable calling is also therapeutic. By taking care of other traumatized people, survivors may gain a sense of connection with others who have suffered; they can feel recognized and valued; and they can also overcome the fear of exposure, fight against injustice, and find greater meaning or purpose in life by pursuing justice and love.¹⁴⁸ Moreover, they can taste the joy of being anointed as God's instrument of compassionate ministry for others.¹⁴⁹ "While there is no way to compensate for an atrocity," Herman says, "there is a way to transcend it, by making it a gift to others. The trauma is redeemed only when it becomes the source of a survivor mission."¹⁵⁰ In this sense, faithfully responding to this calling not only benefits others, but also results in healing for themselves.

As Christian survivors embody the form of the compassionate Christ (in self-giving love and serving others), they grow from trauma survivors into maturing healers in Christ, through whom sufferers can experience God's love and care. It is important to note that this practice must be communal. If one person were to attempt to practice this honorable calling alone, they could quickly burn out and experience wounds of another kind. There is a need for a community of mutual care in which giving and serving do not result in loss but rather nurture, communion, mutual love and reciprocal support. Christ knew this, and therefore he created the Church.

¹⁴⁸Herman, *Trauma and Recovery*, 207-11.

¹⁴⁹Paul David Tripp, *Instruments in the Redeemer's Hands: Helping People in Need of Change* (Phillipsburg, NJ: P & R Publishing, 2002).

¹⁵⁰Herman, *Trauma and Recovery*, 207.

Being the Church

Christ is the foundation of the Church. He purchased God's chosen people by his blood (Eph 1:3-6; Act 20:28), dwells in them as the Spirit (1 Cor 3:16; Eph 2:18-22), and has named them "the Church" (Matt 16:18). The modern English "church" is translated from the Greek word *ecclesia*, which corresponds to the Hebrew word, *qahal*, referring to called out-assemblies.¹⁵¹ The church is the group of people who are called by God through faith in Christ. This community is the body of Christ in which those who believe in Christ corporately manifest the glory of God by means of worshiping him, edifying one another, and sharing the gospel to all nations.¹⁵² Being connected to Christ as the head, the whole body of the Church is joined and connected, grows and is built up together in love (Col 1:18; Eph 2:20-22; 4:16).

Embodying Christlikeness in this context is taking part in the Church. It is particularly significant for traumatized people to act as the Church in two ways: they can enter into the new covenant community and participate in the public transformational mission of the church. First, being the Church refers to joining in the new covenant relationship with God and with other believers. In the new covenant, believers become God's children by the faith in Christ, and he becomes their Father; at the same time, all believers are bound in one spirit, one calling, and one body of Christ.¹⁵³ Since Christ fully satisfied all of the requirements of the law and made reconciliation by his blood (Matt 5:17; 26:28), this new covenant relationship is eternally guaranteed in Christ for those who believe in him; therefore believers cannot be separated from God's fatherly love and the communal care of his people.

¹⁵¹Louis Berkhof, *Systematic Theology* (Grand Rapids: Eerdmans Publishing, 1996), 614-15. The Hebrew word *qahal* is translated to the Greek, *ekklesia*, seventy-seven times in the Septuagint. See Daniel L. Akin, *A Theology for the Church* (Nashville, TN: B&H Publishing Group, 2014), 606-7.

¹⁵²Akin, *A Theology for the Church*, 634.

¹⁵³Gregg R. Allison, *Sojourners and Strangers: The Doctrine of the Church* (Wheaton, IL: Crossway, 2012), 123-25.

This new covenant relationship involves bi-directional commitments of living by God's word and caring for one another. In terms of the vertical relationship with God, believers are to obey God's words. This commitment in the new covenant is not a *quid pro quo*: "If you do this for me, I will do it for you."¹⁵⁴ Rather, it is for believers a faithful and voluntary response of love to the costly grace of Christ who first demonstrated his love for his people by dying for them.¹⁵⁵ In terms of the horizontal relationship with others, believers are to serve one another with "covenantal care" through which they encourage one another to actively worship together, support one another with mutual trust, love and respect, and provide accountability by being watchful of sin according to biblical truth.¹⁵⁶ Within this covenant community, believers are growing in their holiness before God and developing in psychosocial wholeness with others in Christ.

For Christian trauma survivors, entering into this covenant relationship plays an important role for healing. Relationship can be fearful for those who have been traumatized because in the past trust, safety, and love have been broken. Thus, it is normal for them to avoid any relationship that could lead to harm or shame.¹⁵⁷ In such a reality, the covenant community can provide a new relationship in which they can experience God's everlasting love and mutual love for one another. "Perfect love drives out fear" (1 John 4:18). When the survivors experience love in community, they can restore a sense of trust in safe relationships and as a result overcome the fear of connection.¹⁵⁸

¹⁵⁴Hopkins and Koppel, *Grounded in the Living Word*, 215.

¹⁵⁵God's love is not an "unconditional love" that merely overlooks human depravity, rather it is "contraconditional love" that transform a believer's life. See David Powlison, *Seeing with New Eyes: Counseling and the Human Condition through the Lens of Scripture* (Phillipsburg, NJ: Presbyterian & Reformed Publishing Company, 2003), 169–70.

¹⁵⁶Hopkins and Koppel, *Grounded in the Living Word*, 210-18.

¹⁵⁷Herman, *Trauma and Recovery*, 51-73.

¹⁵⁸Trust in human relationships develops from the loving care of the early caregivers, and it becomes the foundation for other developmental tasks, such as autonomy, initiative, competence, identity, generativity, and integrity. See Erik H. Erikson and Joan M. Erikson, *The Life Cycle Completed* (New York:

Within the tension between redemption and consummation in theodrama, a local Church is not always a healthy community that provides covenantal care. In some communities, it is rarely acceptable to express one's true self and share different thoughts and feelings.¹⁵⁹ In some other communities, ideologies and practices are unjustly organized to promote authority and privilege of a certain group, so that vulnerable members experience undeserved suffering by the abuse of power.¹⁶⁰ A local church community can be either a caring or hurtful environment according to their level of maturity.

Therefore, the whole community of the Church needs to pursue maturity in Christ. They must grow and build one another up by "speaking truth in love" (Eph 4:15-16). In other words, the church community is called to be the Christ-centered body in which every member continually, actively, and collectively embodies Christ's truth in love to promote unity and maturity for the ultimate purpose of displaying the glory of God through one-another relationships marked by mutual love and trust, authenticity, safety, care, and exchanging gifts.¹⁶¹ The more a church community embodies Christlikeness, the more the survivors can genuinely expose their wounds and receive comfort, recovery, and growth in community.

Second, by taking part in the Church, traumatized people bring the issue of trauma into a larger context. One's trauma experience is often intertwined with communal bias, social oppression, and power structures of culture.¹⁶² Thus, when trauma survivors

W. W. Norton & Company, 1998).

¹⁵⁹Kornfield names that kind of community as "pseudo community." Margaret Kornfeld, *Cultivating Wholeness: A Guide to Care and Counseling in Faith Communities* (New York: Continuum Publishing, 2008), 18–19.

¹⁶⁰James N. Poling, *The Abuse of Power: A Theological Problem* (Nashville, TN: Abingdon Press, 1991), 122–23.

¹⁶¹Kellemen, *Gospel-Centered Counseling*, 226-28.

¹⁶²Carrie Doehring, *Taking Care: Monitoring Power Dynamics and Relational Boundaries in Pastoral Care and Counseling* (Nashville, TN: Abingdon Press, 1995), 153-55.

share their stories in the church community, members can reflect on their contexts of sin, violence, injustice, oppression, social privilege, cultural prejudice and evil. Following the analogy of the Church as the body of Christ, these are the scars of Christ's nail marked hands and pierced side. As Christ's wounds remind Christians of human depravity, the wounded survivors in a community allow their members to face the distortions of the fallen world around them, focusing them in on the brokenness of their own culture, society and community.

This communal response to the fallenness of the world can lead to church members' working cooperatively to transform the world.¹⁶³ As Brueggemann rightly points out, the Church needs to provide "countercultural" alternatives to disordered sociocultural systems, based on the Scripture.¹⁶⁴ From the beginning, God commanded his people to build and rule over the culture in a way that maintains the order God placed in the world (Gen 1:27-28). This "Cultural Mandate," according to John Barber, continues as part of the Great Commission in the New Testament (Matt 28:18-20) until the consummation of the re-creation, and vice versa.¹⁶⁵ In other words, those who are redeemed in Christ—the Church—are shaping and transforming society according to God's word, and in turn, people are drawn to Christ until the final day. It is therefore the church's mission to engage in sociocultural activity according to God's word—particularly, in relation to trauma, to sensitively discern distortions in one's sociocultural system, resist to them, and reform them with biblical alternatives.

In this sense, trauma survivors in the church body can play a prophetic role to awaken the whole community to realize the prevalent evil of trauma in today's society

¹⁶³Doehring, *Taking Care*, 153.

¹⁶⁴Walter Brueggemann, *Truth Speaks to Power: The Countercultural Nature of Scripture* (Grand Rapids: Westminster John Knox Press, 2013).

¹⁶⁵John Barber, *Earth Restored: Calling the Church to a New Christian Activism* (Fearn, Scotland: Christian Focus Publications, 2002).

and encourage the Church to participate in the mission of transforming that reality. As part of the body of Christ, trauma survivors may no longer remain passive, hidden, isolated victims; rather they can be courageous reformers, changing the world with Christ's gospel.

In conclusion, the diverse aspects of embodying Christlikeness, discussed so far, cooperatively present a faithful and therapeutic way of living even in the midst of trauma. Embodying Christ's silence on the cross, trauma survivors experience the presence and comfort of God. Embodying Christ's lament, sufferers face the reality of their trauma, fully experiencing and honestly expressing the emotional suffering before God with hope in his unfailing love and the future new creation. Embodying the vulnerability of Christ, they can embrace the wounds of trauma as part of the self and, thereby, gradually take back bipolar personal agency over damaged areas. Embodying Christ's forgiveness and righteousness, they can be forgiven and forgive without excusing sins. Embodying the compassion of Christ, they can provide other victims with genuine empathy, self-giving love, and care. Being a part of the body of Christ, the Church, they can mutually serve one another with covenant care and participate in the mission of transforming the society through the gospel. In so doing, trauma survivors can be gradually freed from the psychopathological impacts of trauma and grow in wholeness and holiness before God.

In the present stage between redemption and consummation, the process of embodying Christlikeness in trauma may be slow and challenging; it may not be fully completed in this world. However, it is for a believer a secure and unfailing journey with Christ who will complete his good work in them up until the last day (Phil 1:6). Finally, only one last task remains to be explored: how can a Christian/biblical counselor help a traumatized person walk this journey?

CHAPTER 5

AN APPROACH TO HEALING TRAUMA: THEODRAMATIC THERAPY

The previous chapter argued that all events of human life, including trauma, are part of the theodrama, and Christiformity is the faithful and therapeutic way to live in that drama. Building on that foundation, this chapter proposes a theodramatic therapy to help traumatized people engage in the process of conformity to Christ. This therapy not only includes therapeutic dialogue, but also invites counselees to actively participate in the healing process by speaking and acting in fitting theodramatic performances.

Establishing Safety

The first task for caring for traumatized people is to establish their safety. Safety is a basic need of human life, and therefore its provision is a prerequisite for therapeutic work. From a theodramatic perspective, establishing safety is a way of giving the traumatized counselees relational experiences that promote *shalom*, correspond to God's design plan for human life and help restore the goodness of God's created order. The created world was good enough to stay safely (Gen 1:1-31), and the new creation will be the safe place in which young children can play near the viper's den (Isa 11:8) and there will be no more harm nor destruction (Isa 65:25). Safety is an essential quality of God's kingdom from creation to new creation. Theodrama therapy, therefore, begins with recreating safety from traumatized counselees' ordinary lives. Therapists need to pay carefully attention to the environmental and relational conditions of their counselees and help them to feel adequately safe, physically and psychologically.

When counselees are living in a dangerous environment, the therapist should encourage them to find physical safety and security. The therapist needs to determine if

counselees are living in a safe environment, where they can meet their basic health needs, such as sleeping and eating, and avoiding physical harm. If this is not the case, the therapist needs to help the counselees build a safety plan by educating about the availability of possible alternative environments and social services, which may include the engagement of police, medical treatment, urgent care, or shelter.¹ Meeting with supportive family members can also be helpful in creating a safe environment for trauma survivors. In order to help counselees develop a safe environment, the therapist should take care to communicate in a respectful, kind, non-coercive way, since trauma survivors may perceive strong recommendations as a threat of forcible control.² The therapist must, thus, carefully and gently persuade counselees to pursue safety by reporting crime or moving away from dangerous situations in order to prevent further trauma.

These initial interventions can be helpful in developing a safe environment, but a trauma survivor's felt sense of safety in relationship cannot be established by addressing environmental aspects alone. For many trauma survivors, at least one of the people who were supposed to be safe—parents, teachers, spouses, church members, or pastors—was the very source of their suffering and pain.³ Their past experiences of betrayal have taught them that even people who are supposed to care for them can be dangerous: they have lost a basic trust in their relationships. Thus, it is rarely possible for them to restore a sense of safety and security without significant experiences in a trustworthy relationship.

Trust is shaped by quality relational experiences, not the mere exchange of information.⁴ Therefore, the empathy and compassion of a caregiver are extremely

¹Judith L. Herman, *Trauma and Recovery: The Aftermath of Violence—From Domestic Abuse to Political Terror* (New York: Basic Books, 2015), 160-61.

²Heather Davediuk Gingrich, *Restoring the Shattered Self: A Christian Counselor's Guide to Complex Trauma* (Downers Grove, IL: IVP Academic, 2013), 74-75.

³*Ibid.*, 64.

⁴Denise Dombkowski Hopkins and Michael S. Koppel, *Grounded in the Living Word: The Old*

important in rebuilding trust and a person's sense of safety in relationship. By entering into another person's experience through empathy, a therapist can validate the counselee's thoughts and feelings, and help him or her to feel known, accepted, and cared for.⁵ As a result, the counselee gradually grows in a sense of safety. By being authentic, honest, and genuine with the counselee, the therapist communicates trustworthiness. Because trauma survivors are acutely aware of subtle signs of abandonment or betrayal,⁶ any phoniness could cause the counselee to lose trust, thereby breaking the therapeutic alliance. Therapists, thus, need to be honest in the relationship, reflecting their actual capabilities and limitations, and relinquishing any posture of being "the healer" or desiring to control counsees. Rather, therapists must be humble and work together with counsees in order to gradually develop a therapeutic bond, which enable both counselors and counsees to face the reality of the counsees' trauma together.⁷

The therapeutic bond that is established makes it possible for the therapist and the counselee to communicate their thoughts and emotions at gut-level, thereby forming a "therapeutic connection" across two brains, which allows the therapist to experience the counselee's suffering in some measure, thereby opening up the possibility of a

Testament and Pastoral Care Practices (Grand Rapids: Wm. B. Eerdmans Publishing, 2010), 217.

⁵Gingrich, *Restoring the Shattered Self*, 65. The empathy of Christian therapy should not be mistaken for the Rogersian concept of empathy. For Rogers, Christian discipline and instruction are primary examples of an authoritative, judging posture that encourages a false, ideal self. He said, "True empathy is always free of any evaluative or diagnostic quality." Instead, Rogers promotes providing empathic acceptance without judgment, which he called "unconditional positive regard." Carl R. Rogers, *A Way of Being* (Boston: Houghton Mifflin Harcourt, 1980), 154. However, agape love, the better and true biblical form of empathy, involves responsible discernment of sin and life transformation, which has been called "contraconditional love." Christian theodrama therapy involves discernment according to God's word, but therapists must wait until their counsees grow enough to reflect on these things themselves. Rushing into the matter of sin too early can be uncomfortable for the counselee and develop defenses, thereby hindering the development of a therapeutic relationship. See David Powlison, *Seeing with New Eyes: Counseling and the Human Condition through the Lens of Scripture* (Phillipsburg, NJ: Presbyterian & Reformed Publishing Company, 2003), 169-70.

⁶Elizabeth M. Ventura, "Strategies and Techniques for Counseling Survivors of Trauma," in *Trauma Counseling: Theories and Interventions*, ed. Lisa Lopez Levers (New York: Springer Publishing Company, 2012), 506.

⁷Bessel A. Van der Kolk, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (New York: Viking, 2014), 210.

transformation of the counselee's emotions by their being experienced with another.⁸ This is the “incarnational role” of the therapist, according to Coe and Hall. In other words, the therapist's empathy and understanding can reflect Christ's loving presence to the counselee. Therapists, in this sense, are God's instruments in the theodrama who represent Christ and his care for the counselee, perhaps leading to an experience of being loved by God through his people.

Along with establishing a safe environment and secure relationship, therapists also need to help trauma survivors manage physical symptoms. Trauma survivors often feel physical discomfort because of overwhelming symptoms, such as hyperarousal; uncontrollable thoughts, emotions, and behaviors (e.g., screaming, yelling, or crying); flashbacks; or nightmares.⁹ They often feel like they are “nobody”¹⁰ and are overwhelmed by their re-experiencing symptoms of their trauma, sometimes losing even the ability to properly perceive their surroundings.¹¹ As mentioned in chapter two, such bodily symptoms are reactions imprinted in the emotional brain damaged by traumatic wounds.

Therapists can desensitize such reactions in two steps. The first step is to provide bottom-up soothing stimuli. Since about 80 percent of the fibers of the vagus nerve are afferent—running from body to brain—the human arousal system is directly influenced by how the physical body is felt.¹² For example, taking a few deep breaths, physical relaxation, and listening to peaceful music can calm a person in an aroused state.

⁸John H. Coe and Todd W. Hall, *Psychology in the Spirit: Contours of a Transformational Psychology* (Downers Grove, IL: IVP Academic, 2010), 355-56.

⁹Herman, *Trauma and Recovery*, 160-61; Gingrich, *Restoring the Shattered Self*, 76-77.

¹⁰Kolk, *The Body Keeps the Score*, 246-47.

¹¹Gingrich, *Restoring the Shattered Self*, 91.

¹²Kolk, *The Body Keeps the Score*, 206; see also Stephen W. Porges, “Reciprocal Influences Between Body and Brain in the Perception and Expression of Affect: A Polyvagal Perspective,” in *The Healing Power of Emotion: Affective Neuroscience, Development & Clinical Practice*, ed. D. Foshay, D. J. Siegel, and M. F. Solomon (New York: W.W. Norton & Co., 2009), 27.

Thus, when counselees show physical symptoms of arousal during a session, therapists may help them calm down by focusing on breathing, being still, or moving in a slow and peaceful manner, all of which are validated emotional-regulation techniques.¹³ If counselees are paralyzed in session by strong emotion and are not able to continue, because of a severe flashback, anxiety, or fear, therapists may help them focus on their present sensory experience, in order to ground them in the here and now (called grounding techniques). The following is an example of bringing a counselee back to the present:

Listen to my voice (*hearing*). . . You're in my office. Look around (*seeing*). See the green paint on the walls? Look at the picture over there. You see the trees and flowers in it? Now look at me. Do you recognize me? (*In the midst of a flashback counselees will sometimes assume that you are their perpetrator, so it is important to check out their perception*). Now feel the fabric of the chair with your hands (*touching*). You brought a cup of coffee (*tasting*). You are wearing perfume. Can you smell the scent (*smelling*)? (italics in original)¹⁴

By helping counselees attend to the sensed inputs to the body, the therapist can promote a new emotional response and thereby relieve their physiological symptoms.

The next step is to promote a top-down rational engagement to manage symptomatic emotional reactions. Neuroscience research has found that the rational, analyzing part of the brain, centered in the dorsolateral prefrontal cortex, has no direct connections with the emotional brain and what fills the gap is the medial pre-frontal cortex (MPFC), the center of self-awareness.¹⁵ This part of the brain engages in self-awareness and perceives what a person feels—*interoception*—and based on this internal perception, it communicates with the rational part of the brain. The rational brain, then, reflects and evaluates the perceived feeling and thereby communicates with the emotional

¹³Kolk, *The Body Keeps the Score*, 207-8. Recent research has found that desensitization-focused therapy, such as, Eye Movement Desensitization and Reprocessing (EMDR), has been effective in alleviating the distress associated with traumatic memories. However, such a technique must be practiced by trained experts. Ventura, "Strategies and Techniques for Counseling Survivors of Trauma," 518.

¹⁴Gingrich, *Restoring the Shattered Self*, 93.

¹⁵Kolk, *The Body Keeps the Score*, 206.

brain through the MPFC.¹⁶ Therefore, being aware of one's inner emotions is an essential part of managing and changing how one feels. In order to promote this kind of introspection, therapists can help trauma survivors focus on how their physical sensations, such as nervousness, anxiety, and hyperarousal, impact their bodies, acknowledge the emotions behind the physical symptoms, and then understand how they are triggered. In so doing, counselees learn to make sense of their own experience and can come to recognize new responses.

Therapists can also help counselees by educating them about their presenting issues, since knowledge can be a source of safety. Knowing the name, common symptoms, other people's experiences with, and possible treatment plans for their condition helps counselees make sense of their experience and feel connected to others, and gives them hope for recovery through the stories of those who have walked a similar path.¹⁷

All of this trains counselees in actively developing environmental, emotional, and relational safety; and thereby makes a secure foundation in which they can acknowledge the distortion of the created order and actively engage in the process of recovering proper order that God embedded in this creation. This process may be slow and take several years and sometimes decades. Trauma therapists, thus, need to patiently endure that time, waiting counselees experience the sense of safety in the therapeutic relationships and their ordinary lives.

Of course, in theodrama, the ultimate source of safety is God himself. However, trauma victims may have trouble experiencing the peace of God because of severe physical symptoms and psychological fear. Instead, it is common for trauma survivors to develop their own defenses to protect themselves from further traumatization. In many

¹⁶Kolk, *The Body Keeps the Score*, 206.

¹⁷Herman, *Trauma and Recovery*, 158.

cases, their defenses unfortunately become pathological or self-destructive. Therefore, in order to create true safety for counselees, the therapist must deal with the issue of defenses.

Relinquishing Pathological Defenses and Relying on the True Defense

Trauma survivors often create defenses to hide their deeper struggles and emotions because it is painful for them to remember and disclose a trauma event. Given that human beings live in a fallen world and have an innate desire to avoid painful emotions, defenses can be understood as inevitable and even a part of created human nature intended to protect the self.¹⁸ Defense itself is indeed necessary for trauma survivors to sustain and protect themselves. The problem is, however, that fallen human beings, however, are steeped in self-deception, so that they have developed many different pathological ways of attempting to hide themselves from others, from themselves, and even from God.

A pathological defense refers to any behavior, thought, or feeling that hinders one from experiencing or expressing a real emotion and is characterized by maladaptive, dysfunctional, or avoidant reactions, such as withdrawing, passivity, rapid speaking, small voice, incongruent smiling, avoiding eye contact, changing the subject abruptly, over-compliance, projection, denial, aggressive reaction, rationalization, or dissociation.¹⁹ Such defenses prevent a person from being able to cope effectively with their current problems and usually cause neurotic anxiety, difficulty in forming genuine relationships, low self-esteem, and lack of therapeutic improvement.²⁰ More seriously, these

¹⁸Johnson, *Foundations for Soul Care*, 453; Eric L Johnson and Christina Sellers Burroughs, "Protecting One's Soul: A Christian Inquiry into Defensive Activity," *Journal of Psychology and Theology*, 28, no. 3 (2000): 175-77.

¹⁹Leigh McCullough et al., *Treating Affect Phobia: A Manual for Short-Term Dynamic Psychotherapy* (New York: Guilford Press, 2003), 86; 152-56.

²⁰Ibid.

pathological defenses block a person from engaging in sincere self-awareness; in suppressing the truth, they fail to reflect on their own sins and avoid repentance, thereby distancing themselves from God.²¹ These pathological defenses, which were originally developed for the purpose of self-protection, actually end up in adulthood leading to the weakening and even destruction of the self. Because of the destructive power of pathological defenses, therapists should help counselees identify and relinquish them.

To this end, therapists should seek to discern what maladaptive defenses surface in conversation with counselees and gently point out their avoidant behaviors and then explore together what feeling they have and why it is uncomfortable.²² At this point, therapists should not point out a defense in a shaming manner; rather they could validate its benefits while raising concern about its liabilities.²³ For example, in the case of a counselee who continually dissociates from a traumatic memory, the therapist can validate the person's defense in this way: "It seems that you are dissociating from the past abused memory (*naming*). Dissociation may help you to avoid overwhelming emotions, such as anxiety, fear, or shame which is normal and understandable (*benefits*). However, it also has a high cost in preventing you from facing the reality of your situation and seeking healing (*cost*)." Recognizing valid reasons for a person's defenses reduces the shame of owning such behavior; realizing the cost may motivate them to slowly relinquish their defense.²⁴

Another powerful way to validate counselees is to help them understand how their defenses initially developed as a means of self-protection and that they are not

²¹Johnson and Burroughs, "Protecting One's Soul," 77-79.

²²McCullough et al., *Treating Affect Phobia*, 84-85.

²³Adopting a defense yields a "primary gain" and "secondary gain." The former is avoidance of inhibitory feeling (anxiety, guilt, shame, or pain), and the latter is a hidden reward, such as receiving care from a spouse or having the power to control someone. *Ibid.*, 143-45.

²⁴*Ibid.*, 122.

responsible for their origins.²⁵ Since children are so dependent on their caregivers (mostly parents), if they are maltreated, it is a normal reaction to develop defenses in their early lives. However, it does not mean that they bear no responsibility for maintaining those defenses even after being adults. As a personal agent, each person is responsible for continuing the defensive behavior or giving it up—the only person who can make such a change is oneself. Clinical experiences indicate that differentiating between the origin and maintenance of defenses is one of the most effective interventions to reduce the defense-related shame of the counselee and to empower the person to take initiative to change the defensive patterns.²⁶ It is also helpful to point out the strengths and adaptive coping abilities of counselees. When counselees notice that a therapist can see not only their vulnerability and weakness, but also their positive and strong qualities, it promotes a sense of support and acceptance,²⁷ thereby making it possible for a counselee to be more open to being challenged to a greater extent.

Relinquishing pathological defenses is not a primary goal of the therapy process. It is actually a natural outcome of a good therapy. When enough care and love—which is often long-term—is provided, counselees can experience the sense of safety, thereby may willingly put down their defenses and expose their real suffering and stories in therapeutic relationships.

Along with relinquishing pathological defenses, therapists also need to help their counselees identify and hold to their *true* Defense. God, who has promised to never forsake us, and who loves us enough to send his Son to die on our behalf, is our everlasting defense. As the psalmist says, the Lord is the stronghold of our lives (Ps 27:1).

²⁵McCullough et al., *Treating Affect Phobia*, 146-47.

²⁶*Ibid.*, 148.

²⁷*Ibid.*, 123-24; Laurence Heller and Aline Lapierre, *Healing Developmental Trauma: How Early Trauma Affects Self-Regulation, Self-Image, and the Capacity for Relationship* (Berkeley, CA: North Atlantic Books, 2012), 192–93.

God is “our primary psychological protector: our soul’s rock, fortress, and shield. By faith we are to cast our anxieties on him (1 Pet. 5:7) and see that his fatherly care renders our anxieties and fears ultimately pointless.”²⁸ Within his unfailing protection, believers can have courage to genuinely face the reality of their wounds.

A therapist, therefore, should help counselees experience that God is their prime defender and he is present in the whole process of therapy. To do so, a therapist at the beginning of each session can lead the practice of prayerful singing, which is helping counselees meditate on God’s presence and protection. For example, the traditional hymn, “Be Thou My Vision,” supplies these comforting words:

Be thou my vision. O Lord of my heart.
be all else but naught to me. save that thou art:
be thou my best thought in the day and the night.
both waking and sleeping, thy presence my light.

Be thou my wisdom. be thou my true word.
be thou ever with me. and I with thee Lord:
be thou my great Father. and I thy true son:
be thou in me dwelling, and I with thee one.

Be thou my breastplate. my sword for the fight:
be thou my whole armor. be thou my true might:
be thou my soul’s shelter. be thou my strong tower:
O raise thou me heavenward, great Power of my power.

Riches I heed not. nor man's empty praise:
be thou mine inheritance now and always:
be thou and thou only the first in my heart:
O Sovereign of heaven, my treasure thou art.

High King of heaven. thou heaven's bright sun,
O grant me its joys after victory is won:
great Heart of my own heart. whatever befall,
still be thou my vision, O Ruler of all.²⁹

By singing this hymn, counselees and the therapist confess together that the sovereign,

²⁸Johnson and Burroughs, “Protecting One’s Soul,” 179

²⁹Ancient Irish hymn, translated by Mary Byrne, 1905, and versified by Eleanor Hull, 1912. This hymn is used in the Reformational Counseling Training (RCT), supervised by Eric Johnson at the Southern Baptist Theological Seminary. Many participants of this counseling practice confessed that singing this hymn was helpful to see God’s presence in the session and even in their lives.

all-powerful Ruler of the universe is always with them, and he is their armor and shelter. It is God who fully knows their suffering, who exists in their midst, and who will finally deliver them from all suffering.

Trauma survivors may have difficult time to see God as their defender. They may raise a question why God did not protect them from trauma, and even think that it was God who abused them. In those cases, a mere cognitive knowledge about God the defender may not be able to touch their hearts and change their minds. Therefore, instead of intellectual teaching, this prayerful singing, a form of liturgy, is an essential and helpful practice through which counselees can gradually embody God's presence and protection. According to James Smith, liturgy is the key practice to drive *love*. "Liturgy is a 'hearts and minds' strategy, a pedagogy that trains us as disciples precisely by putting our bodies through a regimen of repeated practices that get hold of our heart and 'aim' our love toward the kingdom of God. Before we articulate a worldview, we worship."³⁰ The practice of prayerful singing in this sense is not a forcible demand to change their worldviews, nor devaluation of their pains and wounds. Rather, it is a faithful worship, confessing God as our defender with our lips and embodying the biblical truth with our hearts, thereby transforming our worldviews and receiving peace in God.

By inviting counselees to this liturgy, singing out with their own voice rather than merely providing cognitive knowledge about God's presence and protection, the therapist offers counselees an opportunity to participate in the theodrama. When counselees grasp their place in the sovereign-drama of God, who is the greatest defender and the foundation of safety, they can boldly walk through the valley of trauma with Christ: "Even though I walk through the darkest valley, I will fear no evil, for you are with me; your rod and your staff, they comfort me" (Ps 23:4).

³⁰James K. A. Smith, *Desiring the Kingdom: Worship, Worldview, and Cultural Formation* (Grand Rapids: Baker Academic, 2009), 33.

Re-visiting the Scene Together

Once counselees realize that they are not alone within the therapeutic relationship, the therapist needs to help them re-visit the trauma experiences together. The therapist can make room for counselees to share whatever they want from general issues in daily life to the most painful memories. The therapist must follow the pace of counselees in this process because it can be traumatic rather than therapeutic to talk about the painful experience, unless they are ready to tolerate their overwhelming feelings and symptoms that come with difficult memories.³¹ As counselees enter into this sensitive territory, the therapist must be sensitive to their bodily symptoms and slowly guide them in accessing painful memories.³² Intensified physical reactions (e.g., hyperarousal, fear, or dissociation) are signs that counselees have a traumatic story that needs to be spoken. In that case, the therapist needs to assist counselees in describing their traumatic memories related to their reactions by carefully asking what happened, when, by whom, where, and how.³³ Counselees may be encouraged to talk about all the details as they recall, but the details may be not always accurate or objectively true, because the magnitude of traumatic pain is so overwhelming that cognition often shuts down and thereby trauma memories are shattered, vague, incoherent, and snapshot-like.³⁴ The point is to encourage counselees to speak, which leads to the active discovery of something previously unknown, through a new discursive awareness, and the reconstruction of previously disorganized memories into one cohesive story.³⁵ In so doing, counselees can

³¹Kolk, *The Body Keeps the Score*, 209.

³²Serene Jones, *Trauma and Grace: Theology in a Ruptured World* (Louisville, KY: Westminster/John Knox Press, 2009), 158-59; Hopkins and Koppel, *Grounded in the Living Word*, 139-40.

³³Telling the story is important because without stories memory becomes frozen, and thus people cannot imagine how things can be changed or find meaning in events. See Kolk, *The Body Keeps the Score*, 219-20.

³⁴Jones, *Trauma and Grace*, 59. More details about the cognitive malfunctions regarding memory, see the neurobiological approach in chap. 2.

³⁵The brain actually reconstructs our memories each time people recall them. David A. Hogue, *Remembering the Future, Imagining the Past: Story, Ritual, and the Human Brain* (Eugene, OR: Wipf and Stock Publishers, 2009), 65.

make sense of the story of the event and re-visit the tragic scene with the support of the therapist.

During the reconstruction of the counselees' stories, the therapist need to help them practice lament by re-experiencing and expressing unresolved, suppressed emotions in verbal or nonverbal ways. For this purpose, the therapist can help counselees participate in an imaginative theodramatic performance of lament.³⁶

This practice consists of three stages. The first stage is to express the accompanying emotions towards the therapist. When counselees recall the traumatic memories, they inevitably experience painful feelings. At that moment, the therapist allows them freely express any kind of emotion, and accepts their emotional eruptions. Since the traumatic memories are often shattered and suppressed, it needs much time and work to sufficiently lament over related wounds, during reconstructing of their trauma narratives. The therapist's empathy is necessary at this phase.

The second stage is to express the emotions to the perpetrator imaginatively. After counselees sufficiently express their unresolved emotions to the therapists, counselees are invited to imagine that the perpetrator is there in the room, perhaps having him or her sitting in an empty chair.³⁷ In so doing, the therapist can help counselees re-experience deep, hidden suppressed emotions, such as anger, grief, or frustration, to the perpetrator. The counselees might be angry, cry, scream, or yell. During such emotional eruptions, the therapist is to be empathically with the counselees and enable them to release emotion as fully as possible. It should be noted, however, that their feelings and symptoms can be dramatically worsened; this should be a signal to slow down and

³⁶Dramatic performance is about "embodying emotions, giving voice to them, becoming rhythmically engaged, taking on and embodying different roles." Kolk, *The Body Keeps the Score*, 335.

³⁷In psychotherapy, this practice is called the "empty chair technique," which refers to a method of having the counselee speak to an imagined others, including the self. See Leslie S. Greenberg, *Emotion-Focused Therapy* (Washington, DC: American Psychological Association, 2010), 146.

reconsider the pace of the therapy.³⁸ Thus, their intrusive symptoms should be monitored carefully in order to avoid re-traumatization.

After counselees release their painful feelings, the next stage is to facilitate their lament before God. The therapist could provide another empty chair and invite counselees to imagine Christ seated there. Counselees are then encouraged to talk to Christ about their pain and suffering of the trauma events, feeling abandoned by God, questions about why such a thing happened to them, and so on. This practice is a psychological and spiritual crying before God, asking for his help in hope of redemptive therapeutic resolution in the here-and-now. In so doing, counselees re-visit the scene with God. In the case that counselees cannot begin to talk to Christ, the therapist can use Psalms to promote the performance of lament. About 40 percent of the psalms include lamentation.³⁹ Psalm 22 is one of the most significant examples of the psalmist's honestly confessing of his lament to God in a way that can reflect the experience of someone who has experienced trauma:

My God, my God, why have you forsaken me? Why are you so far from saving me, so far from my cries of anguish? My God, I cry out by day, but you do not answer, by night, but I find no rest. . . . there is no one to help. Many bulls surround me: strong bulls of Bashan encircle me. Roaring lions that tear their prey open their mouths wide against me. I am poured out like water, and all my bones are out of joint. My heart has turned to wax; it has melted within me. My mouth is dried up like a potsherd, and my tongue sticks to the roof of my mouth; you lay me in the dust of death. Dogs surround me, a pack of villains encircles me; they pierce my hands and my feet. All my bones are on display; people stare and gloat over me. They divide my clothes among them and cast lots for my garment. (Ps 22:1-16)

By reciting this lament out loud in the session, the therapist can help counselees reflect on their trauma experiences and deeply mourn over the losses. Lament to God, however, is not a mere catharsis of emotion; it entails petition for God's help and finding resolution in the cross and resurrection of Christ. Lament presents the opportunity

³⁸Herman, *Trauma and Recovery*, 176.

³⁹Glenn Pemberton, *Hurting with God: Learning to Lament with the Psalms* (Abilene, TX: Abilene Christian University Press, 2012), loc. 441–45, kindle.

to call upon God for his mercy and justice.⁴⁰ The psalmist continues: “But you, LORD, do not be far from me. You are my strength; come quickly to help me. Deliver me from the sword, my precious life from the power of the dogs. Rescue me from the mouth of the lions; save me from the horns of the wild oxen” (Ps 22:19-21). This plea to God in lamentation eventually moves to praising God in a steadfast hope of his final victory over all evil and suffering:

I will declare your name to my people: in the assembly I will praise you. You who fear the LORD, praise him! All you descendants of Jacob, honor him! Revere him, all you descendants of Israel! For he has not despised or scorned the suffering of the afflicted one; he has not hidden his face from him but has listened to his cry for help. . . They will proclaim his righteousness, declaring to a people yet unborn: He has done it! (Ps 22:22-31)

Rehearsing each part of this psalm together with counselees, the therapist can gradually help counselees grieve before God, and then move to pleading, and finally praise of God who has already begun and will finally complete to deliver his children from evil and suffering.

During the practice of lament to God, counselees may ask a why question: why did the all-powerful, good God not stop it? It is important for the therapist to note that the essence of this struggle is not so much about searching for an intellectual, theological answer, but is rather an emotional yearning for God’s care and an expression of the sense of abandonment and rejection.⁴¹ The reason that Job’s friends fail to comfort him was that they misunderstood him and approached Job’s lament by engaging in theological debate and a call to repent rather than providing sincere care.⁴² Therefore, a therapist needs to provide a genuine empathic response, instead of dispensing quick theological

⁴⁰Soong-Chan Rah, *Prophetic Lament: A Call for Justice in Troubled Times* (Downers Grove, IL: InterVarsity Press, 2015), 68.

⁴¹Gingrich, *Restoring the Shattered Self*, 174.

⁴²John Swinton, *Raging with Compassion: Pastoral Responses to the Problem of Evil* (Grand Rapids: Wm. B. Eerdmans Publishing, 2007), 102.

answers.⁴³ An honest, empathic response can minister to the counselee's emotional need to be heard, received compassionately, and comforted. It also gives them an opportunity to actively enter into a spiritual journey to find a transcendent meaning of their lives.

Identifying with Christ

After the practice of lament, the therapist can facilitate the counselee's identification with Jesus Christ in order to see themselves with new eyes as being in him. The therapist's role is to help counselees experience their holy union with Christ who suffered for us and with us. To do so, the therapist can invite counselees to practice silent listening, in which they can meditate on the diverse aspects of Christlikeness. The therapist may calm counselees, encourage them to close their eyes, and gently describe Christ revealed in the biblical drama. At this point, it is important to note that the description of Christ's suffering should not be very vivid because overly graphic images could trigger overwhelming feelings for trauma survivors. The following is an example of a script that the therapist may use for this purpose:

Even before creation, God knew and loved you so much (Jer 1:4-5; Ps 139:15-16; Eph 1:11-12; 1 Jn 4:16). Because of his love, Christ died on the cross to redeem us (Jn 3:16). He was sinless, but he suffered and was crucified (2 Cor 5:18-21). He was wounded for your transgression, he was bruised for your iniquities (Isa 53:5a). In suffering, he cried out, My God, my God, why have you forsaken me?

Upon Jesus Christ was the chastisements that brought your peace; and with his stripes you were healed (Isa 53:5b). Because of his death, your sins were forgiven (Rom 5:8-9) and he is not counting your sins anymore (2 Cor 5:18-19). His death is the ultimate expression of his love for you (1 Jn 4:10). Because of his resurrection, you are now a new creation (2 Cor 5:17).

In Christ, you are God's beloved child, and he becomes your father (1 Jn 3:1). He is the perfect father (Matt 5:48). He is your eternal comfort and good hope (2 Thess 2:16-17; 2 Cor 1:3-4). He is your provider and meets all your needs (Matt 6:31-33). He loves you with an everlasting love (Jer 31:3). When you are brokenhearted, he is close to you (Ps 34:18), and he is weeping with you (Jn 11:35). His Spirit helps you

⁴³For example, the therapist may say, "It sounds like you are sad because God did not stop this painful event from happening when you cried out for his help so you may feel God did not love you. It sounds sorrowful." "I am so sad that God did not help you in suffering. I also really want to ask God about it when I meet him."

in your weakness and intercedes for you through wordless groans (Rom 8:26). He cares for you like a shepherd and embraces you in his arms (Isa 40:11).

One day, he will wipe away all your tears; and there will be no more mourning, crying, and pain (Rev 21:4), for neither death, nor angels nor demons, nor suffering, nor any power, nor anything in all creation, will be able to separate you from the love of God that is in Christ (Rom 8:38-39).

By quietly listening to the gospel, an opportunity is created for counselees to identify with Christ's co-suffering and experience his love. When counselees have meditated on Christ's sacrificial, redemptive suffering, then the therapist can ask them to sit in Christ's chair and reflect on themselves from Christ's perspective. In so doing, counselees can practice in an embodied way a Christ-centered perspective and the laying aside of a self-centered one.⁴⁴ In this practice, counselees do not merely receive information about Christ, but get to experience eschatological truth in an embodied way, according to Scripture, which can reframe their ways of thinking, feeling, and living in union with Christ, even in the midst of trauma.

Re-viewing and Embracing the Whole Self in Christ

When a counselee reflects on the self through Christ's eyes, he or she can see the diverse aspects of the self simultaneously: the created self, the old self (damaged, suffering, and sinful), and the new self. Trauma survivors are often dominated by negative thoughts and emotions about themselves.⁴⁵ In the following exercise counselees can come to see that trauma no longer ultimately defines them, but Christ does. In Christ, the old way of life has already passed, even though its effects are still present in believers; and the new way of life has already started, though it is not yet complete.⁴⁶ Thus, the role

⁴⁴The practice of de-roling in psychodrama therapy means coming out of a dramatic role that has been played for the sake of closure; de-centering in theodrama therapy refers to putting away one's self-centered way of thinking, feeling and doing, in order to put on Christ's perspective. Regarding taking a role and de-role, see Dorothy M. Langley, *An Introduction to Dramatherapy* (Thousand Oaks, CA: Sage Publications, 2006).

⁴⁵Heller and LaPierre, *Healing Developmental Trauma*, 282.

⁴⁶Johnson, *God and Soul Care*, chap.18.

of the therapist at this point is to help them acknowledge the various aspects of the actual self and embrace them in Christ. Johnson calls this process “redemptive differentiation” and “redemptive integration.”⁴⁷ In theodrama therapy, therapists facilitate this process by speaking to each part of the self as Christ does.

The therapist first leads counselees to focus on the goodness of the created self. Since God is “infinitely the most beautiful and excellent” being,⁴⁸ human beings, as divine image-bearers, reflect some of the splendor of God’s beauty. Even the worst kind of trauma cannot annihilate the image of God in a human being.⁴⁹ The therapist can guide counselees to play Christ’s role in speaking to themselves truths such as: “you have good social skills;” “you are artistic;” “you are wonderfully made by God and God delights in you.” By doing this, counselees can experientially acknowledge their created goodness, which is true, in spite of the trauma, and praise God for the goodness of their created self.

Counselees also need to acknowledge their created weakness. Recognizing their limitations and smallness before God allows them to humbly lay down self-pride and self-glory, and seek God as their center.⁵⁰ Weakness in this sense is a good way to experience God’s grace and power (2 Cor 12:9; 13:4). Therapists can help counselees see that their weaknesses are not shameful, but part of how God made them and part of his good plan for them. In response they are able to embrace the weaknesses as parts of the self with appreciation to God.

Therapists may then lead counselees to speak to their old self, which is damaged, suffering, and has fallen into sin. God does not condemn the damage and suffering: rather he “comforts us in all our troubles, so that we can comfort those in any

⁴⁷Johnson, *God and Soul Care*, chaps. 18-19.

⁴⁸Edwards, *The Works of Jonathan Edwards* (London: William Ball), 1:125.

⁴⁹Jones, *Trauma and Grace*, 124-25.

⁵⁰Johnson, *God and Soul Care*, chap. 15; Calvin, *Institutes of Christian Religion*, 1.1.1.

trouble with the comfort we ourselves receive from God” (2 Cor 1:4). In Christ, the damaged and suffering self needs to be comforted, accepted. Thus counselees should be encouraged to play Christ’s role in speaking to themselves messages such as, “I know your wounds. I know how you feel. I am with you. I will help you.” By speaking to themselves like this, they embody and verbalize Christ’s acceptance of their wounded selves, and can experience release from false guilt and shame related to the traumatic damage they have experienced.⁵¹ This allows counselees to embrace the reality of the damaged self that has suffered and to search for a way of living with it, instead of denying or hiding it.

The sinful self should be recognized and dis-identified within Christ.

Successful Christian therapy must not only deal with psychological matters, but also the spiritual problem of sin. The fallen human heart has an inherited, habitual desire to sin; as a result people sin even though they do not intend to do so.⁵² Trauma experience can lead people to engage in sinful behavior, such as substance abuse, addiction, or aggression in order to avoid painful feelings or memories.⁵³ Thus, therapists need to lead counselees on a journey into greater self-awareness of their sins. The theodramatic practice of speaking to the sinful self from Christ’s chair can facilitate a gospel-oriented reflection on their hearts without concealment, deepening their understanding of the ugliness of their sin.

The purpose of acknowledging sin is not to place the blame for the abuse on

⁵¹Weakness, wound, and damage are not sinful, thus the sense of shame and guilt for them is false according to God’s perspective. See Johnson, *God and Soul Care*, chap. 18.

⁵²Coe and Hall, *Psychology in the Spirit*, 302.

⁵³L. Keyser-Marcus et al., “Trauma, Gender, and Mental Health Symptoms in Individuals with Substance Use Disorders,” *Journal of Interpersonal Violence* 30, no. 1 (2015): 3–24; Rajita Sinha, “Chronic Stress, Drug Use, and Vulnerability to Addiction,” *Annals of the New York Academy of Sciences* 1141, no. 1 (2008): 105–30; Mary C. McCarthy and Kathryn M. Tchorz, “Addictive Disorders in Trauma Center Patients,” in *Addictive Disorders in Medical Populations*, ed. Norman S. Miller and Mark S. Gold (Hoboken, NJ: Wiley-Blackwell, 2010), 181–96; Peter Fonagy, “Early-Life Trauma and the Psychogenesis and Prevention of Violence,” *Annals of the New York Academy of Sciences* 1036, no. 1 (2004): 181–200; Louis J. Cozolino, *The Neuroscience of Human Relationships: Attachment and the Developing Social Brain* (New York: Norton, 2006).

counselees; rather it is about “disidentification” with the sinful, old self from the standpoint of the new self.⁵⁴ The sinful self, for those who are in Christ, is redefined as a disidentified part of the self, acknowledged to be present, but no longer belonging to the new self ultimately. In Christ, every believer has become a new self (2 Cor 5:17; Col 3:10). God declares that they are saved, forgiven, cleansed, and perfect in Christ. The trauma victim in Christ is no longer defined by the tragic events of their past, but is defined by Christ’s declaration. At the same time the transformation of the new self is not yet complete. The new self, united with Christ, develops throughout life, incorporates all of a person’s created goodness and continues in the power of the Holy Spirit in mortifying the old self and vivifying the new way of life.⁵⁵ For this work, the Holy Spirit plays a primary role in illuminating and bringing of all one’s story into the experience of deeper communion with Christ through affective and contemplative meditation.⁵⁶ Thus, when counselees engage in self-awareness regarding sin, a therapist should help them simultaneously put off the old self and put on the new self. A therapist can share biblical texts about mortification and vivification with Christ with counselees. At this point, counselees may be encouraged to close their eyes and sit back in a seat and meditate on the words that the therapist speaks to them. Paul provides a good script for this practice:

For we know that our old self was crucified with him so that the body ruled by sin might be done away with, that we should no longer be slaves to sin— because anyone who has died has been set free from sin. . . In the same way, count yourselves dead to sin but alive to God in Christ Jesus. Therefore do not let sin reign in your mortal body so that you obey its evil desires. Do not offer any part of yourself to sin as an instrument of wickedness, but rather offer yourselves to God as those who have been brought from death to life; and offer every part of yourself to him as an instrument of righteousness. For sin shall no longer be your master, because you are not under the law, but under grace. (Roman 6:6-14)

⁵⁴Johnson, *God and Soul Care*, chap. 18.

⁵⁵Ibid., chap. 15; Kellemen, *Gospel-Centered Counseling*, 271-88.

⁵⁶Johnson, *God and Soul Care*, chap. 15.

I have been crucified with Christ and I no longer live, but Christ lives in me. The life I now live in the body, I live by faith in the Son of God, who loved me and gave himself for me. (Gal 2:20)

Through receiving and meditating on these scriptures, counselees may carditively enter into the experience of dying and rising with Christ, and thereby foster the deepening of an identity defined by Christ rather than the trauma they have experienced.⁵⁷ A therapist may also speak God's declaration to counselees directly, using 1st person language: "You are a new creation. You are a new self in Christ. You are perfect in Christ." Many counselees have mentioned that they have felt transcendent peace through listening to the simple declaration of God through the therapist's voice.⁵⁸

Through re-viewing and embracing the whole self in Christ, counselees can discover that they still have created goodness that is not diminished by trauma, the old, traumatized self is still part of their actual self, the sin of which will be disidentified eventually, and is ultimately a new self in Christ. These practices enable counselees to develop a new and more complex self-representation that is based on the theodrama.

Practicing Forgiveness in Christ

Forgiveness is another essential part of theodrama therapy which must be dealt with carefully. People generally expect that the progress of therapy should be steady, but the reality is that it involves a lot of back and forth movement.⁵⁹ Feelings of hatred and desires for revenge toward one's perpetrators may often return strongly through the therapy process. Thus, the practice of forgiveness should not be forced. There is a distorted culture in some Christian settings, in which pastoral leaders may highly value forgiveness and thereby put hurt people under pressure to forgive the perpetrator quickly,

⁵⁷Experiencing mortification and vivification in Christ is the way of having a new identity, "Christ-esteem." See Kellemen, *Gospel-Centered Counseling*, 209-16.

⁵⁸In RCT, many participants who engage in this practice confessed that they have felt those voices as God's.

⁵⁹Gingrich, *Restoring the Shattered Self*, 140.

implying that those who are currently unable to forgive are not good Christians: in this way, survivors can be revictimized by well-intended believers.⁶⁰ In such an environment, some survivors may deceive themselves by spiritualizing and moralizing the forced practice of forgiveness in order to appear to be a good Christian.⁶¹ Patterns of silence, passive-aggressive behavior, or hostile humor are typical signs that the forgiveness was not genuine and anger is being repressed.

Forgiveness is actually a natural outcome of the healing process. The theme of forgiveness often comes up when counselees are ready without the therapist initiating the discussion.⁶² As believers come to understand their union with Christ and experience his forgiving grace in faith, which was unearned and freely given, the indwelling Spirit will generally promote sympathy for other sinners and a desire to forgive them. When counselees open the discussion about forgiveness, the therapist can explain them about different kinds of forgiveness, and thereby helps the counselees discern what is appropriate and possible for the situation. In this regard, Steve Tracy's concept of forgiveness is helpful. According to Tracy, forgiveness can be understood in three ways: judicial, psychological, and relational forgiveness. Judicial forgiveness pertains only to God who cleanses human sins by the blood of Christ; psychological forgiveness refers to the release of hateful and vengeful desires toward the perpetrator and an extension of God's forgiving grace toward them; relational forgiveness means reconciliation with the perpetrator, which requires genuine repentance, responsible transformation, and persistent commitment for restoring the relationship from the perpetrator's side.⁶³

⁶⁰Atkinson calls this "instant forgiveness." Sue Atkinson, *Struggling to Forgive: Moving on from Trauma* (Grand Rapids: Monarch Books, 2014), 99–100; See also Gingrich, *Restoring the Shattered Self*, 148-49.

⁶¹Hopkins and Koppel, *Grounded in the Living Word*, 188.

⁶²Gingrich, *Restoring the Shattered Self*, 150.

⁶³Steven R. Tracy, *Mending the Soul: Understanding and Healing Abuse* (Grand Rapids: Zondervan, 2009), 180–94.

However, since perpetrators seldom genuinely take responsibility for the destructive outcomes of their sinful deeds and often deceptively practice repentance with fake tears, in order to lessen the impact on their relationships, finances, freedom, and reputation, it is not often possible to reconcile with one's perpetrators without the risk of putting oneself in an unfair and vulnerable position.⁶⁴ Typically the goal of counseling in terms of forgiveness with a survivor of trauma is to work on psychological forgiveness—leaving the judicial forgiveness to God and accepting that relational forgiveness is not always achievable.⁶⁵ By sharing knowledge about the spectrum of forgiveness with the counselees, a therapist can help them to set a clear, realistic goal of what is possible, thereby releasing any false guilt they may carry related to the need to forgive.

In order to facilitate psychological forgiveness, a theodrama therapist may encourage counselees to engage in three stages. First, a therapist can invite counselees to participate in the performance of Christ's judgment. At this stage, the therapist could play Christ's role and pronounces judgment on the perpetrator's sin. The therapist prompts counselees to imagine their perpetrators again, and then says, for example, "What you did was wrong. You committed a terrible sin to me and to (the survivor's name). You must repent and ask forgiveness from me and from (the survivor's name)." During this performance, the role of counselees is to witness Christ's judgment and trust God who speaks true judgment and will eventually establish justice for all. In so doing, counselees can avoid unresolved hatred for the perpetrators or naively excusing the perpetrators' sins, and leave the desire of revenge to God, faithfully honoring his authority to judge and maintain wrath over the evil doer: "Do not take revenge, my dear friends, but leave room for God's wrath, for it is written: 'It is mine to avenge; I will repay,' says the Lord" (Rom 12:19).

⁶⁴Gingrich, *Restoring the Shattered Self*, 148.

⁶⁵Ibid.

The second stage is to help counselees release their anger, bitterness, and any other negative emotions and desires towards the perpetrators to Christ. The therapist may prompt counselees to feel these emotions and desires and to imaginatively objectify and express them with emotion. Then, the therapist encourages counselees to find some gesture in which they take the emotion out of the heart (as if it were a package) and lays it down at the cross.⁶⁶ The therapist communicates with a gesture that implies that Jesus Christ takes the emotion-burden away. As counselees participate in this practice repeatedly, they can gradually empty out their embittered heart and make room for filling it with the heart of Christ. N.T. Wright put this in the way:

The fact is that when we forgive someone we not only release them from the burden of our anger and its possible consequences; we release ourselves from the burden of whatever it was they had done to us, and from the crippled emotional state in which we shall go on living if we don't forgive them and instead cling to our anger and bitterness.⁶⁷

Then, counselees are asked whether they are ready to forgive the person and can say, "I forgive you." By speaking out forgiveness, the counselee can literally perform a rehearsal of forgiveness. It is noted that forgiveness is not a one-time event, but a process. Therefore, even though counselees may have practiced forgiveness once, they can be agitated by anger and fear again, and return to a state of unforgiveness. For this reason, the therapist must sensitively pay attention to counselees' reactions and gauge their readiness for this process.

Walking in forgiveness is a part of living life before God. Of course, some believers may not be able to forgive their perpetrators until the consummation comes. Particularly given the severe wounds of trauma in their mind and soul, their faith should not be degraded. Forgiveness for trauma survivors is a lifelong journey just like the rest

⁶⁶Christian objectification always deals with the objectified thoughts, emotions, and desires from God's perspective in regard to union with Christ. See Johnson, *God and Soul Care*, chap. 18.

⁶⁷N. T. Wright, *Evil and the Justice of God* (Downers Grove, IL: InterVarsity Press, 2011), 135.

of sanctification. When they step into a new way of life in God's grand drama in which they can take off the small mind of the old self by union with Christ in faith, the wounded and hateful old heart is gradually transformed by Christ's compassionate heart, thereby enabling them to forgive evildoers little by little. Forgiveness in this sense is a gift of God, and it is an ongoing journey to become more and more conformed to the image of Christ, who first forgave us.

Rehearsing New Ways of Life in the Body of Christ

The last part of theodrama therapy helps counselees enter into community and society with a mission. Because of the unique experiences of trauma survivors, they have a distinct calling to care for those who have experienced the same kind of suffering and a divine calling to point out and to reform a larger distorted context that promotes traumatic situations. However, it still may not be easy for survivors to engage in new relationships.⁶⁸ In order to help them to reconnect with the larger community and society, theodrama therapy includes encouraging participation in a group in which they can live a missional life with mutual support.⁶⁹

The therapist may initiate a missional support group, consisting of several trauma survivors who are in the last few sessions of theodrama therapy, and gradually empower them to lead the group themselves and possibly eventually develop their own groups in the context of their local church. In such groups, they could facilitate the sharing of each member's story, to be received with empathy, support, and care for one another. Participation in such a group not only develops solidarity, which can be a great source of healing, but also provides a chance of practicing the missional life of caring for other similar sufferers. Also, while sharing their stories, members of the group may

⁶⁸Kolk, *The Body Keeps the Score*, 337.

⁶⁹A fundamental nature of the body of Christ is missional. Gregg R. Allison, *Sojourners and Strangers: The Doctrine of the Church* (Wheaton, IL: Crossway Books, 2012), 140–48.

recognize common sociocultural distortions, injustices, and evil which may lead them to speak out about the issue together as they seek to transform some aspect of sinful, damaged reality.⁷⁰ For example, they may develop a social campaign for survivors, participate in social work, actively engage in changing a law or societal system (as in the abolition of slavery or women's suffrage), or take part in evangelism by sharing their stories of faith in the midst of trauma.

When counselees turn from passive, terrified victims to active participants on mission alongside others, they will discover that the meaning and purpose of their lives are much bigger than the traumatic wounds they carry and will act as the body of Christ, manifesting the glory of God throughout the world: "You are the light of the world . . . let your light shine before others, that they may see your good deeds and glorify your Father in heaven" (Matt 5:14-16). At this point, theodrama therapy is ready to come to an end. At the end of personal counseling, including small group participation, therapists and counselees together review the entire course of therapy, summarize what has changed, celebrate the positive outcomes, and grieve the end of the therapeutic relationship.⁷¹ The ending of this relationship should be sensitively practiced in a way that does not make counselees feel abandoned, for it is always possible to have further counseling appointments if needed.⁷²

The closing comes with a hopeful prayer. Prayer is a way to meet with the

⁷⁰Doehring stresses the necessity of contextual sensitivity in counseling ministry. During her research and clinical ministry, Doehring realized the macroscopic significance of an individual's discourse. She noticed that the personal narratives of counselees are not only personal but also intertwined with communal bias, social oppression, and power structure of their culture. In other words, by listening to and speaking one's personal discourse, participants can reflect not only the reality of the self but also their contexts of social privilege and disadvantage, injustice and oppression, and cultural prejudice and evil. By this reflexivity, she argues, they can together become aware of and minimize their biased practices, and can resist social oppression, communal injustice, and cultural abuse. See Carrie Doehring, *Taking Care: Monitoring Power Dynamics and Relational Boundaries in Pastoral Care and Counseling* (Nashville: Abingdon Press, 1995), 153-55.

⁷¹Gingrich, *Restoring the Shattered Self*, 151-52.

⁷²*Ibid.*, 153.

Holy Spirit and to welcome his mighty power over human lives.⁷³ The life lived in theodrama is determined by God's sovereignty beyond any human actions. Counselees' lives depend on God's will, though humans are still accountable for their own responses. Through this theodrama therapy, counselees have practiced how to faithfully respond to God—embodying Christlikeness even in the midst of trauma. Prayer is a way to ask God's blessing upon those practices and seek God's persistent care for counselees after counseling has come to a close. Therapists and counselees together can express praise to God for the progress of therapy and ask for the Holy Spirit's help for counselees to faithfully become more and more like Christ in every situation and to actively participate in their calling. In so doing, counselees can be empowered to continue to practice a Christlike life rehearsed during the therapy in their ordinary lives, having a hope of God's presence, guidance, and care until the day of consummation comes: "Send me your light and your faithful care, let them lead me; let them bring me to your holy mountain, to the place where you dwell. Then I will go to the altar of God, to God, my joy and my delight. I will praise you with the lyre, O God, my God" (Ps 43: 3-4).

⁷³Charles Spurgeon, *The Complete Works of Charles Spurgeon*, Vol. 60, *Sermons 3387-3439* (Harrington, DE: Delmarva Publications, 2013), 3421.

Conclusion: Toward the Practice of Pastoral Theodicy

The aim of this dissertation has been to develop a biblical approach to treating trauma. Along the way we have explored four main areas. First, we reviewed diverse naturalistic approaches to trauma and provided a Christian psychological alternative—a Christian psychopathology of trauma which takes into account the effects of sin, damage, and suffering, and provides a holistic perspective of the person by considering the biological, psychological, sociocultural, and spiritual dimensions of a person and honors the primary authority of Scripture. Second, this study has attempted to look beyond the symptoms and diagnoses of trauma to reframe trauma in terms of theodrama. Theodrama reveals that trauma is not the final reality of the believer’s life: redemption and consummation will surely come. Thus, those who are living in God’s eucatastrophic drama can actively live faithful, missional lives in the midst of trauma. Third, it has been argued that Christiformity in theodrama is the faithful and therapeutic Christian response to trauma. Finally, a theodrama therapy has been proposed, which helps counselees embrace trauma and live a new way of life by embodying Christlikeness.

Throughout the discussion, the problem of theodicy has remained unanswered: How can the evil and suffering of trauma exist if God is good and all-powerful? Many have searched for an answer to this pressing question. Some believe that evil is not a substance, a thing in itself, but rather the absence of goodness (e.g., Thomists).¹ Some explain that human free-will is the source of evil: evil and suffering entered the world through the first human act of disobedience in the Garden of Eden and, as a result, all people have been affected by original sin, leading to more evil and suffering (e.g., Augustine, Plantinga, Swinburne).² Some argue that the presence of evil and suffering is

¹Henri Blocher, *Evil and the Cross: An Analytical Look at the Problem of Pain* (Grand Rapids: Kregel Academic & Professional, 2005), 27-28.

²Ioan Dorin Igna, “The Evil of God Or the Wound of Being: Post-Christian Reflections at the End of Theodicies” (PhD diss, Boston University, 2007), 59–89.

necessary for the process of “soul-making” (e.g., Hick).³ Some believe that God is powerless in human history (e.g., Sölle).⁴ Some reject God’s goodness (e.g., Hitchens),⁵ while others even view evil as a constitutive part of God (e.g., Igna).⁶

Each explanation offers a different perspective and emphasis, but all fail to present a full picture of the biblical representation of evil and suffering. The idea that evil is not an existential reality blunts the real experience of evil in this world and undermines legitimate hatred of evil (e.g., Rom 1:18; 12:9; Ps 7:11; Heb 12:28-29).⁷ The freewill defense, positing original sin as the primary cause of evil and suffering, is true (e.g., Gen 3; Rom 5:12), but does not fully explain the relationship of human agency and God’s sovereignty.⁸ It also doesn’t address the issue of unequal suffering—if all humanity is corrupted by original sin, then why don’t all people suffer equally?⁹ The soul-making theory makes evil out to be something good, rather than bad,¹⁰ and theodicies that represent God as powerless and evil undoubtedly oppose Scripture.

More seriously, these theodicies, at best, approach the problem of evil and suffering mainly from an intellectual perspective. Within a pastoral context that seeks healing for traumatic wounds, intellectual reasoning can be destructive rather than

³John Hick, *Evil and the God of Love* (New York: Springer, 2016), 372.

⁴Dorothee Sölle, *Christ the Representative: An Essay in Theology After the Death of God* (Minneapolis: Fortress Press, 1967), 151; Annette G. Aubert, “Theodicy and the Cross in the Theology of Dietrich Bonhoeffer,” *Trinity Journal*, no. 32 (April 1, 2011): 47–67.

⁵Christopher Hitchens, *God Is Not Great: How Religion Poisons Everything* (Toronto: McClelland & Stewart, 2008).

⁶Igna, “The Evil of God Or the Wound of Being,” 256–66.

⁷Blocher, *Evil and the Cross*, 84.

⁸*Ibid.*, 85.

⁹In reality that the poorest and most vulnerable suffer the most seems inexplicable. See John Swinton, *Raging with Compassion: Pastoral Responses to the Problem of Evil* (Grand Rapids: Wm. B. Eerdmans Publishing, 2007), 25.

¹⁰Hick, *Evil and the God of Love*, 363.

therapeutic. There are generally three dangers of an intellectual approach:¹¹ First, theodicies rationalize the presence of suffering and evil, thereby minimizing the tragic, painful reality of suffering and evil and failing to provide sufficient empathy and care for sufferers.¹² Second, by defending God and attributing the cause of evil to human beings, some theodicies end up blaming evil and suffering on those who are suffering; according to this view, there would be no innocent sufferers in this world because all are fallen. Third, theodicies hinder the therapeutic process. Engaging in a theoretical argument is not what a sufferer needs in the wake of trauma; rather they need comfort, permission to ask honest questions and freedom to grieve over their losses.¹³ In this context, mere intellectual answers and exhortations to depend on God's power and goodness can make sufferers feel alone and causes them to eventually hide their real emotional pain and suffering. Such approaches fail to provide genuine love, comfort, and care, similar to Job's friends.

Given that the question of theodicy is raised from real life struggles with evil and suffering, it tends to be more practical than theoretical in nature. Thus, this Christian psychological approach avoids engaging in the intellectual argument of theodicy and

¹¹Swinton, *Raging with Compassion*, 17-28.

¹²Ray Anderson tells the story of a woman who experienced the inadequacy of a theodicy in a pastoral context: "Her story was tragic and deeply disturbing. . . her 7 year old daughter had died of a brain aneurysm on a Sunday evening while she and her husband were attending a service in their church. . . .Tragic as this sudden death was and her grief over the loss of their only child, what happened next was disturbing and the cause of her outrage directed against God. The funeral service for the girl was held in the church with the pastor officiating. During the service, in an attempt to bring some meaning and comfort to the parents, he suggested that God wanted to bring spiritual renewal to the members of the church and had selected one of their most prominent families and had taken their daughter home to be with the Lord, where she was much better off than to live in this world. God's purpose in doing this, the pastor went on to say, was to cause the members of the church to reflect upon the brevity of life and to call them to repentance and renewed commitment to the Lord. He then gave an invitation to those who wished to acknowledge their new commitment to Christ to come forward for a prayer of dedication. Following the service she never went back to the church. As the woman told me this story, her face flushed with anger and she said, 'I could never worship a God who would do that!' . . . 'I would rather have my child and remain weaker in character, given the choice.'" Ray Anderson, *Dancing with Wolves, Feeding the Sheep: Musings of a Maverick Theologian* (Eugene, OR: Wipf & Stock, 2002), 100-103.

¹³Ibid., 102; Terrence W. Tilley, *The Evils of Theodicy* (Eugene, OR: Wipf and Stock Publishers, 2000), 221-57.

instead, highlights a pastoral response that emphasizes faithful living based on scripture. Rather than making a rational defense of God, this pastoral theodicy encourages those who suffer to live according to God's word in the midst of evil and suffering, and thereby manifest God's goodness and power.

In order to practice pastoral theodicy, believers need to hold to three biblical truths. First, evil is real. Scripture never negates the reality and danger of evil.¹⁴ Rather, it encourages us to fight against evil: "To fear the Lord is to hate evil" (Prov 8:13); "Therefore put on the full armor of God, so that when the day of evil comes, you may be able to stand your ground, and after you have done everything, to stand" (Eph 6:13). The Bible reveals that God is the clear antithesis of all wickedness (Rev 22:11-12), and that he hates evil (e.g., Pss 5:4-6; 97:10; Prov 8:13; Rom 1:18). Even in the case that God accomplishes good ends from what humans meant for evil, as in the story of Joseph and his brothers (Gen 50:20), it is God's sovereign intervention, not evil itself, that brings about good.¹⁵ The prophet says, "Woe to those who call evil good and good evil" (Isa 5:20). Evil itself is always evil and the wrath of God is upon it: "The wrath of God is being revealed from heaven against all the godlessness and wickedness of people, who suppress the truth by their wickedness" (Rom 1:18).

Second, the sovereign God is completely good and powerful. Scripture consistently describes God's *nature* and *actions* as good: "You are good, and do good" (Ps 119:68). His work of creation is described as "good" (Gen 1:4, 10, 12, 18, 21, 25); he works in us "to will and to act according to his good purpose" (Phil 2:13); and "in all things God works for the good of those who love him, who have been called according to his purpose" (Rom 8:28). His good purposes, however, are not always what fallen human beings imagine. Being sinners, people often define goodness as their own temporal,

¹⁴Blocher, *Evil and the Cross*, 85.

¹⁵*Ibid.*, 88-89.

worldly benefits without any suffering and pain, but from a theodramatic perspective, goodness is being actively worked out according to God's decrees and especially his plan of salvation in the broader story of his grand drama. In the midst of the progressing theodrama, his good plan sometimes requires patience and endurance through present trials (e.g., Jas 5:7-8; Gal 6:9; Heb 10:36). These difficulties, however, do not devalue or negate God's goodness. God is always good from the beginning to the end and he is working according to his good purposes, which may only be realized when Jesus comes again—when the earth is filled with the knowledge of God as the waters cover the sea (Hab 2:14).

Scripture also reveals that God is almighty. God introduced himself as *El Shaddai*, "I am God almighty" (Gen 17:1). God is the Creator of heaven and earth (Gen 1:1), the creator of everything (Heb 3:4; Eccl 11:5), the King of heaven (Dan 4:37), the God of all humankind (Jer 32:27), the Most High (Ps 91: 1), the true, living God and eternal King (Jer 10:10). God does whatever he pleases (Ps 115:3; Dan 4:35) and he can do far more abundantly than we can ask or think (Eph 3:20). God declares, "I make known the end from the beginning, from ancient times, what is still to come. I say, 'My purpose will stand, and I will do all that I please'" (Isa 46:10). According to the Bible, God is the all-powerful ruler of the universe. God made all things, and therefore he has the right to rule over all things.¹⁶

Third, God will accomplish a final victory over the evil and suffering of the world. In the last days, a new heaven and a new earth will be established, the holy city will come down out of heaven and God will wipe away every tear. There will be no more death, mourning, crying, or pain (Rev 21:1-4); the water of life will flow from God's

¹⁶Reformed traditions distinguish "the power of God as *potentia* or the power inhering in the divine essence to do as it wills and the power of God as *potestas* or the power of God over things, that is the absolute *jus* [law] and *authoritas* [authority] of God to control what is his." He says that the power of God as *potestas* is the "right of the creator over the creation" Richard A. Muller, *Post-Reformation Reformed Dogmatics: The Divine Essence and Attributes* (Grand Rapids: Baker Publishing Group, 2003), 537.

throne to his people, all nations will be healed, and the curse will be removed (Rev 22:1-3); justice and righteousness will fill the earth (Amos 5:24); God's people will delight in joining the everlastingly praise of the glory of the King (Rev 19:5-8). So all evil and suffering will be banished forever. This triumphant future is an absolute certainty, because God does not lie and he fulfills his promises (Num 23:19). Most assuredly, God has already accomplished victory through Jesus Christ: "In this world you will have trouble. But take heart! I have overcome the world" (John 16:33). Thus, those who abide in Christ already have victory in him and will experience it more completely when that final day comes.

Pastoral theodicy encourages believers to hold these three biblical truths together in faith and live out their lives accordingly. In other words, pastoral theodicy urges people to live faithfully and endure pain and suffering by placing their faith in God's goodness and power, while looking forward to the final victory of the eschaton. When children are abused as the result of sinful desire and avarice, when innocent people die as a result of social oppression, when the poor and elderly are denied treatment and care for their diseases, it is inappropriate to intellectually argue God's justification over evil and suffering. Instead, such situations call for the demonstration of faith in God's love and care, as an expression of God's presence with those who suffer—this is pastoral theodicy. God wants to "proclaim good news to the poor . . . to proclaim freedom for the prisoners and recovery of sight for the blind, to set the oppressed free, to proclaim the year of the Lord's favor" (Luke 4:18-19). By practicing pastoral theodicy, we can responsibly participate in his compassionate ministry.

From the perspective of pastoral theodicy, the why questions get reframed: Why are we permitting evil and suffering in our midst? Why are we still living in sin and disobedience to God? Why are we defeated by the evil that Jesus has already overcome? Why do we not actively respond according to God's purposes communicated in scripture, even though we know that God hates evil and loves justice and righteousness? Pastoral

theodicy asks all believers to consider their responsibility to rehearse the gospel in their everyday life, to proclaim God's redemption, to love God and others, and to take part in bringing about the Kingdom of God.

The prevalence of trauma today reveals that we are not yet taking full responsibility to live according to God's word. Believing in the sovereignty of God does not negate human responsibility. At the same time it is prideful to think that everything depends on human action, to the neglect of God's intervention in the world. In such cases, Christian service turns out to be a mere social work program. God's providence works in and through human action. Within the framework of pastoral theodicy, one's confession of faith in the goodness and power of the sovereign God is a practical commitment to live according to his will even in the midst of trauma. This commitment should be reflected in faith-filled speech and actions, not only in how we think and feel.

We cannot change past traumatic experiences, so we must embrace the wounds as part of ourselves. However, we can make changes in the present and the future. Christiformity is not only a way of embracing past wounds, but also a way of transforming our lives in the present and future. It is a way of practicing pastoral theodicy in the midst of trauma, resulting in healing and transformation of the self, the Church, and the world. This practice is an ongoing journey and a part of the theodrama, until the final consummation comes. Those who have trusted Christ are waiting for his return. Until that day, it is our task to faithfully walk with Christ in every situation, including trauma, so that our faithful lives might result in the praise of God's goodness, power and glory. "He who began a good work in you will carry it on to completion until the day of Christ Jesus" (Phil 1:6).

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ABSTRACT

EMBRACING TRAUMA IN THEODRAMA: EMBODYING CHRISTIFORMITY

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This dissertation argues that the theodramatic understanding of trauma and relevant therapeutic practices help traumatized people reframe the reality of trauma within God's drama of redemption and thereby enable them to embrace it in the process of Christiformity, which is the God-given way of human healing and flourishing.

Along the way this inquiry explores four main areas. First, it reviews diverse naturalistic approaches to trauma and develops a Christian psychological alternative—a Christian psychopathology of trauma which takes into accounts the effects of sin, damage, and suffering. This Christian psychopathology provides a holistic perspective of the person by considering the neurobiological, psychosocial, sociocultural, and spiritual dimensions of a person and honors the primary authority of Scripture. Second, this study attempts to look beyond the symptoms and diagnoses of trauma to reframe it in terms of theodrama. Theodrama reveals that trauma is not the final reality of the believer's life: redemption and consummation will come. This work shows that those who are living in God's sovereign drama can actively participate in a faithful, missional life even in the midst of trauma. Third, it argues that Christiformity in theodrama is the faithful and therapeutic Christian response to trauma. Finally, this dissertation proposes a theodramatic therapy, which helps counselees embrace trauma and live a new way of life by embodying Christiformity. It also provides the theological reflections of the problem of theodicy, encouraging the practice of pastoral theodicy.

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