

*Behold,
children are a heritage from the Lord,
the fruit of the womb is a reward.
Psalm 127: 3 NKJV*

IN FOCUS

—Rosemary Sabatino

A Heritage

Behold! This word is translated from the Hebrew *hinneh* which carries the connotation to *surely and indeed pay attention*,¹ and its use in scripture is almost always a signal that something very important will follow. Yes, children are a *heritage from the LORD*. Many translations interpret *heritage* as a gift, and indeed, children are a precious gift. But the word *heritage* means so much more. It is defined as something that comes or belongs to us by reason of birth²—it tells us something about who and where we came from. It instills in us a sense of who we are, what we might become and what we are expected to transfer to the next generation of family and community. As a *heritage from the LORD*, children are truly God's special gift for they are the hope for the ongoing kingdom of God in the world! And they are placed in our hands as a reward.

A Responsibility

In Deuteronomy chapter six the Lord gave His people—Israel—their mission statement and it stands for His church today. *Hear, O Israel! The Lord is our God, the Lord is one! You shall love the Lord your God with all your heart and with all your soul and with all your might. These words, which I am commanding you today, shall be on your heart. You shall teach them diligently to your sons and shall talk of them when you sit in your house and when you walk by the way and when you lie down and when you rise up, (Deuteronomy 6:4—7 NASB).* Children were an integral part of Israel's mission. The Lord made it clear that the responsibility to nurture the precious promise of the Kingdom, which lay in the hearts of the children, was a preeminent responsibility. The role of the parent was to model the ways and statutes of the Lord in every area of their life *so that you and your son and your grandson might fear the Lord your God ... and that your days may be prolonged ... that it may be well with you and that you may multiply greatly, just as the Lord, the God of your fathers, has promised you, (Deuteronomy 6:2—6 NASB).* This mission and role is still in effect for

parents today. Where parents are absent, as is the case for so many children at risk and in crisis, the responsibility is relegated to the church. In incarnational ministry we are to be as He is: *A father to the fatherless, ... is God in his holy dwelling, (Psalm 68:5 NIV).* We, as the Church, must recognize and nurture the value the Lord places on children—not only as the promise for the future of the Kingdom but as an important place in the kingdom today!



A Ministry

Like arrows in the hands of a warrior are children born in one's youth. Blessed is the man whose quiver is full of them. They will not be put to shame when they contend with their enemies in court, (Psalm 127: 4—5 NIV). In these verses the LORD shows us that children hold an important place in the Kingdom. He has ordained a special place of ministry for them in the body of Christ—they are to be arrows against the enemy. The word translated as *contend* (or *speak* in many versions) literally means to *command, warn, threaten and put to flight*³. This ministry is confirmed in Psalm eight, a Scripture quoted by Jesus in Matthew 21:16: *Out of the mouth of babes and nursing infants You have ordained strength, because of Your enemies, that You may silence the enemy and the avenger, (Psalm 8:2 NKJV).* What a tremendous ministry children have been given by the Lord—prayer and praise—and for an important purpose, **to silence the enemy and the avenger!** It is no wonder that the enemy has waged a war against children in an attempt to eradicate the power behind their prayer and praise and to hinder the future of the kingdom.

A Target

For those of us who work with and for children at risk and in crisis, we are well aware that the enemy has targeted them for destruction. We see firsthand the tremendous damage inflicted on children today through the trauma of abuse, abandonment, neglect and exploitation. Such trauma can hinder a child's emotional, physical and spiritual development and can destroy their ability to have meaningful and healthy relationships; ultimately affecting their relationship with the Lord. How can we help them?

The *Barnabas Letter* is dedicated to answering that question and this quarter our focus is on the effects of trauma on children and caregivers. We praise God for our qualified and experienced contributing authors. In her article **Trauma Educated Care**, Rebecca Puchy LCSW, MSW explains the physical and emotional effects of trauma on children. She also gives us guidelines for recognizing trauma behavior and practical intervention strategies. **Vicarious Traumatization: An Occupational Hazard for Caregivers**, written by Dr. Diane Langberg Ph.D, explains the tremendous impact evil and suffering can have on caregivers who are exposed to traumatic situations and offers real advice on how we can cope and remain healthy. Rev. Dr. Bagudekia Alobeyo introduces us to the new face of missions in his article **Trauma Recovery as a Field for Mission** in which he stresses the importance of biblically addressing worldview in order to be effective. Finally, you will be encouraged and challenged in the *Caregivers Time-Out* by Rev. Stewart Sampson's article, **Let Us Go Over to the Other Side**.

We know that the war against children is no longer relegated to certain areas of the world but has permeated every community and every culture. Traumatized and hurting children are well within the reach of every church and faith community and the Lord has given us the responsibility to be *fathers to the fatherless*. May we, His Church, recognize the tremendous value He places on these little ones as the hope for the future; realize the powerful ministry He has ordained for them now; and may we rise-up in His strength to bring healing and hope to their hurting hearts.

They are the heritage of the Lord!

Trauma Educated Care

—Rebecca Puchy LCSW, MSW

The Spirit of the LORD is upon me, for he has anointed me to bring Good News to the poor. He has sent me to proclaim that captives will be released, that the blind will see, that the oppressed will be set free, and that the time of the LORD's favor has come (Luke 4:18–19 NLT).

With these words Jesus began His public ministry. He then called disciples to follow Him.

Trauma Educated Caregivers seek to understand the connection between the presenting behaviors and the individual's past trauma history.

Extending Jesus' Ministry

As caregivers called by God to minister to children and teens who have been traumatized, you are privileged to participate in His ministry as His modern-day disciples. We are called to work among the poor, the captive, the physically challenged and those oppressed in many different ways. And just as the disciples who accompanied Jesus were challenged by the magnitude of the needs they confronted, you will undoubtedly be shocked and overwhelmed by the enormity of the damage done to children. But don't give up! Ministry to children is close to God's heart (Mark 9:37).

Do No Harm

One of the things that can make our ministry difficult is the emotional and behavioral damage that can result from trauma. These challenging "trauma reactions" can be misunderstood as behavior problems and evoke punishing and shaming responses from caregivers. Our interactions then become triggers that reactivate the feelings from trauma experiences and retraumatize the children we are called to love. Trauma Educated Care is a way to minister while inflicting the least possible damage to those who are the most challenging and most in need of our care.

The aim is to help caregivers "DO NO HARM" by educating them on the effects of trauma and offering ways to



care for traumatized children without inflicting further damage by negative reactions to their behaviors. Trauma Educated Caregivers seek to understand the connection between the presenting behaviors and the individual's past trauma history. In addition, it aims to foster resiliency to help children cope with stressful situations and withstand the negative effects of adversity. Common mistakes caregivers often make:

1. Misinterpreting behaviors as intentional and willful that are actually the result of neurobiological changes and damage from the trauma
2. Not understanding that challenging behaviors may actually help children survive in dangerous situations

The latter is especially important if children are going back to traumatizing situations after our care. In this case, these behaviors may help keep them alive. Behaviors we see as "bad" or "wrong" can be functional survival skills in dysfunctional and dangerous situations.

Effects of Neglect and Trauma

It is important for us to understand the effects of neglect and trauma on children. Children develop in the context of relationships. Our brains need positive stimulation at the right time from "good enough" caregivers to develop in a healthy way. Brain cells develop and make connections based upon interactions with the environment. Neglected children who did not get adequate stimulation and interaction with caregivers have been shown to have brains that are up to 8 percent smaller than children raised in "good enough" environments. Some developmental processes must happen during specific "windows of opportunity," and it is extremely difficult to make up for this loss later. During their early years, children

are setting up the infrastructure of their brain from which the rest of development will take place. Additionally, neglect can interfere with the process of attachment, which becomes a template for future relationships.

Trauma is a psychologically distressing event in which there is actual or threatened harm to oneself or another person. The experience usually evokes feelings of terror and helplessness. The survival responses of “fight or flight,” dissociation or a mixture of both are often used to cope.

The “fight or flight” response is a “full-bodied” experience that changes a person physically, emotionally and cognitively so he/she can respond to the threat by attacking physically or running away. The heart beats faster, blood pressure increases, blood rushes to the limbs, digestion slows, emotions move from calm to alarm to fear and eventually terror. Thoughts become narrowly focused on surviving the threat. This response is more likely to be used by older children, males, and people in situations where they have the opportunity to fight or flee.

These behaviors ... represent the physical consequences of trauma exposure and beliefs developed from their experiences.

Dissociation, focusing one’s mind inward, away from the reality of the trauma, is often used by younger children, females, and those who are not capable of self-defense. Dissociation can create a distorted sense of time and a feeling of being detached from oneself and/or the event. Details of the event may not be clear afterwards, which can make it difficult to process and understand the trauma situation.

Traumatic events will often play over and over in the minds of children. Images of the trauma may intrude on their inner world. The scenarios are often in their play, and they may tell their story repetitively. As this happens, the children may re-experience the emotional, physical and cognitive changes of the event. They may try to avoid anything that reminds them of the trauma.

Trauma can have a negative effect on the brain. The hormones and neurochemicals involved in the process of a trauma reaction can change the brain connections and pathways, destroy brain tissue and permanently alter the functioning of neurotransmitters. This “rewiring” can result in changes in a person’s thinking, perception, emotions and immune system. His/her “executive functioning,” memory, ability to plan, ability to concentrate, impulse control and emotional reactivity can be altered.

Children can also develop cognitive difficulties and learning disabilities. Linear thinking and sequencing can be damaged. They can become hyperactive, impulsive, anxious, withdrawn, depressed, hypervigilant, and have sleep difficulties, rapid heartbeat and elevated blood pressure. Traumatized children are often mistaken as having Attention Deficit Hyperactivity Disorder (ADHD). However, typical medical treatment for ADHD will actually worsen many of the trauma symptoms.

The first step ... is to provide a safe environment where they are treated with respect.

The extent of damage from trauma is contingent upon many factors, including:

- 1. The age and developmental stage of the child.** The younger the child, the fewer and less mature coping skills he/she has available. In addition, important developmental processes can be delayed or derailed. Attachment difficulties can become obstacles to healthy relationships that could help the child in the future.
- 2. Whether the incident happened to the child or another person.** A direct assault has the worst effect. However, an attack on a primary caregiver is extremely terrorizing for a young child.
- 3. The lethality of the trauma:** the more lethal the trauma, the greater the level of damage.
- 4. The length of and number of trauma events.** A one-time incident affects a child differently than many months or years of living in terror.
- 5. If the perpetrator was a human.** Accidental events are not as psychologically damaging as trauma perpetrated by a human.
- 6. If the perpetrator was someone the child knew or trusted.** This betrayal can damage trust and the child’s sense of safety and security.
- 7. The type of support available afterward.** The child will fare better with a good support system that can provide safety, security and a place to process the event.

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Trauma Educated Care

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The effects of trauma can look different depending on the age of the child.

Children ages 0-3:

- Scream / cry inconsolably; show excessive temper
- Regression in their behavior
- Immobility or aimless motion
- Startle easily and anxious reactions to loud noises
- Fear people who remind them of the perpetrator
- Fear separation from their caregiver
- Be withdrawn, sad, anxious, and/or irritable
- Poor appetite and low weight
- Sleep problems

Children ages 3-5:

- Excessive temper tantrums and acting out
- Regression in their behavior; thumb sucking, etc.
- Loss of previously developed skills
- Startle easily; anxious reactions to loud noises
- Anxious, fearful, sad, irritable,
- Difficult to calm down
- Terror responses to reminders of the traumatic event
- Difficulty paying attention
- Loses interest in playing; passive
- Becomes overly compliant
- Act withdrawn and isolate from others
- Fear separation from caregivers
- Have trouble trusting others and making friends
- Believe they are to blame for the traumatic event
- Have headaches and stomachaches
- Problems with sleep including nightmares
- Changes in appetite and weight
- Play out or talk about the traumatic event
- Difficulties focusing and learning in school
- Develop phobias such as fear of the dark

Children ages 6-12:

- Be quiet, upset, and withdrawn
- Be tearful, sad, and isolate
- Emotional numbing or flatness
- Irrational fears
- Anxiety, depression, and guilt
- Physical complaints
- Terror responses to reminders of the traumatic event
- Impulsivity and overreaction
- Fight with peers and adults
- Put the event in the wrong order
- Changes in school performance; increased absences
- Impaired attention and ability to concentrate

- Play out parts of the traumatic event
- Changes in appetite and weight
- Get in trouble at school or home

Teens ages 13-18:

- Shame, guilt, embarrassment about their reactions.
- Talk about the event excessively or deny it happened
- Fatigue
- Emotional numbing; avoids of reminders of trauma
- Flashbacks and nightmares
- Guilt, suicidal thoughts, and revenge fantasies
- Self-destructive, accident-prone; reckless behavior
- Impulsive and aggressive behavior
- Sleep more or less hours than normal
- Isolating and not spending time with friends
- Change in school performance and attendance
- Use drugs or alcohol
- Get in trouble with the law

Providing Trauma Educated Care

As you live out Trauma Educated Care, you will be living out the life of a modern-day disciple of Christ.

Children exposed to trauma can be highly guarded, untrusting, emotionally reactive, defensive, angry, manipulative, unable to learn from experience, blaming, and seemingly unresponsive to a caregivers' efforts to help. These behaviors were survival skills in the past and possibly in the present if the trauma is ongoing. More importantly, they represent the physical consequences of trauma exposure and beliefs developed from these experiences.

The first step in Trauma Educated Care is to provide a safe environment for the children including a safe relationship where they are treated with respect. An atmosphere where their trauma reactions are not reactivated by interactions with them and they can learn to trust as the love of God is modeled by the caregiver. Caring, supportive adults can provide an oasis of safety and hope where children learn and recover from major adverse experiences.

Caregivers should also model healthy, godly behavior for children who have been raised in dysfunctional situations. The children may not make immediate changes, but seeds have been planted that can grow when they are in the right situation. Behaviors that are functional in healthy situations can be dysfunctional in unhealthy, dangerous situations. For example, telling the truth to a maniacal person who has total power can get children killed. They may not be in a situation where it is safe to practice healthy behaviors, but when they are, seeds have been planted that can grow and flourish.

Some practical aspects are:

1. Try to understand before acting. Learn the children's stories. This will help you understand their behavior and the specific coping skills they employ. Become a student of the children's behavior patterns. For example, fearful children will often be seen as willful, defiant, stubborn and/or controlling. They might be "frozen in fear." Caregivers will intuitively become angry and more demanding to force compliance. This makes the children more fearful and "frozen." They may regress further and become combative out of fear and self-protection or may actually faint.

Realize that regression is normal. Be calm and reassuring yet firm in your tone of voice when interacting with the children so as not to reactivate their trauma responses. Always SPEAK THE TRUTH IN LOVE!! Don't be punitive or shaming, as this will exacerbate the negative behaviors and alienate the children from the care you offer.

2. Don't personalize their reactions to you. Remember that they are reacting out of damaged emotions and thought processes.

3. Be willing to talk about the trauma events if the children bring it up. Listen and provide comfort and support. Do not overreact to their story. Help the children identify, label and express their feelings. Expressive arts such as drawing are often helpful. Help them understand what happened in an age-appropriate way. Try to correct cognitive distortion that could lead to irrational beliefs.

4. Provide structure and a consistent pattern to activities. Predictability is important for children who are trying to learn to trust. It also helps build a sense of safety. Discuss any changes in routine ahead of time.

5. Discuss your expectations for behavior and discipline. Make sure that your expectations are developmentally appropriate. Be aware that traumatized children may not be functioning at their chronological age. Set up rules and let the children know the consequences of breaking the rules. Let them have a part in making the rules if it is appropriate. Use "time outs" in safe places so the children can learn to de-escalate and regulate their emotions. Try to understand and redirect the children before dispensing punishment. Use positive reinforcement and rewards as much as possible.

6. Be nurturing, comforting and affectionate in an appropriate way. Realize that children who have been physically or sexually abused may misinterpret touch as threatening. Use body language and voice tone that is calming.

7. Give the child choices. This helps to build and

reinforce a sense of control. With younger children, give specific choices such as, "Do you want the apple or crackers for a snack?"

8. Encourage and model nonviolent ways to interact and play. Teach scriptural principles for relationships. In addition, teaching and modeling simple skills such as "counting to 10 when angry" can help with emotional regulation.

9. Teach and model good self-care, including eating a healthy diet, getting enough rest, time management / planning skills and making good choices.

10. Foster good self-esteem. Provide opportunities for mastery of simple tasks. Focus on strengths and compliment successes. Use words to build them up. Celebrate their achievements no matter how small they may be.

11. Pray for patience, guidance, understanding and wisdom. God has given you this opportunity to be His hands, feet, voice and heart in your specific situation. He can give you insight into difficult aspects of your situation.

12. Learn more about trauma and caring for traumatized children. Research the effects of trauma on children in your specific situation and culture, as well as ways other caregivers have found to minister to these children. Then share that information with your team. Become knowledgeable about each child, their story and how trauma has affected them individually. Discuss ways to apply your new knowledge to your specific situation.

As you live out Trauma Educated Care in your specific situation, you will be living out the life of a modern-day disciple of Christ called to care for His children and show them His love.

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Vicarious Traumatization:

An occupational hazard for caregivers

—Diane Langberg, Ph.D.



While interacting with Christians involved in crisis work, I find many are feeling the powerful impact of evil and suffering on their lives. They are hungry to know how to withstand such an impact without being misshapen by it. What happens to us as we sit day after day with sin and suffering, and what do we need to do to protect ourselves?

If you sit with evil and suffering long enough, you will begin to show characteristics similar to those of the victims you are trying to assist.

We are told in the first chapter of Genesis that God said, “Let us make mankind in our image, in our likeness” (1:26). If something is to be in the image of or bear the likeness of something else, it must by definition be capable of bearing an image. It must, in its very nature, be malleable or capable of reflecting. You can stand in front of the trunk of a tree until you are 100 and you will not see your image reflected there. However, put yourself on the edge of a pond and you will find yourself staring back. To have been created in the image of something is to *be*, in your very nature, an image bearer. Paul speaks of this principle when he says, “by reflecting as a mirror the glory of the Lord we are changed” (2 Corinthians 3:18).

As image bearers, however, we not only reflect but we are also shaped. We carry within that which we reflect. We are image *bearers*, not simply image reflectors. If you stand in front of a mirror, you see yourself reflected there. But if you walk away, the image is gone. Nothing within the substance of the mirror is any different than before you were reflected in it. Mirrors do not assimilate your image. I believe that human beings, over time, take into their very substance the things that they reflect. They hold such reflections preserved within themselves. We become like that which we habitually reflect. Recognizable bits of one soul, over time, begin to show in another. I know of a man who has worked for years with those who are dying of AIDS. He is touched by death and dying every

day. Someone who works alongside him recently said, “His character is changing before our very eyes.” In other words, he is so profoundly impacted by what he does, he does it so much, that he now bears in his person the image of death and grief.

Judith Herman, in *Trauma and Recovery*, says, “Trauma is contagious. In the role of witness . . . the (caregiver) at times is emotionally overwhelmed. She/he experiences, to a lesser degree, the same terror, rage and despair as the patient . . . This phenomenon is known as . . . vicarious traumatization.” Dr. Herman is reiterating the same principle: if you sit with evil and suffering long enough, you will begin to show characteristics similar to those of the victims you are trying to assist.

Vicarious traumatization is an occupational hazard, an inescapable effect of trauma work. It is not viewed as something people do *to us* but rather as a human consequence of knowing, caring and facing the reality of trauma. Victims deal with horrific things, and the care and concern you have (and should have) create a door to the inside of you, and you can easily find yourself overwhelmed and shut down. It can result from the relentless nature of the work or it can happen suddenly.

How are we to protect ourselves from being misshapen? Self-care includes your food, exercise, sleep, medical care, schedule and recreation. When we are dealing with people in great need or crisis, we tend to neglect the care of our bodies (mirror the victim). Sometimes that is unavoidable, but it cannot continue for long or we will break down both physically and emotionally. We live in frail, finite bodies that require care and nurture. It is critical not to get so caught up in the needs of others that we end up destroying ourselves.

Good, supportive relationships have a tremendous effect on an individual’s resiliency and emotional health—for both trauma victims and their caregivers. Pain and suffering often isolate us from others. Stressful schedules and

overwhelming needs keep us busy, and one of the first things to go is supportive connection with others. The sense of being cared for by others is very important for our endurance.

A living faith that brings truth, comfort and hope is also crucial. Being prayed for and praying are vital supports. Evil and suffering have a tremendous capacity to swallow up our faith and leave us full of despair. They can also distort our thinking. Working with war, violence, atrocities, trafficking and rape carries within it things like evil, darkness, chaos, isolation and despair. It is crucial that you find ways to counteract the impact of those things. It means you must deliberately seek out good, beauty, order, safety, connection, intimacy, comfort and hope. These are antidotes to the poison in the work. Without such antidotes we will slowly die emotionally, physically and spiritually.

Pursuit of Him in all areas of our lives is vital, or we will fail to bring His image to our clients and only end up mirroring theirs instead.

I have realized even more clearly in recent years that these antidotes are not just helpful in coping with the effects of this work but they are also part of a life that is obedient to God. I find many caregivers feel guilty pursuing beauty and peace and order in their own lives, knowing of the chaos and torment in those for whom they care. As if somehow they should not have good in their lives while others suffer. However, the Word of God says that He gives us richly all good things to enjoy. To turn from such things is to turn from the gifts in His hand. Even more, these things are tastes of His character in our lives, for He Himself is life, beauty, order, harmony and glory. How we need to pursue and soak in the things that are of Him and reflect his character *so that* we not only can endure in the work but also bring His character to others in their suffering.

These things will not prevent us from bearing the image of others' suffering in our own lives. In doing so, however, we must remember that we are following in the footsteps of our Savior. He became flesh and entered into our trauma, literally taking our sin and suffering on Himself. Think about the impact of working with evil and suffering:

1. It affects our identity. His identity was eternally altered—He who was God became man.
2. It damages connection. He who was one with God cried out, “My God, My God,


why have you forsaken Me?” (Psalm 22:1 NKJV)

3. Trauma overwhelms us with strong feelings. “My soul is exceedingly sorrowful, even unto death.” (Matthew 26:38 KJV)
4. Trauma threatens our sense of safety. He was abandoned by the Father and suffered, *alone*, the consequences of our sin.

Paul says in Colossians 1:24 NKJV, “I find joy amid my sufferings for you, and I fill up in my person whatever is lacking in Christ’s afflictions on behalf of his Body, the Church.” As we sit with the trauma of others and feel it reverberate throughout our persons and our lives, let us remember that there is nothing that Christ has called us to do that He himself has not undergone. Following in His ways we bring His comfort and healing to those whose lives are so damaged by the evil of others. Not only has He endured the same things in a far greater measure, He has promised to be with us and in us as we do this work to which He has called us. Pursuit of Him in all areas of our lives is vital, or we will fail to bring His image to our clients and only end up mirroring theirs instead.

Entering into the suffering of others is a privilege. It is also difficult to do. The task of serving as a representative of the character of God so that who He truly is can be grasped, understood and believed in some measure, is far beyond any capability of yours or of mine. It is a work, however, that if we let it, will take us to our knees with hearts hungry for more of God, that we might in turn bring His presence in very concrete ways into places and lives where He has not yet been known.

Diane Langberg, Ph.D. is a psychologist and the director of a group practice in suburban Philadelphia. She has worked with both trauma survivors and clergy for 35 years. Dr. Langberg speaks internationally on topics related to women, trauma, ministry and the Christian life. She is the author of *Counsel for Pastors’ Wives*, *Counseling Survivors of Sexual Abuse*, *Counseling Women* (with Dr. Tim Clinton), *On the Threshold of Hope: Opening the Door to Healing for Survivors of Sexual Abuse*, and also a contributor to *Christian Counseling Today* and other publications. Dr. Langberg chairs the Executive Board of the American Association of Christian Counselors. She is the founder of *The Place of Refuge*, an inner city, non-profit trauma and training center. Further information is available at www.dianelangberg.com.



Trauma Recovery as a Field for Mission:

And the need to biblically address worldview

—Rev. Dr. Bagudekia Alobeyo

Presented at

The Trauma Healing Global Community of Practice

Inaugural Gathering

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Your decision to attend this forum speaks loudly about your desire to assist those who have the wounds of trauma. Your presence here is also a sign of your commitment to advance Kingdom ministry around the world. If you agree with Dr. Diane Langberg and consider “trauma healing” as a field for mission today, I will say with the Apostle Paul in Romans 10:15 that *your feet are beautiful*. You show obedience to the Great Commission by being involved in mission work.

To perform your mission role well, you need to follow the footsteps of Jesus who was and is the Missionary par excellence. You will not shed your blood for the recovery and healing of those who have the wounds of trauma. But during your mission work you will point them to Jesus.

As you know, the missionary journey is rarely easy. That is why we need to pay close attention to the whole counsel of God, which is full of best practices and approaches for doing Christian mission and ministry.

Jesus' Example

As a good Teacher and Mentor, Jesus had his disciples practice under his watch before he completely entrusted to them the task of replicating and extending his mission (Matthew 10:1–16 and Luke 10:1–24). During a sending-off ceremony, Jesus instructed, oriented, advised and warned His disciples before they went on their mission.

- a. He set the **priority** of the mission by indicating the targeted audience (beneficiaries): the lost sheep of Israel, but not the gentiles or the Samaritans. This was a necessity because the death and resurrection of Jesus, that is the foundation of the gospel, did not take place yet. The mission was to break down the doubt of the lost sheep about the coming of the promised Messiah and invite them to get ready to extend Jesus mission to the gentiles.
- b. He provided a clear **message** to be delivered: “The Kingdom of Heaven is near.” (Matthew 10:7 NLT)
- c. He told them about the **indicators**—how they should measure the impact of the mission work (life changing): the sick will be healed, the dead will be raised, the lepers will be cleansed, the demons will be driven out, and so on (Matthew 10:8).
- d. He warned them about the **danger** of marketing the gospel’s life-changing message. It is by grace that you received, so freely you will give it to others. (Matthew 10:8, Ephesians 2: 8—9).

- e. He gave them instructions for the **process**. Do not take any extra thing you think you may need. Jesus wanted them to completely depend on God for provision.
- f. He called them to be people of **discernment** who could make the right decisions.
- g. He gave them **specific characters** to adopt or develop: be like sheep among wolves, as shrewd as snakes, and as innocent as doves. Sheep are calm but strong. Snakes can be dangerous but quick to flee from danger.
- h. He warned them about **distractions**. The warning—“Do not greet anyone on the road” —(Luke 10:4b) is mentioned in the mission of the seventy disciples. The Jewish tradition of greetings is similar to the African way. Greetings can take more than a few minutes in both Jewish and African traditions. Asking about the household of your conversation partner is part of the greeting. The disciples were warned against getting distracted or deviating from the mission.

By providing all these instructions or warnings, Jesus took into consideration the worldview of the people His disciples would be reaching. In all the mission work we want to do—whether it be trauma healing, evangelism, discipleship, etc., in whatever location or time—we need to take seriously the worldviews and the local context of those we serve. Our model is always respectful but also challenging where necessary.

Worldview and Culture

We can define a worldview as a way a group of people or an ethnic group in a particular geographic area understand the world and develop accordingly a common way of life. The way people conceive the world determines their life as a community—and this is expressed through their culture.

Culture can thus be seen as a channel through which a group of people express their identity, with worldview as the fountain’s source. The ways of life and the moral character of a nation or ethnic group are driven by the worldview. In African and other contexts, culture is developed to protect the worldview from harm, distortion and shame.

We have learned that we will see enduring impact from Christian mission work only when such mission interacts constructively with people’s worldviews without compromising biblical truth. Only by doing so can mission work address not only the symptoms of trauma, but its taproots.

Example: African Worldview

Trauma healing addresses the psychological needs of conflict survivors, but it must do so with full awareness of the cause of their trauma. Without an understanding of the worldview that explains why people got into the conflict, trauma healing will be neither effective nor sustainable. We will waste time, money and energy. Addressing only the symptoms will frequently lead to a recurrence of the same problem.

You have heard, for example, about the land conflict between various ethnic groups in Africa. Disputes over land have led to mass killing and displacement and to trauma among the survivors. Recognizing the significance of land in the worldview of these groups is critical to the reconciliation process. Africans defend the land they occupy for social, economic and religious reasons, but the concept of land goes beyond mere territory. Land is part of African life and identity. The gods and spirits of each ethnic group are in the trees, mountains, rivers and valleys making up the land. Animals in the forests and fish in the rivers constitute a group's patrimony.

The church, working through its various components, has the capacity to deliver a message within the biblical worldview that recognizes the traditional African worldview yet calls out the eschatological dimension of land, helping Africans understand their land in the context of reconciliation.

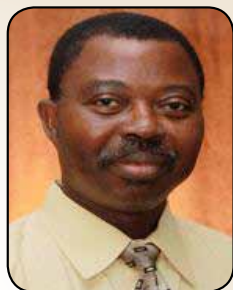
Conclusion

May God help us to address not only the symptoms of trauma but also its roots. May God help us to develop an understanding of the worldview of the people we serve and address, through our trauma healing programs, the roots as well as the wounds of trauma.



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Crisis Care Training Events

WEC International Clayfield, Queensland, Australia October 9—13, 2012

Offering Healing and Hope for Children in Crisis Module One—Trauma and Crisis Care

This module provides an understanding of the impact of trauma-produced losses in the life of a child and how to restore those losses. The lessons place emphasis on holistic ministry, covering various effective intervention principles that promote healing and facilitate closure to a child's traumatic experiences.

Contact: Graham and Becky Bee
gmbee@optusnet.com.au

Worldview Centre for Intercultural Studies Leonards, Australia October 29—November 9, 2012

Contact: Denise George
admin@worldview.edu.au

Easewest College of Intercultural Studies Taupiri, New Zealand November 19—November 29, 2012

Contact: Lynn Woodford
admin@worldview.edu.au

Offering Healing and Hope for Children in Crisis Module Two—Street Children

This foundational course is designed to train those working, or desiring to work, with street children. It helps participants understand who street children are and why they are on the streets. It also provides an understanding of the types of intervention commonly applied and gives step-by-step help for establishing a sustainable street children's project.

For Information On:

• CCTI Curriculum—
Offering Healing and Hope for Children in Crisis

• Other Resources

Go To : www.crisiscaretraining.org

Caregiver's Time-out

Let Us Go Over to the Other Side

A commentary on Mark 4:35-41 NIV

—Rev. Stewart Sampson



“Let us go over to the other side.” (Mark 4:35) The crossing to the other side, taken from this Scripture, was a direct command which came from the lips of the Galilean to His disciples.

This section of Scripture follows a series of parables shared in the book of Mark, and here Jesus is revealed as Lord of nature. This is a new revelation, and a very necessary one. It stands to reason that, in these verses, Jesus is taking His disciples to a higher level in their journey with Him. They must cross over to the other side with Him in order to see that He is not just the miracle worker—multiplying the fish and the bread, healing the sick and the weary—but that He is God the creator and controller of all His hand has made. The God who blew with an east wind and dried up the waters of the Red Sea before His people Israel (Exodus 14:21) is now to make a path over the wind and waves of Gennesaret for His disciples, the new “people of God.” This was an important fact for them to grasp and understand. In order to do so, they would have to trust Him, as it was He who commanded, “Let us go over to the other side.”

I believe as you read this article, God wants you to trust Him—He wants to be more than just the fish and bread multiplier, He wants to bring you to a higher level of revelation in your journey with Him. But we must also remember there is a cost involved in going with Him “to the other side.”

We must ask ourselves as we decide to obey, are we prepared? Have we read His word and know what to expect?

“Leaving the crowd behind.” (Mark 4:36)

It will be quite difficult to cross over to the other side if we are unwilling to leave the “crowd” behind. What are you prepared to “leave behind” in order to embark on a journey with Christ (Mark 8:34–35)?

“A furious squall came up, and the waves broke over the boat, so that it was nearly swamped.” (Mark 4:37)

From the disciples’ perspective, following Jesus’ command was a direct act of faith and obedience—yet they encountered a great storm. Why did Jesus allow them to enter into such a situation? After all, when the Old Testament speaks of Jonah’s storm, it was the result of his disobedience, a form of reprimand (Jonah 1:4). The disciples, however, had been obedient. Is it any wonder that they felt grieved at what was happening? The coming of the storm was hard for them to understand, as was the relaxed attitude of Jesus.

“Jesus was in the stern, sleeping on a cushion. The disciples ... said to him, ‘Teacher, don’t you care if we drown?’” (Mark 4:38)

Brothers and sisters, this is what the enemy wants us to conclude; he would have us to believe that God does not care. And yet, for the disciples, Jesus had proven in many ways that He does care. They had witnessed Him caring for the sick and the weary many times before. Still, when trouble came, they asked, “Don’t you care if we drown?”

We must look to His word to see that He does care.

- “Cast all your anxiety on him because he cares for you” (1 Peter 5:7).
- “Cast your cares on the LORD and he will sustain you; he will never let the righteous be shaken” (Psalm 55:22).

The fact that the disciples had acted in obedience and faith was no guarantee that the crossing would be easy. This is an important truth to grasp, because if we do not, there is the danger of misunderstanding who God is, and how He works in our lives.

Through the “storms,” there is a greater truth we come to know and are comforted by—in our journey “to the other side,” we are not alone. Christ is with us; that was His promise to the disciples, and it is His promise to us as well: “And surely I am with you

always, to the very end of the age” (Matthew 28:20).

Mark 4:40–41 poses three questions.

1. **“Why are you so afraid?”** To have feared while crossing over with Jesus was to lack faith in God and His providence. In Mark 6:48–50 Jesus walked on the water, and He said to His disciples, “Take courage! It is I. Don’t be afraid.”

2. **“Do you still have no faith?”** What a challenge, because in chapters 2–3 of the book of Mark, the disciples had witnessed profound miracles, signs and wonders performed by Jesus. And yet, in that moment, being caught up in the storm, they still doubted. Aren’t we often like the disciples? Haven’t we witnessed the strength and wonder of God’s glory in our own lives and still doubted when the storms came?

3. **“Who is this? Even the wind and the waves obey him!”** This question, asked by the disciples, was by no means an indication that they did not know Him. On the contrary, they surely did know Him. However, in the light of what they had just witnessed, they realized that He was more than just a miracle worker; He was the God who rules and reigns over the universe. This pivotal moment was, for the disciples, a new revelation of Christ. It stands to reason, therefore, that if they had not heeded the call to cross over, they would have missed the opportunity to see Christ and would not have received the blessing of experiencing this glorious miracle.

There is a deeper and more intimate knowledge of God that Christ desires to reveal to all of us. This might mean that we will have to, by faith, “go over to the other side” with Him. Are you ready to accept the challenge?

We must ask ourselves as we decide to obey, are we prepared?



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