

HUMAN TRAFFICKING AND MORAL INJURY

by

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DEDICATION

For Anna, Lydia, and Chris,

The best gift God ever gave me was you.

Out of my distress I called on the LORD; the LORD answered me and set me in a broad place.

Psalm 118:5

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TABLE OF CONTENTS

	Page
DEDICATION.....	iv
ACKNOWLEDGMENTS	v
ABSTRACT.....	viii
CHAPTERS	
1. INTRODUCTION	1
Description of the Ministerial Context.	1
Statement of the Problem.....	2
Statement of the Project Goals.....	4
Limitations of the Project.....	5
Delimitations.....	7
Terms and Assumptions.....	8
Project Methodology.....	9
Description of the Ministry Project.....	9
Rationale for the Process	12
Plan for Evaluation	14
Plan for Assessment.....	14

TABLE OF CONTENTS (CONTINUED)

	Page
2. HISTORICAL, THEOLOGICAL, AND LITERATURE REVIEW.....	15
Literature Review.....	36
3. CONTEXTUAL ASSESSMENT	38
4. RESEARCH METHODS AND FINDINGS.....	54
5. CONCLUSIONS, IMPLICATIONS, AND SUGGESTIONS	77
BIBLIOGRAPHY.....	105
APPENDICES	109
A. IRB APPROVAL.....	111
B. INFORMED CONSENT.....	112
C. OBSERVATIONAL NOTES TEMPLATE.....	116
D. ANONYMOUS RESIDENT SURVEYS	122
E. VOLUNTEER INTERVIEW QUESTIONS.....	138
F. GRADUATE SPIRITUAL CARE QUESTIONNAIRE	141
G. SAMPLE VOLUNTEER RECRUITMENT EMAIL.....	144
H. SAMPLE MEMO FOR PROGRAM RESIDENTS AND GRADUATES.	146

ABSTRACT

DEBRA HARALSON

MORAL INJURY AND HUMAN TRAFFICKING

Under the direction of David Garber, Ph.D.

Moral injury is a response to traumatic events that causes people to question the existence of good and evil, both in the world and in themselves. Once applied to military veterans, moral injury is now seen in medical professionals, first responders, and others who move in high stakes situations. When a person violates a deeply held ethical code, as in a soldier taking a human life, moral injury can occur. Even when the action is taken in obedience to authority, for the greater good, or under compulsion, moral injury can cause shame, reduced trust in others, and ethical confusion.

At The Program, a faith-based, residential center for women who have survived sex trafficking, behaviors consistent with moral injury prevail. Many of the women at The Program are wrestling with moral injury. Moral repair involves moving from secrecy and isolation into a supportive community where naming traumatic events, and their moral ambiguities, is possible.

Research explored the effectiveness of The Program's spiritual care for women who have incurred moral injury. Five spiritual care initiatives were observed: three Bible studies, an art, and an exercise class. Research instruments included participant questionnaires, observation notes, and class leader interviews. After obtaining informed consent, anonymous surveys were distributed to participants, and class leaders were interviewed. Data was coded and analyzed according to evidence of an atmosphere of expression, a supportive community, and meaningful rituals.

Though most participants indicated that they enjoyed the classes, the observations revealed little self-expression. The highest participant ratings were for the art class. Here, participants exhibited self-expression, supportive community, and connection to God. The area that showed great potential for growth was the presence of meaningful rituals.

Conclusions present many opportunities. If class leaders are able to move from proclamation to facilitation, participants may be more likely to trust. Possible rituals include a service of lament, a memorial monument, and a prayer garden. Further research opportunities include the value of Program participant feedback, moral injury and spiritual care in other populations, and creative rituals to honor past trauma.

CHAPTER ONE

INTRODUCTION

Description of the Ministerial Context

She was beautiful. This was something people often told her. But now, as she sits on the beige living room sofa, squeezed between two other participants, beautiful feels like a hazy mist. Beautiful is a whole different lifetime, another person. Trying not to distract the teacher with the manic bouncing of her restless right foot, she settles her gaze on the Bible resting in her lap. The pretty, purple Bible that was given to her on her first day at The Program¹ is certainly best left unread. She hardly has the strength to face everything she now is not. She is not a Christian, not a kind daughter, not a friend, not a mother, not a helpless victim, not sober, not pure, not worthy, not honest, not smart, and without question, not beautiful. Flickers of another life, before the trauma, begin to flash and beckon. Then, “Does anyone have any questions?” shakes her out of the litany. Back in Bible study, she smiles politely and turns her face downward, hoping the teacher will not remember her name.

Spiritual care for survivors of trauma is a complicated calling. The Program, a faith-based, residential facility, has been working in the field of trauma and spiritual care for over a decade. At The Program, female victims of sex trafficking receive holistic services in a therapeutic setting. Women enter The Program as a means of disentangling themselves from a

¹ The Program is a pseudonym for the actual name of the organization featured in this study. This was done to protect the identities of the participants.

violent criminal industry that has coerced and oppressed them in unimaginable ways. Many women report being recruited as adolescents who grew accustomed to horrendous treatment by traffickers and purchasers alike. The trust that the women attempted to place in the people around them has been decimated. Their faith in a loving God is all but destroyed. Considering their devastating experiences, it is surprising anyone survives.

Over the past eleven years, The Program has served nearly 600 adult women from all over the world. Each woman is welcomed and given tools to help her rebuild her life. These include a safe living space, counseling, job skills training, and educational opportunities. Spiritual care runs like a thread through all of The Program's services. Special, stand-alone spiritual care programs include three volunteer-led Bible studies as well as several other enrichment classes. Volunteer spiritual care providers are highly committed to their work at The Program. A deeply held conviction that the word of God offers exceptional opportunities for healing unites and drives these volunteers to serve in this role year after year.

Statement of the Problem

Women who come to The Program share many qualities. Most report experiencing adverse childhood events, including homelessness, domestic violence, and/or childhood sexual abuse. Many chose to leave home at a young age. For a sixteen-year-old girl living on the street, a person offering shelter and safety, even if it is in return for prostitution, can feel a lot like love. The women at The Program have explained that a romantic relationship with one's trafficker, or pimp, turns abusive very quickly. As a means of control, traffickers commit repeated assault, domination, humiliation, and sexual torture. Several women in The Program report being

purposely run over by their traffickers' automobiles. Many women have visible scars around their wrists from being bound. Tiny circles on their skin betray intentional cigarette burns. At least two women were tortured by electricity. Despite the clear evidence of physical and emotional abuse, almost every woman enters The Program bearing a cruel irony. She blames herself.

Moral Injury is a concept initially applied to military veterans who experience trauma related distress that is different from traditional post-traumatic stress disorder (PTSD) symptomology. Moral injury occurs when we do something, or are forced to do something, that violates our core beliefs. Moral injury is a soul-level wound because it calls into question not only something we have done but someone we have become. Even when the doing happens under compulsion, moral injury can result in profound shame, isolation, and self-hatred. Repudiations like, "I am not good. I am not worthy. I am not beautiful" are commonly heard at The Program. If left unaddressed, moral injury can ultimately lead to questions like "Is anything good? Does good exist? Do I have the right to exist?"

Most of the women at The Program probably experienced moral injury very early in life. Because the majority of participants report childhood sexual abuse, this may have been the first cut; the first damage to their understanding of themselves and the nature of right and wrong. As adults, many of these women now blame themselves for running away from home into more dangerous situations, or for developing addictions that ultimately led them to engage in sex acts in exchange for drugs. A few women admit to assisting their traffickers by recruiting new girls

into the sex trade. Though they shame themselves for their bad decisions, every woman in The Program has also been deeply wounded and betrayed.

Describing moral injury, Brad E. Kelle writes, “The transgression of moral codes and the betrayal of trust can produce emotional, psychological, social, and spiritual effects that include negative changes in ethical behavior and attitudes, changes in or loss of spirituality, reduced trust in others and social contracts, and feelings of guilt and shame.”² Women in the program report all the negative effects on Kelle’s list, including confusion around ethical behavior. For a pastoral leader, the “loss of spirituality and reduced trust in others” is most concerning. Sex traffickers and buyers alike inflict serious wounds. Survivors seldom trust the love of God or that of those around them due to a tragic loss of love for themselves. In our quest to provide transformative spiritual care, The Program must take the complex, often concealed wound of moral injury into consideration.

Statement of the Project Goals.

This project is designed to evaluate the spiritual care initiatives at The Program considering the likelihood that many of The Program participants are suffering, not only from trauma, but from moral injury, as well. Three aspects of an environment conducive to healing from moral injury (sometimes referred to as moral repair) are an atmosphere of expression, a supportive community, and the presence of rituals designed to foster a connection with God.

² Brad E. Kelle, *The Bible and Moral Injury: Reading Scripture Alongside War’s Unseen Wounds* (Nashville: Abingdon Press, 2020), 56.

This research is designed to determine to what degree these three healing elements are present at The Program.

As the researcher, I conducted a thorough assessment, observing current spiritual care initiatives while engaging residents, program graduates, and key volunteers to determine what elements of Spiritual Care address moral injury and what new approaches may be helpful. This data may help the leaders of The Program create a refined spiritual care plan for the organization.

Limitations of the Project.

Human trafficking is a criminal industry that comprises both labor and sex crimes perpetrated against all genders. Because the mission of The Program is to serve female victims of sex trafficking, this study is designed only for this population. Resident names and other identifiers are not included in the report. Instead, pseudonyms are used. Participation in the study was completely voluntary.

Considering the level of trauma experienced by the women at The Program, I was very mindful of the questions posed in their portion of the study. Questionnaires were designed to facilitate answers without triggering painful memories, shame, or fear. Because of this consideration, participants were asked only about the spiritual care initiatives at The Program. Therefore, this study will show how participants perceived the spiritual care initiatives at The Program rather than how participants' spiritual views were impacted by their trauma and injury.

In his book *Moral Injury, Restoring Wounded Souls*³, Larry Kent Graham offers many thoughts on helpful environments in the “Healing Collaborations” section.⁴ His work on the importance of “naming the moral injury”⁵ influenced my decision to study the level of an atmosphere of expression and a supportive community at The Program. In a later chapter of the book, Graham writes about “Healing Rituals and Memorials,”⁶ which influenced the third key concept to be evaluated.

In his discussion of meaningful rituals, Graham writes about Maya Lin’s Vietnam memorial as a particularly significant place of lament for veterans wrestling with moral injury.⁷ Graham describes the soldiers returning to the memorial, sometimes stoic, sometimes mournful, and other times surprisingly conversational, remembering with laughter as well as tears. Graham contends that significant places, monuments, and rituals, like those observed at the Vietnam memorial, can become a meaningful aspect of moral repair. The limitation here is that there are surely many other initiatives that may benefit people suffering from moral injury. The three

³ Larry Kent Graham, *Moral Injury: Restoring Wounded Souls* (Nashville: Abingdon, 2017), 97.

⁴ *Ibid.*, 109-133.

⁵ *Ibid.*, 110-128.

⁶ *Ibid.*, 135-152.

⁷ *Ibid.*, 145-147.

elements delineated in this project, an environment of expression, a supportive community, and meaningful rituals, are a product of some of Graham's ideas.

Delimitations

The Program is committed to providing intentional, trauma-informed care that is sensitive to the backgrounds and needs of survivors of sex trafficking. This project focuses on one important consideration of trauma-informed care: the implications and initiatives that address moral injury. Though not a diagnosis, moral injury can be the underlying cause of great psychological and spiritual distress. Recommendations for supporting people living with moral injury are many, and they are varied. This study focuses on three key concepts that positively address moral injury: 1) creating an atmosphere of expression where a person is safe to share, and possibly reframe, her story; 2) building a community of support that affirms connection over isolation; and 3) providing opportunities for connection with God through meaningful rituals.

The Program was founded on the belief that Jesus Christ is the true rescuer, life-restorer, and the great physician. Whether in equine, art, or work therapy, exercise, cooking, or gardening class, Christ-centered spirituality is woven into the fabric of daily life. In this study, however, observations, questionnaires, and interviews were limited to the three onsite Bible studies, an art class, and an exercise class. These five classes were chosen because they represent three initiatives performed in a classical Bible study format and two less traditional spiritual care initiatives: the art therapy class, and the exercise class.

Terms and Assumptions

Sex trafficking is defined by The Department of Homeland Security as “Commercial sexual exploitation through force, fraud, or coercion.”⁸ The Substance Abuse and Mental Health Services Administration defines trauma as “...experiences that cause intense physical and psychological stress reactions.”⁹ SAMHSA defines a trauma-informed approach as “...an understanding of trauma and an awareness of the impact it can have across settings.”¹⁰

Moral injury is defined as “The diminishment of vitality that comes about in our souls and communities when we are unable to do what we believe is right, or when wrongs are done to us. It also takes place when our doing the right thing results in harm to others and distress to ourselves.”¹¹ Moral repair is defined as “restoring or creating trust and hope in a shared sense of value and responsibility.”¹² Indeed, life after moral injury is a process of the rebuilding of trust and hope, best done in a community that accepts and encourages its members, even as they begin to work through haunting memories and levels of responsibility. A spiritual care ministry

⁸ The Department of Homeland Security, “What is Human Trafficking?” *Blue Campaign*, <https://www.dhs.gov/blue-campaign/what-human-trafficking> (accessed October 29, 2020).

⁹ Substance Abuse and Mental Health Services Administration, *Trauma-Informed Care in Behavioral Health Services. Treatment Improvement Protocol (TIP) Series 57*. (Rockville: HHS Publications, 2014), xix.

¹⁰ *Ibid.*, xix.

¹¹ Graham, *Moral Injury*, 97.

¹² Margaret Urban Walker, *Moral Repair: Reconstructing Moral Relations after Wrongdoing* (Cambridge: Cambridge University Press, 2006), 28.

comprises people and programs dedicated to encouraging faith, hope and love for God, ourselves, and our neighbor. An effective spiritual care ministry has the potential to provide critical support to those who struggle with moral injury.

There are two assumptions of note in this research. The first assumption is that because the women in The Program report experiences of betrayal, feelings of guilt and shame, and behaviors of social isolation and ethical confusion as survivors of sex trafficking, many are also victims of moral injury. Moral injury cannot be diagnosed through a blood test or even a series of interviews because it is not an official diagnosis as is Post-Traumatic Stress Disorder. It is, rather a cluster of adverse symptoms, many of which are reported by the women in The Program.

A second assumption is that each stakeholder is open to observations and interviews, with interest in working collaboratively toward a united approach to spiritual care. The volunteers leading the five initiatives will be asked to open the doors of their classes to the important research tools of observations, questionnaires, and interviews. This level of vulnerability may not have been entirely comfortable for them.

Project Methodology

Description of the Ministry Project

Though moral injury is predominantly associated with the transgression of one's own deeply held ethic, Graham describes a nuanced aspect of moral injury, potentially resonant with the women in The Program. "Receptive moral injury," Graham writes, "is the diminishment to our moral compasses and our sense of personal goodness that results from the actions of

individuals and communities against us.”¹³ Here, Graham notes that moral injury is not always about regret generated by an individual’s own conflicted actions. Sometimes, moral confusion, shame, and isolation can be caused completely by the actions of another. A child who is sexually abused by a trusted adult is one example. The child did nothing wrong but may experience the devastating effects of receptive moral injury.

The ramifications of sexual assault through human trafficking stretch beyond the symptoms of Post-Traumatic Stress Disorder. The rupture and repair of moral injury, whether it is sustained by committing an act that directly violates one’s own deeply held moral code, or by a transgression inflicted by another, as in the case of receptive moral injury, is a deeply troubling, grave concern. Moral injury stands as the backdrop to the Biblical/Theological portion of this project, noting that both betrayal and regret are nothing new. Moral injury also informs the researcher’s understanding of relevant spiritual care at The Program.

While there are many ideas around supporting people living with moral injury, this project focused on three key concepts that fall within the realm of spiritual care. The first concept is the creation and maintenance of an environment of expression. In other words, the women at The Program need a safe place to talk about their soul wounds as well as any questions around moral ambiguities. While the clinical environment of therapy is an appropriate place for expression, providers of spiritual care must create space as well.

¹³ Graham, *Moral Injury*, 13.

The second key concept associated with moral repair is the importance of a loving, supportive community. Moral injury often leads to devastating levels of isolation. Spiritual care providers recognize that connection and confession are also measures of healing. Kelle writes about “communalization” as a key factor in veteran experiences of moral repair. Kelle notes that soldiers have a need to have their feelings of “Pain, grief, and even guilt validated and co-owned by their larger network.”¹⁴ As spiritual care providers, we know that community is a critical aspect of healing for all people, including those suffering from moral injury. Therefore, Kelle’s idea of “Communalism” is a resonant aspect of moral repair for the women who live at The Program.

Finally, the third key concept of the study is the exploration of ritual as a means of connecting with God, self, and others. For instance, providers of spiritual care can engender symbols of lament and renewal that may provide a pathway to peace with God. This research was designed to identify where rituals like lament are being practiced at The Program, whether formally or informally. Overall, the research was designed to identify where these three keys to moral repair - an environment of expression, a supportive community, and the presence of meaningful rituals - are currently happening at The Program, and where new initiatives may be in order.

¹⁴ Kelle, *The Bible and Moral Injury*, 108.

At the heart of this project is a vision of refined spiritual care that responds to the specific needs of people who have survived the moral injury of sex trafficking. A thorough assessment of current initiatives included the perspectives of those providing care and those on the receiving end. I attempted to thoughtfully engage current residents, program graduates, and essential volunteers, utilizing the information to create suggestions for a long-range spiritual care plan for The Program.

Rationale for the Process

In review, the context of the research project is The Program, a faith-based, residential facility where survivors of sex trafficking often reflect the symptoms of moral injury. Appropriate spiritual care providers must take these challenges into account and address specific needs. Six experienced volunteers currently lead three Bible studies and two enrichment classes on campus each week. An assessment focused on feedback from Bible study leaders, an art teacher, an exercise instructor as well as current participants and program graduates was completed. As the researcher, I directly observed each of the classes, taking field notes and interviewing each leader. Next, I invited the women in The Program to complete anonymous questionnaires, designed to identify aspects of the activities that incorporated any of the three key concepts, an environment of expression, a supportive community, or the presence of meaningful rituals designed to facilitate connection with God. Program graduates were also invited to complete questionnaires as a means of capturing the long-term effectiveness of spiritual care at The Program.

Data were interpreted in light of three key concepts for healing moral injury: an environment of expression, a supportive, loving community, and the presence of rituals that help the participant connect with God. Suggestions for an enhanced spiritual care plan were developed and may be utilized with current residents, graduates, volunteer leaders, and staff. Required resources, including tools for field notes and a recording device, were readily available.

The goal of this project was to answer a specific question. How well is The Program addressing the spiritual needs of its participants? Featuring an analysis of five current spiritual care efforts, the project outcome features suggestions for an enhanced ministry, informed by participant experience and an understanding of moral injury. Research methodology includes ethnographic and sociological disciplines.

Leonora Tubbs Tisdale encourages pastors to become amateur anthropologists, digging into their communities' ethnography.¹⁵ This project, rooted in such inquisitiveness, employed three modes of data collection: interviews, questionnaires, and observational notes. Tim Sensing writes, "Qualitative research is grounded in the social world of experience and seeks to make sense of lived experience."¹⁶ This project will produce qualitative data that contributes to an understanding of a survivor's socio-spiritual experience.

¹⁵ Leonora Tubbs Tisdale, *Preaching as Local Theology and Folk Art* (Minneapolis: Fortress Press, 1997), 57.

¹⁶ Tim Sensing, *Qualitative Research: A Multi-Methods Approach to Projects for Doctor of Ministry Theses* (Eugene: Wipf & Stock, 2011), 57.

Plan for Evaluation

Field notes, interviews, and questionnaires were examined and coded according to current spiritual care practices that address moral injury in a positive way. As the researcher, I identified which behaviors or responses encouraged or exemplified an environment of expression, a loving, supportive community, and/or the presence of meaningful rituals.

Plan for Assessment

Through this research project, I learned what spiritual care elements have been helpful at The Program and what innovations are in order. A spiritual care program, informed by the implications of moral injury, holds great promise for healing and empowerment for women at The Program. I hope the leadership of The Program will incorporate these project findings into a long-range spiritual care plan.

CHAPTER TWO

HISTORICAL, THEOLOGICAL, AND LITERATURE REVIEW

Imagine a soldier. Brown hair is tucked beneath her standard issue cap. Rubber-soled boots step with measured purpose toward the door of a yellow-paneled house, not in a war zone but in a quiet, suburban neighborhood. She prepares to insert a key. Inhale. Turn. Exhale.

Shouts of joy, hugs, and happy tears tell her that this day begins the next chapter of her post-combat life. Tonight, she will sleep in a warm, comfortable bed, and tomorrow, she will flourish. This would be a perfect scenario if not for the haunting. Shame stories speak from the inside, antagonizing and questioning her. “Was it justified?” “Was it necessary?” “Was it right?” Her inner answers come back so jumbled that even she loses faith in her own explanations. Who is she now? At once a hero, victim, and villain, she no longer recognizes herself.

Social scientists and mental health professionals have long sought to aptly define the self-repudiation and shame some veterans experience post-combat. Treatment for Post-Traumatic Stress Disorder has been revolutionary in helping with flashbacks, panic attacks, and triggering experiences. However, when pain stems from unanswered questions of right and wrong, when she doubts her identity as an ethical person, a different kind of soul-level wound may also be present.

Providers of spiritual care are often fluent in the language of the soul. Recognizing shame as a formidable foe, spiritual care providers also move and breathe in the atmosphere of

confession, lament, and redemption. Soul wounds call for thoughtful spiritual care. This is why the theological pastoral care community has rightly taken up the call to attend to moral injury.

Kelle explains that “Moral injury involves acts of moral compromise or the violations of values and beliefs that potentially threaten soldiers’ abilities to admire or even recognize themselves or trust in the morality of others and the world.”¹ Kelle traces the emergence of moral injury as an interdisciplinary field of study over the past decade. Insights from psychology, military studies, religion, theology, and moral philosophy support Kelle’s view that moral injury is a legitimate phenomenon and has likely plagued people ever since humans began engaging in war.² Some veterans can walk away from battle knowing that they have fulfilled their duty while other are haunted to the point of shame, self-loathing, and a compromised understanding of personal ethics. Moral injury is a serious concern for people who have survived trauma.

The heightened interest in moral injury throughout the academic and therapeutic communities begs the question: Are combat veterans the only people who experience the haunting effects of moral injury? As a spiritual care provider for women and girls who have survived the traumatic violence of sex trafficking, I submit that veterans are not alone. Survivors of the sex trade have had their ideals and hopes violated to such a degree that they hardly recognize themselves. Feelings of regret and shame are a part of their everyday experience. Like

¹ Kelle, *The Bible and Moral Injury*, 20.

² *Ibid.*, 3.

veterans returning from war, these women walk through the doors of our program homes and are welcomed with joy. They are given the softest of beds, but unfortunately, they too are deeply haunted. “Was it justified? Was it necessary? Was it right?” Many human trafficking survivors are living with significant and chronic moral injury. How can a spiritual care provider possibly attend to wounds of this magnitude?

Women who come to The Program have endured repeated assault, domination, humiliation, and sexual torture. They exhibit severely compromised levels of physical and emotional health. Even after significant time in The Program, troubling symptoms often persist as survivors of sex trafficking exhibit both immediate and delayed reactions to severe trauma.³

For a pastoral leader, the most concerning scars come from the spiritual wounds. Dan Allender notes that sexual trauma has a devastating impact on the capacity to experience the hallmarks of spiritual health.⁴ For the women at The Program, a sense of betrayal replaces faith. Hope is obliterated by prevailing powerlessness, and because sex trafficking obliterates the concept of love, it is often the most formidable challenge. Just as therapeutic care for this

³ Kristen Sweet-McFarling, *Working with Human Trafficking Survivors: A Primer on Trauma for Lawyers, Advocates, and Others*, *Alight*, 2016, <https://alightnet.org/wp-content/uploads/2019/11/WorkingwithSurvivorsPrimer.pdf> (accessed June 20, 2022).

⁴ Dan Allender, “Faith, Hope, Love Matrix,” *The Allender Center* pdf. 2015, <http://theallendercenter.org/wp-content/uploads/2015/02/Faith-Hope-Love-Matrix.pdf> (accessed October 1, 2020).

population requires specific, trauma-informed protocols, spiritual care must intentionally address wounds to faith, hope, and love.

The Bible may provide resonance for people wrestling with moral injury by way of some very troubled individuals. In the scripture, we meet many people with histories of trauma, questionable choices, and ethical challenges. Kelle notes, “The story of King Saul transparently and tragically depicts the devastating personal effects, not only of morally questionable acts done by an individual, but also of the feeling that one has been betrayed by persons (or even deities) in authority.”⁵ Though the traditional reading of the life and ruptured reign of Saul tends to bend toward his own flawed tragedy, Kelle reads the text sympathetically, introducing the possibility that moral injury was also at play. Kelle posits that King Saul’s moral injury was not due merely to his own failings, but also to a sense of betrayal by the Prophet/Priest Samuel and even by God.

Saul was chosen, anointed, and acknowledged as the first king to reign over Israel. Yet, early in Saul’s tenure, following a successful military campaign, when the nation was ready to reaffirm the calling of Saul, the Prophet/Priest Samuel publicly rebukes the people for requesting a king. With Saul likely footsteps away, Samuel speaks of the disobedience of the request and the disapproval of God.⁶

Now therefore, take your stand and see this great thing that the Lord will do before your eyes. Is it not the wheat harvest today? I will call upon the Lord, that he may send thunder and rain; and you shall know and see that the wickedness that you have done in

⁵ Kelle, *The Bible and Moral Injury*, 66.

⁶ All scripture citations are from the New Revised Standard Version unless otherwise noted.

the sight of the Lord is great in demanding a king for yourselves.” So, Samuel called upon the Lord, and the Lord sent thunder and rain that day, and all the people greatly feared the Lord and Samuel. All the people said to Samuel, “Pray to the Lord your God for your servants, so that we may not die; for we have added to all our sins the evil of demanding a king for ourselves.”⁷

Suddenly, the king, who had been anointed and celebrated was faced with a prophetic message that communicated the opposite. Kelle sees this moment, not only as a traumatic, public betrayal by Saul’s once-trusted prophet, but also as a dramatic, visible rejection from the deity. Even Saul’s new subjects, who only recently were calling for the death of anyone who did not support their king,⁸ were now grieved and penitent upon hearing Samuel’s rebuke. In the soul of Saul, his calling as Israel’s king was now in question. Thoughts of, “Was it justified? Was it necessary? Was it right?” swelled into a complex moral injury marked by shame, confusion, and fear.

The scripture then describes a person whose life is derailed by increasingly desperate attempts to justify his title as king. Saul continually struggled with ethical decision-making, isolation, and emotional dysregulation, ultimately choosing suicide. Kelle convincingly asserts that the behavior Saul demonstrated throughout his life exhibited the effects of moral injury. This Biblical account, read in the light of moral injury, highlights the far-reaching effects of trauma in the life of a soldier. Thus, the story of Saul has been proposed as a healing text for a veteran suffering from moral injury.

⁷ 1Sam 12:16-19.

⁸ 1 Sam 11:12.

Another Biblical account on a grander scale is worth considering. Many years after the reign of Saul, the nation of Israel violated established ethical values during the time leading up to its fall to Babylon. Can an entire nation experience moral injury? The transgression of the people is clearly articulated at the calling of Jeremiah, “They have made offerings to other gods, and worshiped the works of their own hands.”⁹ If moral injury is to be considered in this context, one would expect the people to experience a sense of rudderlessness and ethical confusion. In Jeremiah’s first indictment of Israel, he says, “Your wickedness will punish you and your apostasies will convict you. Know and see that it is evil and bitter for you to forsake the Lord your God; the fear of me is not in you, says the Lord God of hosts.”¹⁰ Turning away from the exclusive worship of their covenant God was a grave error that confused the spiritual practices of Israel, to disastrous consequences.

Kathleen M. O’Connor, who writes about the overwhelming events of the Babylonian captivity as expressed in Jeremiah and Lamentations, sees hope for those who suffer from the aftereffects of terrible choices. In the fragmented prose, poems, and sermons of Jeremiah, O’Connor points out that there are also vestiges of hope and healing for people wrestling with despair, isolation, and doubt.¹¹ She writes, “In its poignant beauty, the literature transforms

⁹ Jer 1:16b.

¹⁰ Jer 2:19.

¹¹ Kathleen M. O’Connor, *Jeremiah: Pain and Promise* (Minneapolis: Fortress Press, 2011), 34.

memories of violence, reframes them and gives them coherence, partial and momentary, to lead victims and their offspring through the turbulent morass that is disaster.”¹² In the Biblical articulation and reframing of disastrous events, O’Connor sees great promise for survivors of all trauma.

O’Connor also reads the book of Genesis as trauma literature, noting that the Judaeans exiles may have found the historical disaster themes in Genesis to be resonant and healing. O’Connor notes that Genesis features themes of impossibility, barrenness, famine, and landlessness, which may have provided common ground for an Israelite exiled to Babylon.¹³ Without specifically mentioning moral injury, O’Connor notes that these themes of impossibility, barrenness, famine, and landlessness move beyond military trauma but absolutely contribute to the shame, anger, and confusion we now call moral injury.

In the cases of Saul, the flawed military leader, and the entire nation of Israel, scripture stories can provide healing for those suffering from moral injury. The people of Israel erred greatly and suffered significantly. However, while survivors of sex trafficking may benefit from the stories of Saul and the Babylonian captivity, it may be that the themes of impossibility, barrenness, famine, and landlessness found in Genesis are more resonant and more helpful for addressing the particular type of moral injury survivors of sex trafficking incur.

¹² Ibid., x.

¹³ Kathleen M. O’Connor, *Genesis 1-25A* (Macon: Smyth and Helwys Publishing, 2018), 11.

Spurred by the struggle through the impossibility of one Genesis family, the validity of this thesis hinges on the fact that moral injury reaches well beyond veterans of the military. Survivors of sex trafficking have incurred great harm and report similar, if not more extreme, symptoms of shame, anger, and ethical confusion. As a spiritual care provider, I believe the Bible contains timeless wisdom for trauma and recovery. The story of Sarai, Hagar, and Abram is an example of moral injury linked not to war but to sexual trauma. In the story, we see a moral wound, its aftermath, and the healing work of God. Through their story, spiritual care providers can glean insight into the needs of modern survivors.

Exploring the lives of Abram, Sarai, and Hagar found in Genesis chapters 11-23 calls for careful travel across an ancient landscape. While context must be considered, experiences of trauma and moral injury are present and resonant. In Genesis, God calls Abram to a new and beautiful land. There, the family will produce the seed of a new nation. Generations will come from them, flourishing on the created earth. However, in the introduction of Sarai, the Genesis author notes that Abram's wife is unable to bear children. The condition of Sarai's infertility is certainly a manifestation of the theme of impossibility. The inability to conceive was likely frustrating, isolating, and shame-inducing for Sarai, making her vulnerable to moral injury. Sarai lived in a context of patriarchy, where men were expected to till the ground and a woman's most important contribution was to bear children. The value of a woman was believed to be based on her ability to help populate the Earth.

Evidence of the pressure to reproduce can be found in the stories surrounding Sarai and Abram. The couple was likely aware of God's earliest commissioning of Adam and Eve. "God

blessed them, and God said to them, “Be fruitful and multiply, and fill the earth and subdue it.”¹⁴ They may have known that Eve was called “The mother of all living.”¹⁵ Sarai may have been taught the words of Eve’s pronouncements at the birth of her children, “I have produced a man with the help of the LORD.”¹⁶ And later, “God has appointed for me another child instead of Abel, because Cain killed him.”¹⁷

The family members of Lot were contemporaries of Abram and Sarai, as well as relatives and neighbors. After the fall of Sodom, Lot found himself at the center of both of his daughters’ desperation to conceive. In the nineteenth chapter of Genesis, we read, “And the firstborn said to the younger, “Our father is old, and there is not a man on earth to come into us after the manner of all the world. Come, let us make our father drink wine, and we will lie with him, so that we may preserve offspring through our father.”¹⁸

It was in this context that Sarai found herself unable to conceive a child. Stressful, isolating, and disheartening as it may have already been, the words God began speaking to

¹⁴ Gen1:28a.

¹⁵ Gen 3:20.

¹⁶ Gen 4:1.

¹⁷ Gen 4:25b.

¹⁸ Gen 19:31-32.

Abram made her situation even more intense. The twelfth chapter of Genesis reads, “Then the LORD appeared to Abram and said, “To your offspring I will give this land.”¹⁹

According to the Shay Moral Injury Center of Volunteers of America, environments that put a person at risk of moral injury are high-stakes, life-and-death situations, often with a high risk of failure.²⁰ The fact that Sarai has not been able to bear a son to fulfill God’s promised generations likely caused her the kind of stress and the sense of powerlessness that often precipitates moral injury. Phyllis Trible describes the imbalance of power in Sarai’s life.

Wife of a wealthy herdsman, she holds privilege and power within the confines of patriarchal structures. To be sure, on two occasions, Abraham betrays her, passing her off as his sister to protect himself, but each time God comes to her rescue. Without effort, this woman, along with her husband, enjoys divine favor. Yet her exaltation poses major tension in Abram’s story because Sarai is barren; she has no child.²¹

Sarai was initially from Ur of the Chaldeans, born of Terah and married to Abram. Her mother is never mentioned, though someone prized their daughter enough to name her Sarai, which means “my princess.”²² Her relationships primarily identify Sarai with her father, her

¹⁹ Gen 12:7a.

²⁰ The Volunteers of America, “Frequently Asked Questions About Moral Injury,” *The Shay Moral Injury Center*, 2022, <https://www.voa.org/moralinjury-faq> (accessed January 25, 2022).

²¹ Phyllis Trible, *Texts of Terror: Literary-Feminist Readings of Biblical Narratives, Overtures to Biblical Theology* (Philadelphia: Fortress Press, 1984), 9.

²² Eli Lizorkin-Eysenberg, “What’s the Difference Between Abram/Sarai and Abraham/Sarah?” *Israel Bible Weekly*, 2018, <https://weekly.israelbiblecenter.com/the-meaning-of-the-hebrew-names/> (accessed October 1, 2020).

husband, and her much-anticipated son. When God met Abram and challenged him to move his family to Canaan, the scripture says nothing of her response.

Not long into the story, an already vulnerable Sarai found herself in a morally compromising situation. Fearful of a famine, Abram turned his caravan from Canaan to Egypt. This alternate course proved monumental. Upon entry, Abram revealed a grievous concern. If the Egyptian leader saw Sarai's profound beauty, would he murder her husband to have her? Reactively, Abram asked Sarai to pose as his sister while in Egypt. This way, if the Pharaoh chose to abduct her and add her to his harem, he would likely allow Abram to live. Susan Niditch interprets the scheme, writing, "It is clear that Abram has more to gain as the brother of an unattached, protected woman than as the husband of a 'used' one."²³ Whatever his motive, Abram shared the plan with his wife, and she agreed to the lie. Soon after, Sarai was indeed abducted for the Pharaoh's use.

In describing the nuanced occurrence of moral injury in an individual, The Shay Center explains, "Moral injury from being harmed involves trusting people with power who fail to do the right thing. Experiencing harm may involve feeling betrayed, humiliated, frustrated, furious, and ashamed of being contaminated by evil. People may also do things to survive that violate their conscience and believe they are no longer good."²⁴ Sarai joined her husband in the Egyptian

²³ Susan Niditch, "Genesis," in *Women's Bible Commentary*. 3d ed. Carol A. Newsom, Sharon H. Ringe, and Jacqueline E. Lapsley (Louisville: Westminster John Knox Press, 2012), 36.

²⁴ Volunteers of America, <https://www.voa.org/moralinjury-faq>.

deception, thus failing to do the honest thing. However, she may have also experienced the compounding of her moral injury because after trusting her husband, she was abandoned into the hands of people outside her marriage covenant tribe.

Moreover, Abram did not try to rescue his wife. As Wilda C. Gafney reminds us, “The deception is for his benefit, not for hers.”²⁵ Gafney further writes, “Abram did not object to Sarai's seizure. He relinquished her to the Pharaoh and accepted a rich settlement for his loss. Her brother-husband sold her to a man he knew would use her for sex.”²⁶

Did Sarai wait daily for a word from her husband? Did she lose hope in her part of the promise God made with Abram? Did she feel her faith in the impossible baby fail as she waited? Though not a victim of sex trafficking in the modern sense, Sarai likely suffered a soul wound not unlike that of current survivors, as evidenced in the chapters to come.

Due to the miraculous work of God, Sarai is freed from Egyptian captivity. The narrative following the Egyptian deception, however, focuses exclusively on Abram. God visits him twice to encourage him and renew their covenant. Not a single word from Sarai is recorded during this ten-year period. She has faded into the background. Perhaps she is quieted by the author because the priority plot lies with her husband. But could Sarai be choosing silence? Having been genuinely abandoned by her husband, which likely jeopardized her understanding of herself as

²⁵ Wilda C. Gafney, *Womanist Midrash: A Reintroduction to the Women of the Torah and the Throne* (Louisville: John Knox Press, 2017), 32.

²⁶ *Ibid.*, 33.

wife and potential covenant mother, she may be processing the betrayal of a trusted leader. Like many occurrences of morally questionable situations, her time in the Egyptian harem is swept under the proverbial rug. No one speaks of it again.

“The power to name one’s moral situation is one of our most significant human powers.” writes Graham in his effort to provide spiritual care to those who carry moral injury. Graham emphasizes the critical importance of the survivor speaking the truth of what happened. He further writes, “Naming, therefore, is a co-creative process that joins and enhances the natural human resiliency necessary to bear and overcome traumatic challenges.”²⁷ Graham further writes, “Sharing and retelling one’s story is not endless paddling in the victim’s end of the pool. Sharing is a strength-based platform for enacting new alternatives for living: taking realistic account of our particular moral past and, with the help of others, constructing a meaningful future.”²⁸ Had Sarai lived in an atmosphere of expression, perhaps she could have named her experience in Egypt and its effect on her. Instead, her silence neglects a wound that continues to fester. Tragically, this leads to Sarai causing great harm to another person.

When Sarai finally speaks, her words are significant. In Genesis 16:2 she approaches her husband, “You see that the Lord has prevented me from bearing children; go into my slave-girl; it may be that I shall obtain children by her.” The Hebrew translation of the first half of the verse

²⁷ Graham, *Moral Injury*, 110-111.

²⁸ *Ibid.*, 30.

is helpful here. It reads, “Look, please, the LORD has kept me from bearing children.” Sarai’s language of YHWH preventing or keeping Sarai from having children is important. While her words may reveal a faith acknowledgement of God, the language of YHWH keeping Sarai from having children also echoes her experience of being confined under the control of someone else’s will. Could Sarai’s language harken back to the days of her captivity when, under her husband’s control, Sarai was confined to an Egyptian harem?

The woman who rarely speaks may have found a way to name her traumatic past. Tribble writes that Sarai “attributes her barren plight to Yahweh and thus seeks to counter divine action with human initiative. What the deity has prevented, Sarai can accomplish through the maid whose name she never utters and to whom she never speaks.”²⁹

The name of the aforementioned maid was Hagar, and interestingly, she was of Egyptian descent. When Sarai took this Egyptian girl and gave her to Abram, she essentially reenacted the offense done to her in Egypt. Sarai, however, seems oblivious to any ethical ramifications of these actions. Graham writes that moral injury not only impairs our sense of right and wrong but can lead to “the diminishment of value for self and others.”³⁰ Both types of diminishment, that of self and that of another are present here.

²⁹ Tribble, *Texts of Terror*, 10.

³⁰ Graham, *Moral Injury*, 13.

As a slave, the decision to become pregnant did not belong to Hagar. Rather, at Sarai's demand, it became a requirement of Hagar's servitude. Sarai seems numb to Hagar's experience of the situation. When Sarai's plan is successful, and Hagar conceives Abram's son, Sarai is still unable to experience faith, hope, or love. Rather, she seems threatened by her servant's pregnancy, claiming that Hagar is now looking at her with "contempt."³¹ This insecurity led to an abusive relationship. The angry and morally injured Sarai treated Hagar so harshly that, for a time, Hagar ran from the encampment into the wilderness.

Astute readers of the Hebrew text correctly identify Hagar's situation as sexual servitude. Sarai willfully subjugated and abused her slave due, I contend, to the breaking of Sarai's own moral compass. The tragedy of Hagar and Sarai certainly calls to mind generations of harm that people of empowered privilege have wielded against those in the weaker position. Gafney reads this portion of Genesis with an unflinching identification with the oppressed, writing, "I read Hagar's story through the prism of the wholesale enslavement of black peoples in the Americas and elsewhere."³²

In her historical-theological understanding of the American slave trade and the injustices that remain, Chanequa Walker-Barnes brings moral injury into the conversation. The first transgression was the abandonment of the core ethical belief that all human beings are created by

³¹ Gen 16:5.

³² Gafney, *Womanist Midrash*, 44.

God and, therefore, worthy. This core ethic, when rejected, led to historical, egregious abuse.

Walker-Barnes explains,

At its most basic level, slavery was enabled by the beliefs that White people were superior to all other peoples, that Black people were inferior to all others, and that human beings could be treated as property to be exploited, bought, and sold. Endorsing and acting upon these beliefs further intensified them; it also opened the door for committing countless other moral failings in order to sustain the original sin of enslavement.³³

Sarai's horrendous treatment of Hagar is evidence of Graham's "diminishment of value for self and others" paradigm as well as Allender's compromised "Faith, Hope, and Love Matrix." Both are outcomes of moral injury. Sarai exhibited a low view of herself. She was unable to conceive a child. Hope was absent. She had a low view of God, seeing no way that God could provide her with a child. Faith was faltering. Finally, Sarai exhibited a low view of others, forcing Hagar into sexual servitude and demanding Abram's participation. If present at all, love was distorted.

Trible identifies clues in the Hebrew that help illuminate Sarai's struggle. For instance, Tribble translates the first part of Genesis 16:2 as, "And Sarai said to Abram, "Because Yahweh has prevented me from bearing children, go to my maid. Perhaps I shall be built up from her."³⁴ This translation highlights Sarai's desperate, diminished view of herself, which is a hallmark of moral injury. After Hagar conceives, Sarai angrily approaches Abram. Here, Tribble leans on the

³³ Chanequa Walker-Barnes, *I Bring the Voices of My People: A Womanist Vision for Racial Reconciliation* (Grand Rapids: Wm. B. Eerdmans. 2019), 127.

³⁴ Tribble, *Texts of Terror*, 10.

Revised Standard Version, which reads, “And Sarai said to Abram, ‘I gave my maid to your embrace but when she saw that she had conceived, then I was slight in her eyes.’”³⁵ Tribble notes, “By giving Hagar to Abram for a wife, Sarai hoped to be built up. In fact, however, she has enhanced the status of the servant to become herself correspondingly lowered in the eyes of Hagar.”³⁶ Though the scripture does not foreshadow it, as a researcher on moral injury and the Bible, I cannot help but remember King Saul, having endured a humiliating moral injury from Samuel, making decision after decision that not only lessened his standing but, ironically, elevated his rival.

Eventually, both Hagar and Sarai (now called Sarah) give birth to sons. However, an angry, insecure Sarah continues to reject Hagar and her son Ishmael, insisting on their complete expulsion from the tribal camp. Hagar and her son, Ishmael, were sent into the desert where there was very little hope of survival. Thankfully, God provided for Hagar and Ishmael but, what are we to make of Sarai’s behavior? Was she ever held to account for her affliction of Hagar? Did she ever experience healing from her moral injury?

Sarah and Hagar had very different circumstances and stories. However, their experiences of betrayal share one, transcendent aspect. Both women were rescued by God. When Sarai was held in the Egyptian harem, and later a second time in the home of King Abimelech,

³⁵ Gen 16:5.

³⁶ Tribble, *Texts of Terror*, 12.

without hope of a husband's help, the Hebrew scripture tells us that God afflicted the people to the point that both kings immediately returned Sarai/Sarah to her husband. In the two times Hagar found herself in the desert with Ishmael and without hope, she was met by God. Genesis 21 tells us that God said to her, "What troubles you, Hagar? Do not be afraid; for God has heard the voice of the boy where he is."³⁷

What humanity was powerless to achieve, God did for these two women. For the woman who faced the impossible limitation of barrenness and abandonment, God showed sovereignty over the physical body through a plague and returned Sarai/Sarah to her husband. For the woman cast out of her community, God initiated a connection and generously provided for her needs and those of her child. However, it bears mentioning that belief in God's sovereignty in the deliverance of both women must also acknowledge God's sovereign presence in the midst of their trauma.

The ancient stories of Sarai and Hagar serve as examples of trauma borne of sexual betrayal. However, only Sarai/Sarah exhibited symptoms of moral injury. This echoes the experience of two soldiers who return home. One veteran may experience the shame, self-repudiation, and ethical confusion that indicate moral injury. The other may not.

The wounds persist in our modern era by way of sexual assault, domestic violence, and, in my ministry context, sexual exploitation through human trafficking. Survivors may reveal moral injury, or they may not. However, survivors of human trafficking do report high levels of

³⁷ Gen 21:17.

personal shame, wrestling with who is to blame for the trauma. Struggling to articulate the pain that resides within them, they often isolate from those who might offer understanding or support. If their moral injury is not attended to, survivors may perpetuate the cycle of pain by recruiting others into the sex trade or by taking their own lives.

Just as Sarai lacked an environment of expression where she could name her injury and Hagar was without a supportive community, so human trafficking survivors also need these essential elements in order to heal. Survivors need to name their painful experiences without fear of judgment or abandonment. Diane Langberg writes of the importance of speaking in the context of trust and acceptance.

At the beginning, talking might not be done using words. Sometimes people only moan or sigh or cry or scream³⁸. It is the beginning of giving voice to that which cannot be spoken. Many times, people need us to sit with them in silence. It is a way of joining with them, so they are not alone in their experience of struggling to find words. Eventually words must come... Talking is about telling the truth. It connects the survivor to another person. It restores dignity because their story matters.³⁹

While it is impossible to control when and where God will intervene in the rescue of a person, opportunities to connect with God offer lifesaving and sustaining help. Introducing disciplines like the above empathetic reading of scripture stories, as well as prayers of lament

³⁸An example of this can be found in Genesis 21:16 “Then she (Hagar) went and sat down opposite him (her son) a good way off, about the distance of a bowshot; for she said, “Do not let me look on the death of the child: And as she sat opposite him, she lifted up her voice and wept.”

³⁹ Diane Langberg, *Suffering and the Heart of God: How Trauma Destroys and Christ Restores* (Greensboro: New Growth Press, 2015), 148.

and justice, can empower survivors to seek God in ways that are resonant with their lived experience. Langberg writes about the significance of a lament practice for a survivor of trauma.

Laments encourage people to be honest with God and to speak the truth about their feelings and doubts and questions. They do not try to solve the problem; they simply let God know honestly what they are feeling and thinking...Faith is being demonstrated by someone in extreme pain because they are talking to God about that pain and the questions it raises.⁴⁰

As an addendum to her book, Langberg provides a liturgy of lament she has designed for survivors of trauma. The reading includes several excerpts from the scripture. Below is a small portion of her poignant lament liturgy that may be particularly useful for a person struggling with moral injury. Note the acknowledgment of the diminishment of self, the lack of trust in people and deities, the anguish of spirit, and the deep need to speak the unvarnished truth.

ALL: Our eyes failed, ever watching vainly for help. You have wrapped yourself with a cloud so that no prayer can pass through. You have made us scum and garbage among the peoples.

Women: All our enemies open their mouths against us; panic and pitfall have come upon us, devastation, and destruction; my eyes flow with rivers of tears. I have been hunted like a bird by those who were my enemies without cause; they flung me alive into the pit and cast stones on me; water closed over my head; I said, "I am lost."

⁴⁰ Ibid., 190.

All: Therefore, I will not restrain my mouth; I will speak in the anguish of my spirit; I will complain in the bitterness of my soul.

Men: There is no faithfulness or steadfast love, and no knowledge of God in the land; there is swearing, lying, murder, stealing, and committing adultery; they break all bonds, and bloodshed follows bloodshed. Therefore, the land mourns, and all who dwell in it languish.

All: Therefore, I will not restrain my mouth; I will speak in the anguish of my spirit; I will complain in the bitterness of my soul.⁴¹

In conclusion, there is much to learn about spiritual care for those who have experienced trauma. The writings of Kelle and Graham, as well as the Shay Moral Injury center, introduce a concept that affects veterans in a different way than Post Traumatic Stress Disorder. Moral injury results from actions one takes that are outside their code of ethics or from the unethical betrayal of a trusted leader or friend. The symptoms of shame, isolation, and moral confusion build a very short bridge to victims of sexual assault. Certainly, victims of sexual abuse and rape have been violated and betrayed to the point of moral injury. People who have been forced or coerced into sexual exploitation through human trafficking bear an enormous wound. Connecting their symptoms to those of moral injury holds hope for more sensitive, relevant spiritual care.

The Biblical stories of Sarai, Abram, and Hagar stand as a testament to the existence of sexual exploitation from the beginning of recorded time. Because the women are given so few

⁴¹ Ibid., 357-358.

words in the scripture, a careful, imaginative reading of their narrative is imperative. Both women were betrayed. Both were used for their bodies. Both were ultimately rescued by God.

Literature Review

Biblical studies in the review of Sarah and Hagar's stories come from a variety of sources. Kathleen M. O'Connor's commentary on *Genesis*, as well as Wilda C. Gafney's *Womanist Midrash, A Reintroduction to The Women of The Torah, and The Throne*, sparked my thinking about the impact of the Egyptian deception. Jacqueline E. Lapsley's encouragement to read between the lines of Biblical text featuring women in *Whispering the Word, Hearing Women's Stories in the Old Testament*⁴² stimulated my imagination, while Phyllis Trible's treatment of the Hebrew language in *Texts of Terror, Literary-Feminist Readings of Biblical Narratives* emboldened my advancement of my theory that both Sarai and Hagar suffered from trauma but only Sarai incurred moral injury.

Ironically, hope lies in understanding what Sarai lacked. She does not seem to have had an environment of expression. As far as we know, she never spoke openly about her experience in the Egyptian harem. Perhaps, if she had been living in a culture that valued her narrative, she may have been able to process the experience in a healthy way. Sarai/ah would have benefitted from a more supportive community that valued her experience and point of view rather than only her ability to conceive. Finally, though God notably rescued her from captivity and provided

⁴² Jacqueline E. Lapsley, *Whispering the Word: Hearing Women's Stories in the Old Testament* (Louisville: Westminster/John Knox, 2005). 11-22.

Isaac, the covenant heir, Sarai/Sarah's interaction with the deity seems to be limited to secondhand communication through her husband and a terse rebuke of her laughter.⁴³

Spiritual care providers are wise to focus on innovative ways to meet the needs of moral injury survivors. Diane Langberg's book on sexual trauma, *Suffering and the Heart of God*, encourages caregivers to educate themselves, prepare for an extremely challenging assignment, and, most importantly, work to create safe places and experiences where a survivor of moral injury may have the opportunity to encounter a living God.

⁴³ Genesis 18:13-15 The LORD said to Abram, "Why did Sarah laugh, and say, "Shall I indeed bear a child, now that I am old?" Is anything too wonderful for the Lord? At the set time I will return to you, in due season, and Sarah shall have a son." But Sarah denied, saying, "I did not laugh"; for she was afraid. He said, "Oh yes, you did laugh."

CHAPTER THREE

CONTEXTUAL ASSESSMENT

Traumatic experiences wound in different ways. Catastrophic events, whether sudden or prolonged, can undoubtedly alter physical health. Trauma can also impact the security of a living situation, overwhelm the ability to make critical decisions, and put essential relationships at risk. O'Connor rightly points out the impact of trauma, writing that trauma is, "Equally serious for individuals and societies but less visible. Trauma and disaster destroy or at least undermine trust in God, other people, and the world."¹

The women who come to The Program have suffered the indignity and violence of human trafficking. Most have traveled from state to state with a dominating person, demanding that she provide sex in return for compensation that will go directly into the pocket of her trafficker, also known as her "pimp." As if this torture were not enough, Program participants have also revealed traumatic histories that began long before their trafficking experience. Most grew up in an environment of child abuse and/or neglect. Substance abuse disorder is common, as are experiences of intimate partner violence. Below, a former participant in The Program details her chaotic childhood and subsequent abuse:

I grew up with two parents battling addiction. At age seventeen, I started using drugs and alcohol to cope with the trauma of having an unstable household. Throughout my period of drug use, I encountered relationships with abusive men which lowered my self-esteem. I searched for something to fill this void in my heart, and I continued this risky behavior

¹ Kathleen M. O'Connor, *Jeremiah: Pain and Promise*, 4.

by going out with strangers. Almost a year ago, I left my home in ____² with a man that I met online and ended up getting sex trafficked. A week later, we travelled to ____ where I found a chance to get away. I ended up walking 60 miles to regain my freedom.³

Considering the intersection of multiple traumatic experiences, the provision of spiritual care to survivors of sex trafficking calls for a particularly sensitive approach. This chapter features the work of one organization attempting to provide care that addresses the many wounds of prolonged sexual trauma. The ministry setting, its staff members, and program participants form the foundation for considering an important research question: What elements of spiritual care are most helpful to women survivors of sex trafficking?

The Program is a faith-based 501(c)(3) nonprofit organization located in central Alabama. Here, The Program provides therapeutic residential care to adult women who have survived sex trafficking. Each woman in The Program has experienced sexual exploitation for commercial use by force, fraud, or coercion.⁴ Since The Program's genesis in 2010, over 500 women have come to the residential setting and received therapeutic, trauma-informed care. Those serving in this ministry, both staff and volunteers, have seen transformed lives, reunited families, and hearts joined to Christ. In all aspects, including programming, leadership, finance,

² Some details have been redacted to protect the identity of the author.

³ This person's story was posted on The Program's web page. Details about this page, as well as an internet link are not provided in order to protect the identity of the survivor. (accessed July 4, 2022).

⁴ Department of Homeland Security, "What is Human Trafficking?" <https://www.dhs.gov/blue-campaign/what-human-trafficking>.

and community partnerships, The Program has experienced steady, sustained growth. Under the leadership of our CEO, we expect the scope and scale of this ministry to continue to broaden.

The Program has much to offer as a young, growing nonprofit. Facilities are state of the art, and social services have reached the level of excellence. Financial sustainability is positive. Volunteer and staff leadership are improving. In 2020, the staff and Board of Directors of The Program adopted three pillars for our organizational culture. They are, first, prayer because we believe that only God can fully heal the wounds of trauma. The second is excellence, which we define as going beyond the norm for the sake of each woman in The Program. The third pillar we chose was grace because we recognize that God offers transformative, restorative opportunities to each of us. The Program leadership chose these words because of their spiritual depth. This is encouraging for a pastoral leader who understands that the most painful trauma wounds are often spiritual. Still, the question remains: How can The Program provide helpful spiritual guidance to a person who has experienced long-term sexual trauma resulting in moral injury?

The story of the founder of The Program serves as a cautionary tale. At the age of 15, traffickers sold her for sex throughout the southeastern United States. Years later, as an adult, she found help at a local church outreach program. Through the resources and spiritual guidance they provided, she successfully exited the world of human trafficking.

After graduating from college and obtaining two master's degrees, she established The Program by opening her home to women with similar trauma. Armed with her education, experience, and faith, she soon found herself speaking about human trafficking to larger and larger audiences. The Program began to grow. A Board of Directors joined the cause, but the

founder showed signs of struggle. Retelling her traumatic experiences in front of audiences proved challenging, as did the daily maintenance of a young nonprofit. With life becoming increasingly stressful, her physical and spiritual health deteriorated. After five difficult years of leadership, she relapsed into substance abuse. The Board provided counseling and rehab for her but also made plans to hire a new Executive Director.

In 2015, the new Director brought a solid social services background and organizational acumen to The Program. The message that, although its founder was in the midst of a serious struggle, the ministry remained committed to its mission, galvanized supporters. Today, The Program continues to grow. At present, it is the nation's largest residential care facility designed solely for survivors of sex trafficking. However, our founder's story is a reminder of the complexity of recovery for a person who has survived sex trafficking. Shortly after the founder exited The Program, I joined the organization.

In my fifth year as Chief Operating Officer of The Program, I helped ensure that our services provide the most effective and efficient care possible. The staff is primarily made up of people with strong social services backgrounds. One benefit of hiring highly qualified employees is that they bring a strong knowledge base of community resources. These include access to community providers, therapeutic modalities, and legal considerations. However, staff members can rarely provide formal spiritual care as a part of their daily work with The Program participants. Volunteers currently lead faith-based initiatives like Bible studies. I would oversee their training.

People interested in volunteering at The Program complete an application process that includes a criminal background check and online training that covers the definition and scope of human trafficking, the trauma of sexual exploitation, and the mission and modalities of the organization. Upon completion of the training, I'd reach out to each new volunteer to talk about specific interests and abilities. Most see their work at The Program as a calling from God and are interested in leading some kind of spiritual initiative. This is challenging because volunteers come with many different faith experiences and ways of thinking about God. Their hearts hope to make a difference, but I fear there is little continuity from one spiritual initiative to another. Staff members, overwhelmed by case management and therapy demands, are not currently providing any formal spiritual care. Therefore, The Program may be providing excellence in social services but patchwork, unmeasured spiritual care.

The lack of data on spiritual care at The Program is of concern because the women we serve have suffered greatly. According to Polaris, the National Trafficking Hotline operator, the top five risk factors/vulnerabilities for sex trafficking victimization are substance use, runaway or homelessness, recent migration or relocation, unstable housing, and mental health concerns.⁵ The Program addresses recovery needs through initiatives that meet the physical, spiritual, relational, and emotional needs of each woman served. Of the residential Program participants served in 2020, 63% were under the age of 30. They were from 23 states and three countries.

⁵ "Polaris 2019 Data Report," Polaris-2019-US-National-Human-Trafficking-Hotline-Data-Report.pdf (accessed September 9, 2020).

Their average length of stay was 7.5 months. 74% endured homelessness at some point in life. Most ran away from home during their adolescence. Below is an average experience of a Program participant.

Imagine a young woman being kept in a hotel room under lock and key. Her trafficker makes regular appointments for her to have sex with people for money. Any payment is made directly to her trafficker. There is very little hope until one day when she acquires a cellular phone and calls The Program's twenty-four-hour crisis line. She is extremely fearful. Normally, she would not have access to a cell phone. Her trafficker may have accidentally left it behind, or a guilt-ridden customer may have offered her theirs. She will need to speak rapidly and then erase all evidence of the call. Our Rescue Supervisor, a retired law enforcement officer, is accustomed to this pace and makes a quick assessment, advising our survivor on a plan of escape. There may be a nearby hospital, shelter, or police station she can reach by foot. By the time she arrives, transport to The Program has been arranged. This process happens very quickly. She may, at this point, begin to feel some sense of safety.

Arriving at The Program, she will see a 63-acre campus with four homes, a chapel, and an administrative building. She spends her first two weeks at the Trauma Center, an onsite apartment designed for quiet and calm. Occupants include a full-time staff member and one additional resident. Simple provisions of food, clean clothing, and a warm bed are made available. She will receive a comprehensive physical exam and corresponding care at the onsite women's health clinic. A mental health assessment and daily, stabilizing, supportive therapy are

provided by our Director of Trauma Therapy. She may sleep away most of her time at the Trauma Center, or she may be anxious, walking in circles, agitated, around the property.

After this initial period, she is invited to move to The Immediate Shelter (TIS). This home, staffed with a 24-hour Home Coordinator, a Case Manager, and a Therapist, can accommodate twelve women. Group programming is introduced, including art and equine therapy, life skills, and substance recovery. Individual counseling continues, and her Case Manager begins helping her work toward a short and long-term plan. With the other women in the shelter, she will begin attending a specific church. She is expected to participate in at least three mandatory Bible studies each week. She may embrace the Christian faith during this phase, as many do. However, her experience tends to be extremely challenging. New theological language, books, and Bibles come her way as she also begins to grapple with the reality of her abuse.

After about three months (flexibility is necessary here), she will transition to our long-term Program, Next Steps to Freedom (NSF). Also located on The Program campus, NSF, like TIS, can accommodate twelve residents. Over the next year, she will participate in more therapeutic programs to develop a healthy, independent life. Many residents acquire transportation and employment during this phase. Others reestablish relationships with family members, pursue certification opportunities, and even college degrees.

After a year of participation in The Program, she will graduate and receive an offer to move to one of the Next Step to Independence (NSI) transitional living apartments. With a capacity of fourteen, NSI is located on the far end of The Program's campus. These two-bedroom

apartments are fully furnished and can accommodate two roommates or a mother and her children. Here, our survivor can reside and work independently while continuing therapy and case management. The NSI apartment program has recently been extended from one to two years as participants have voiced a continuing need for extensive support.

Even with full completion of The Program, challenges abound for someone like the person referenced in the story above. She may be wrestling with addiction issues, ambivalence about leaving her former life, or a range of adverse childhood events. She may choose to walk away from the ministry at any time. Ideally, she would live at The Program for an entire year with the option of spending two extra years in the transitional living apartments. In 2020, the average stay of a resident was 224 days, about 7.5 months. Of the forty-eight people who exited the Program that year, fourteen left as graduates. The others chose to leave before completion. Maintaining connections with those who leave The Program is difficult. The greatest challenge The Program faces is the continual development of effective, innovative ways to offer women opportunities for significant, lasting restoration. This calls for great attentiveness to individual challenges.

As the women work their way through the phases of The Program, many also struggle with deep sadness, anger, or regret. Judith Herman notes, “Long after the event, many traumatized people feel that a part of themselves have died.”⁶ The physical and emotional

⁶Judith Herman, *Trauma and Recovery* (New York: Basic Books, 1992), 49.

damage is extensive. Sexual trauma, in particular, can have a devastating impact on a person's capacity to experience the benefits of the Christian life: faith, hope, and love.⁷ This pain is due, in no small part, to moral injury.

The soul wound of moral injury can occur when individuals do something or are forced to do something that violates their code of ethics. Even when this happens under compulsion, as in human trafficking, survivors report feelings of shame and self-hatred. Many of the women in The Program experienced a moral injury very early in life, prior to their trafficking. Of the women who participated in The Program in 2020, 85% reported childhood sexual abuse.⁸ This huge percentage does not include the women who declined to answer the childhood sexual abuse question. This breach of a boundary at a young age likely contributed to their vulnerability to sexual predators later in life. Herman explains why survivors of childhood sexual abuse are so often vulnerable many years later.

Almost inevitably, the survivor has great difficulty protecting herself in the context of intimate relationships. Her desperate longing for nurturance and care makes it difficult to establish safe and appropriate boundaries with others. Her tendency to denigrate herself and to idealize those to whom she becomes attached further clouds her judgment. Her empathic attunement to the wishes of others and her automatic, often unconscious habits of obedience also make her vulnerable to anyone in a position of power or authority.⁹

⁷ Dan Allender, *Faith, Hope, Love Matrix*, <http://theallendercenter.org/wp-content/uploads/2015/02/Faith-Hope-Love-Matrix.pdf>.

⁸ Based on a question from The Program Intake Form. Many chose not to answer.

⁹ Judith Lewis Herman, *Trauma and Recovery*, 111.

The women at The Program are often unaware of the impact their childhood wounds have had on their current situation. They report blaming themselves for submitting to the demands of a trafficker. In addition to providing sex for money, they may have participated in theft, violence, drug trafficking, and even the recruitment of other new victims. Unaddressed moral injury in survivors of human sex trafficking runs deep and can defeat recovery. The Shay Moral Injury Center describes moral injury, “Suffering people experience when we are in high stakes situations, things go wrong, and harm results that challenges our deepest moral codes and ability to trust in others or ourselves...It results in moral emotions such as shame, guilt, self-condemnation, outrage, and sorrow.”¹⁰

In our quest to provide transformative spiritual care, The Program must consider the complex, often concealed wound that is moral injury. While still a novel concept for the care providers at The Program, guidance, and hope are available through the pastoral care community. Though Graham applies his care modalities to veterans of war, it is the position of this paper that his concepts are transferable. Three aspects of spiritual care that hold healing potential for survivors of moral injury are the creation of an environment that encourages expression, a supportive community, and the creation of meaningful opportunities for connection with God.¹¹

¹⁰ The Shay Moral Injury Center, “The War Inside,” <https://www.voa.org/moral-injury-war-inside> (Accessed July 4, 2022).

¹¹Graham, *Moral Injury*, 109-152.

In his helpful study of restorative practices for moral injury, Graham writes, “Healing the soul's moral wounds is both a personal and social endeavor. Pastoral and communal guidance takes the initiative of joining the painful terrain of moral pain and creates a safe place to grieve the multiple losses brought on by wounding, and to name, frame, enact, and revise the wounding events.”¹² The research project described in this paper can help shed light on what current spiritual care providers are doing to address moral injury at The Program. Data helped answer critical questions about the spiritual care initiatives. For instance, are the volunteer leaders able to open their classes up for discussion? Are the women in The Program able to express their ideas in a way that honors their lived experience? Are they able to begin to name, reframe, enact, or revise their wounds in spiritual terms?

In addition to the cultivation of an atmosphere of expression and a supportive community, I noted any spiritually driven rituals taking place during the classes. Login S. George and Crystal L. Park define a religious ritual as “Any repetitive and patterned behavior that is prescribed by or tied to a religious institution, belief, or custom, often with the intention of communicating with a deity or supernatural power. Rituals may be performed individually or collectively during predetermined times.”¹³ Because this research focuses on spiritual care at The Program, I paid close attention to any evidence of rituals that connect people with God.

¹²Graham, *Moral Injury*, 108.

¹³ Login S. George, and Crystal L. Park, “Religious Ritual,” in *Encyclopedia of Behavioral Medicine*, ed. M.D. Gellman, and J.R. Turner. (New York: Springer, 2013),1648-50.

At the heart of this project is a vision of a refined spiritual care approach that responds to the specific needs of people who have survived the moral injury of sex trafficking. The Internal Review Board at Mercer University approved an assessment of current spiritual care initiatives that includes the perspectives of those providing care and those on the receiving end. To gather these diverse points of view, I engaged current residents, graduates, and volunteers, utilizing three strategic research instruments: observation field notes, questionnaires, and interviews to understand current spiritual care practices at The Program and develop new approaches.

Because survivors of sex trafficking often show the symptoms of trauma-induced moral injury, appropriate spiritual care must take these challenges into account and address specific needs. Six experienced volunteers currently lead three Bible studies and two enrichment classes on campus each week. With this assessment, I planned to gather feedback from Bible study leaders, an art teacher, and an exercise instructor, as well as twenty current participants and three to six Program graduates as a sample population.

Four very experienced volunteers led the Bible studies that were observed. Each has led their study for a minimum of three years. Two have led their Bible studies for over seven years. The leaders of the three Bible studies comprised three females and one male. All are Caucasian, from middle to high-income homes. Their ages are between 45 and 60. Their denominational affiliations include Methodist, Presbyterian, and Southern Baptist.

I was interested in learning about the level of interaction in each of the Bible studies, whether an atmosphere of expression was present, encouraging participants to share their points of view. I looked for evidence of a supportive community during each observation, gauging the

level of affirmation participants were receiving, not only from group leaders but from their peers. Finally, I took note of any spiritually significant rituals happening, whether consciously or subconsciously.

The art class I observed has been taking place at The Program for the last four years. The class is led by a retired art teacher who spent 25 years in our local school system. She is in her 60s, Caucasian and widowed, hailing from a Seventh Day Adventist church. I remember interviewing her for a volunteer position at The Program. She talked about how much she loved to teach, not art, but people. She mentioned that she had a gift for finding the struggling children in her classes and loved to shower care on them. Because the art class takes place in our administration building, I have taken notice of a positive, conversational atmosphere. I am curious to know if the service from the retired art teacher is providing a different sort of spiritual care to the ladies.

Finally, there is the exercise class. This is the newest course I observed. The instructor, a Caucasian female in her forties, has led this class for a little over a year. I was interested in spiritual care in chorus with the movement of the body. Was something healing happening in the exercise class?

While I planned to take copious observation notes for each of the classes above, I was excited to learn what the women in The Program would share in their questionnaires. When they arrive at The Program, they are often silent. The newness of the surroundings and people can be intimidating. A level of comfort seems to come in the weekly routine of classes and appointments. I wanted to know what the women would say when finally asked for their

opinions. This study is designed to consider each woman's voice regarding her spiritual healing. The research design pays special attention to the handling of resident questionnaires, to ensure complete anonymity.

After observing each of the classes, taking field notes, and interviewing each leader,¹⁴ I invited residents to complete anonymous questionnaires.¹⁵ These questionnaires were designed to identify aspects of the designated activities that incorporated any of the three key concepts identified as helpful for survivors of moral injury: an environment of expression, a supportive community, and rituals that help people develop a connection with God. The method of collection was intentional. Questionnaires were distributed and collected by an intern to ensure participant anonymity. Program graduates were also invited to complete questionnaires as a means of capturing the long-term effectiveness of The Program's spiritual care.¹⁶

Observation notes, questionnaires, and interview material were coded around responses that exemplified an environment of expression, a loving, supportive community, or the presence of helpful rituals or the lack thereof. Data were interpreted and analyzed in light of three key concepts for healing moral injury: an environment of expression, a supportive, loving community, and the presence of rituals that help a survivor connect with God. Suggestions for an

¹⁴ Appendices D and F.

¹⁵ Appendix E.

¹⁶ Appendix G.

enhanced spiritual care plan may be shared with residents, graduates, volunteer leaders, and staff upon request. Required resources, including tools for field notes and a recording device, were readily available.

The project outcome features an enhanced ministry plan, informed by participant experience and an understanding of moral injury, featuring an analysis of five current spiritual care efforts at The Program. The research methodology included ethnographic, sociological, and educational disciplines.

Ethnographic considerations included the policies and procedures of The Program, the background and philosophy of each of the spiritual care providers, the content of the spiritual care programs, and, most importantly, the response of The Program participants. Sociological research included taking the effects of long-term chronic trauma and moral injury into account. Data collection and analysis required a commitment to fastidious, unbiased information collection and interpretation.

This research project will study what spiritual care elements address moral injury at The Program and what innovations are needed. A spiritual care curriculum informed by the implications of moral injury holds great promise for healing and empowerment for the women in The Program. I look forward to seeing these project findings incorporated into a long-range plan. I also hope to develop an in-service training for the entire staff and share this information with other organizations across the country through our partners at the National Trafficking Sheltered Alliance. Sharing the project findings with stakeholders will be professionally and personally

rewarding. I am convinced that the greatest healing potential for the wounds of every person is found in thoughtful, informed spiritual care.

CHAPTER FOUR

RESEARCH METHODS AND FINDINGS

This chapter examines the research and tests my thesis. It reports, analyzes, and interprets data to clarify its impact on the thesis. Findings also include the strengths and weaknesses of the methodology. My thesis builds on the assumption that many survivors of sex trafficking have sustained a moral injury, a wound to the self-concept historically applied to military veterans. Moral injury occurs when individuals violate their own deeply held moral code by choice or by force. While a veteran may sustain a moral injury by taking a human life in combat, a sex trafficking survivor may have been forced to sell their body to many buyers and possibly recruit other vulnerable people to do the same. For the veteran as well as the trafficking survivor, moral injury causes extensive damage. Kelle reminds us, “The transgression of moral codes and the betrayal of trust can produce emotional, psychological, social, and spiritual effects that include negative changes in ethical behavior and attitudes, changes in or loss of spirituality, reduced trust in others and social contracts, and feelings of guilt and shame.”¹

Almost all the women in The Program report symptoms of moral injury. The Program cares for survivors of sex trafficking by providing safe housing, individual and group therapy, case management, and a host of other initiatives. However, moral injury also calls for informed, intentional spiritual care. In his extensive research on the impact of war in families in the United

¹ Kelle, *The Bible and Moral Injury*, 56.

States, Germany, and Bosnia,² Graham offers a framework for ministry. Graham writes, “Healing the soul’s moral wounds is both a personal and social endeavor. Pastoral and communal guidance takes the initiative of joining the painful terrain of moral pain and creates a safe place to grieve the multiple losses brought on by the wounding, and to name, frame, enact and revise the wounding events.”³

When survivors of moral injury feel safe, respected, and heard, they may begin to articulate, frame, and reframe their traumatic experience. This process can be powerfully healing. For instance, a person suffering from moral injury may self-repudiate due to their choice to stay in an abusive relationship. However, in a safe, supportive environment, the survivor may eventually alter that frame, acknowledging multiple attempts at leaving the relationship, each resulting in its own form of punishment, as well as the regular intimidation, threats, and manipulation leveled against them.

In order for reframing to occur, specific “healing collaborations” need to be in place.⁴ Three elements Graham recommends are an atmosphere of expression, where a survivor is encouraged to share their story according to their timeline and comfortability; a supportive community that is able to honor and handle traumatic wounds; and the presence of healing rituals and memorials that enable a survivor to experience God in the midst of grief, anger, or even

² Graham, *Moral Injury*, 4.

³ *Ibid.*, 108.

⁴ *Ibid.*, 134.

nostalgia without condemnation. Graham's approach calls on the spiritual care provider to attend to the individual survivor while guiding the greater community toward a trauma-informed way of being that practices thoughtful attentiveness and unconditional support.

This research was designed to determine how prevalent these three elements of healing are in the spiritual care practices at The Program. I selected five ongoing spiritual care efforts at The Program for study. There are other activities at The Program that doubtlessly spur healing. Regular therapy and the onsite women's clinic immediately come to mind. However, to focus on what is traditionally considered spiritual care, three different Bible studies, an art class, and an exercise class were chosen. Data were collected in three ways: personal observation, surveys completed anonymously by each participant and a confidential interview with each class leader. Observations and questions were designed to determine what elements of an atmosphere of expression, a supportive community, and spiritually healing rituals were in place at The Program.

Observations were the first layer of research for each of the classes. After securing consent from the leader and each participant, I seated myself in a quiet corner where I could clearly see and hear everyone. I took field notes on a specially designed template. On the template, I noted the time of day and subject of the class. I also added general observations to this front page. On the second page of the template, I noted any examples of self-expression, framing, or reframing of one's story. The following page looked for signs of a supportive community, followed by the final page, where I noted evidence of spiritually healing rituals.

The second phase of the research involved participant surveys. The surveys were distributed to the women who live at The Program and participate in daily activities. At the close

of each observed class, the surveys were completed and collected. The form contained nine statements describing a response to the class. For instance, the first question read: "During this activity, I share stories from my personal life," to which the participant was instructed to choose one of the options: "Often, Sometimes, Rarely, or Never."⁵ The survey questions were designed to reveal any experiences of the healing elements (an atmosphere of expression, a supportive community, and the presence of spiritually healing rituals) that the participant may have encountered in the current class. The tenth question was free form, simply asking if there were any other topics the participant would like to discuss. The participants varied in their interest in completing the surveys. A few were enthusiastic, penning notes of praise or criticism in the margins. Others seemed eager to leave at the close of the class and bothered by the request for feedback. Some appeared ambivalent.

An additional questionnaire was designed for graduates to reflect on their experience of spiritual care while participating in The Program. Unfortunately, the graduates were very difficult to locate, and ultimately, only two completed questionnaires. Their answers were perfunctory and revealed little about the current level of spiritual care offered at The Program.

The final phase of research on each of the classes was a private interview with each of the class leaders. Here, I asked a preset group of questions to determine whether the volunteer was aware of any elements of an atmosphere of expression, a supportive community, or any spiritually healing rituals in their class. Each interview began with questions of rapport, "Tell me

⁵ Appendix E.

a little bit about yourself and your class.” I asked every leader the same group of questions. Rather than yes or no questions, the interview encouraged qualitative information. For example, “Can you recall a time when a resident expressed anger in your class? Was there a time someone expressed grief or shame?”⁶

These research instruments, observations, surveys, questionnaires, and interviews were the means of testing the question of this thesis. Graham associates three healing elements with care for moral injury: an atmosphere of expression, a supportive community, and spiritually healing rituals. To what extent were these elements present in the five spiritual care initiatives observed at The Program?

This data report will begin with a snapshot of each of the five spiritual care classes observed at The Program. The first impression is from a Monday morning Bible study taught by a long-term, dedicated volunteer. The women gathered in the living room of one of the residential homes, pillows wedged behind their backs, in their laps, and all around. Each brought a Bible. They wore socks but not shoes. Their leader began with prayer requests, and the participants shared readily. School challenges, family illness, worries, regrets, and hopes were all discussed. The communal, familial feel struck me. I recorded evidence of a supportive community in my field notes, particularly during the prayer request time. Participants and leader, gathering at the same time each week, sharing their worries, and participants watching their leader pray about each one, pointed toward the presence of a sacred ritual, a means of connecting

⁶ Appendix F.

with God. Whether or not the women were experiencing such a spiritual connection was much more difficult to determine.

The leader began her study in the book of Jeremiah. Moving to the Mary/Martha story and several other places in between, she challenged the women to trust in God and give their very best at The Program. She emphasized that The Program was a place of new beginnings for them. I watched the participants listen. They also drifted. Some worked to stay engaged while others bobbed in tell-tale sleepiness. Participants were asked to read scripture but shared little about their lives once the Bible study began in earnest. Occasionally, the leader would ask if anyone had any questions. No one did. The class was now a ministry of proclamation, with the participants firmly in the listening chairs.

Surveys for the class revealed an appreciation for the leader but some frustration with the flow of the class. “I never share my point of view here” was a free-form response from a participant. Another wrote, “I have a relationship with God, but it's definitely not from this class.” However, the statement that elicited the strongest response was the following. “I have grown closer to God through this activity.” All but two participants gave “I have grown closer to God through this activity” the highest rating. The lowest response was, “People have pointed out my good qualities during this activity.” This question, designed to gauge the presence of a supportive community, was marked “often” by only one participant.

After observing the class and reading the participant surveys, I was ready to interview the class leader. She was completely aware of the didactic style of her class. She was proclaiming the word of God, noting in the interview, “It’s not what I say that they need. It’s what God’s

word says.” I got the distinct impression that her goal was to ensure that each of the women had a chance to hear the Gospel truth. Considering the highest rated survey statement for her class, “I have grown closer to God through this activity,” she was likely reaching her goal.

Though not the atmosphere of expression I was hoping to find, the responses about not being able to share their point of view and not having their good qualities acknowledged were of particular concern. However, the women did share events of their lives in the prayer request portion of the class, revealing the cultivation of a supportive community. Finally, the women holding their Bibles and turning to each of the passages, taking turns reading, made space for a spiritual care ritual, possibly tied to the majority response of having grown closer to God as a result of this activity. Although this Bible study did not feature the trauma-informed elements Graham suggests for healing of moral injury; it appeared to have been effective in a different kind of way.

The second Bible study I observed was a Tuesday evening doubleheader. In other words, the class was taught twice, first to the women in one of the homes, from 4:00 to 5:30. Then, it was taught to a different group in a different home from 6:00 to 7:30. This structure makes sense in light of the organizational flow of The Program. Women live in different homes depending on which phase of The Program they are in. The early Bible study was for the women in their first three months of residency, while the latter was for women who had been in the Program longer.

In contrast to the Monday morning Bible study, the Tuesday evening event was highly participatory. It felt like someone announced, “Let the games begin!” There were snacks, door prizes, a birthday cake complete with candles, and singing. I heard laughter and comfortable

chatting, strong evidence of a supportive community. As the group quieted, the participants began passing around a basket. One by one, they drew names of housemates they would now commit to praying for over the week to come. They shared various prayer requests and concerns. However, this time a fellow resident gave the opening intercessory prayer. I noted an atmosphere of expression.

The study that night was on the book of Esther. Again, the women held their Bibles and helped read scripture passages. I noticed that the leaders never corrected pronunciations of the long line of Biblical names. Instead, they prompted the participants with probing questions about the study. There was a free exchange between leaders and participants that elicited some fascinating observations about the book of Esther. Comments I observed included, “He cut Vashti off!” “He treated her like an item.” “So, wait, Mordecai brought Esther to the eunuch? Did he sell her?” “Mordecai trafficked his niece!” Again, I noted more evidence of expression and sharing one’s point of view due to an open atmosphere and supportive community.

The discussion was very similar both times the Bible study was conducted. I also observed that, as the evening progressed, the participants showed signs of grappling with their understanding of God. One woman, a long-term program participant, spoke up halfway through the session and asked for prayer. “I have ten felonies, and I need prayer. You should see my mug shots. I look so terrible! Why did I do that?” When she briefly shared the tragic frame of her story, the sadness on her face displayed a vulnerability and trust that felt authentic and holy. The leaders accepted her words without the need to instruct, inspire, or correct them. Another participant squeezed her hand. This spontaneous confession and show of support revealed that,

here, the women need not be on their best behavior. The interruption was not merely tolerated; it was honored. The leader's silent acknowledgment signaled that grief and regret could be experienced in the presence of God.

The women came to many interesting conclusions in the class, observing, for example that "Even though she was a trafficked woman, Esther saved lives." As the study wound down, a final question: "How come the Jews don't believe in Jesus, but God is Jewish?" Though I did not write down the response of the leader to this question, for this research, it did not matter. The leader had established an atmosphere of expression, a supportive community, and a ritual of approaching Bible study in a way that such questions were safely asked.

The surveys for this second Bible study were enthusiastic. The top-rated statements were, "I have felt hopeful during this activity" and "I have grown closer to God through this activity." One participant wrote that "It takes me away from the ups and downs of life." The lowest-rated statement was, "During this activity, I share personal stories from my life." About this statement, a participant wrote, "I feel it's not the right time to share personal stories from my life." This statement reminded me of what the young lady shared about her arrest record. I noted that she had to interrupt the discussion of the story of Esther in order to share this with the class. Perhaps others would have liked to share but were intimidated. After the experience of being controlled by another, sharing their own point of view might be very challenging. Perhaps there is a way to provide Biblical study in such a way that interrupting is unnecessary.

In interviewing the Bible study leaders for this class, I learned that creating a safe place for the women to interact was a priority for the co-leaders. They talked about encouraging the

participants to pray for each other. Passing the basket and drawing each other's names every week was designed to create a family mentality. When I asked them if they had ever witnessed anger in the class, one of the leaders talked about a woman who felt angry with God. "We told her, it is okay to be angry at God. He's a big God. He can take it. He sees it anyway. You can also be angry at your situation."

The leaders of this class also shared, "We want them to become comfortable with the Bible and become self-reflective." They confirmed that giving the participants lots of opportunities to ask questions and share their thoughts was intentional. "When they participate, it makes us feel so good. We want to build disciples who disciple each other."

The observation, surveys, and interviews of this second Bible Study showed signs of an atmosphere of expression. The women were framing and reframing the story of Esther in their language and context. However, from what I gathered in both the observation and the surveys, the women were often not applying the study to their personal stories, at least not publicly. To quote a participant, "I feel it's not the right time to share personal stories from my life."

The supportive community element was powerful in this group. The women and the leaders were kind and congenial. Finally, the way the women showed signs of wrestling with the Biblical content could have been evidence of personal application and reframing. For instance, one woman's question, "Why was it that Esther had to be a virgin for the contest?" as well as the leader's report about the participant who was angry with God, are signs that connections with their personal, spiritual story were happening.

The third and final Bible study I observed was a longstanding Thursday afternoon class. This was the only Bible study of the three taught by a male. At 4:45 pm, the participants gathered around the kitchen table, Bibles at the ready. In the evening session I observed, the leader opened the class with a question, "How do you define love?" He read First Corinthians 13. "I have a brother," he said. "No matter what he does, I will never stop loving him. Our capacity to love is huge compared to the animals." At this point, one of the women spoke up. "I think our capacity to love is tiny." There was silence. "Okay, never mind," she said. "I just don't believe love is selfless."

The leader responded, "Okay, how would you define love?" Responses started coming from all over the table. It was certainly an atmosphere of expression. "Love is joy and peace," someone said. "Love is unconditional." "God is love." "Love exists no matter what." "After all the things they've done, I still love my family." The participants, including the original dissenter, were sharing their points of view and, to the careful listener, pieces of their story. At times, it was not easy to discern whether their supportive community was in response to their leader's approach or if they were finding community in rallying against him. Either way, I noted community, expression, and some theological wrestling.

Survey answer options were distributed evenly across the "Often, Sometimes, Rarely, Never" spectrum for this class. "I have grown closer to God through this activity" was the highest-rated answer. Other highly-rated answers were, "This activity helps me think positively about myself." "I share my point of view during this activity," and "I enjoy participating in this activity." The free-form responses to some of the questions were intriguing. One person who

gave this class moderate to low ratings wrote, “The Program is amazing! My answers on this Bible study are not a good reflection of how I feel about The Program. Thank you so much for all you do for us!” The most concerning free-form response read, “I wish we could actually discuss things. We were told not to ask questions, share opinions, or discuss during this Bible study.” As disappointing as this comment was to read, I could not help but note that there were significantly more questions, opinions, and discussions in this class than in the other two Bible studies.

The interview with this leader provided much insight. “I have never taught a Bible study before this one,” he said. “But I’ve been doing this Bible study for over six years.” I noted that six years is longer than the tenure of most of The Program’s staff. “I try to focus on a question if I can. What is love, or What is sin? Who is God?” “I want them to feel like any answer they give is okay,” I noted that this approach of answering questions and creating a safe space for all kinds of answers certainly contributed to the robust discussion I observed in his class.

Having led the Bible study for six years, he shared many stories about how the participants experienced his class. When I asked if any of the women revealed grief or sorrow in class, he told me a story. One evening, he decided to share the circumstances of his birth with the women in The Program. When he was only several days old, his mother abandoned him at a local post office. Though a healthy family eventually adopted him, he revealed that feelings of grief and shame still surface occasionally.

In response to his story, another woman in the group shared that she had been abandoned at a Catholic orphanage in Eastern Europe. There, she was often locked in a basement overnight

as a means of discipline. The terror of those experiences haunted her adult life. She could not understand why God cared about the priests but not her. Shaken, the leader said, “Can I take you to a verse?” Weeping, she read, “Let the children come to me and do not hinder them; for it is to those the kingdom of heaven belongs.”⁷ “By this time, I was crying,” he said. “She was crying, and the other ladies were crying!” I noted that, in this story, both the leader and participants’ genuine expression of grief possibly led to the reframing of each of their stories in light of Jesus’ love.

Like the others, the Thursday evening Bible study showed several signs of the healing elements. Though not indicated on the surveys, I observed participants expressing themselves candidly in the group. Although they may have been told to refrain from interruption or debate by a misguided staff member, the participants were clearly undeterred. The participants gathered around the table, sharing thoughts, sometimes arguing, but showing signs of a safe, supportive community. Like the response to the first two Bible studies, many participants indicated that they were growing closer to God in this class. My next research question was whether these elements would be discernable in a relational activity that was not a traditional Bible study.

The exercise and the art class were added to the research list to discover if they provided spiritual care less traditionally. The exercise class took place on a Wednesday afternoon. The instructor began the class with a walking warm-up. She and several ladies walked together around the campus, which seemed promising in terms of opportunities for the women to share

⁷ Matt 19:14.

their stories and possibly reframe them. When the group returned to the formal exercise space, the instructor played some music and led them in stretches and calisthenics. Here, I noted some aspects of a supportive community. People were laughing and chatting. One woman helped another find her sneakers. A disagreement caused a minor disruption in the class. Overall, I observed evidence of a supportive community and some self-expression in the class.

Only three participants returned questionnaires regarding the exercise class. This may have been due to the disruption toward the end of the session. The highest-scored statements were, “This activity helps me think positively about myself” and “I feel strong emotions during this activity.” The strong emotions were listed in the comments as “happy” and “accomplished.” The lowest-scored statements were, “When I am participating in this activity, I ask challenging questions,” “I share my point of view during this activity,” and “People have pointed out my good qualities during this activity.” Each of these statements received a “never” score from all the participants.

Interestingly, in her interview with me, the exercise instructor also referenced the walking warm-up as an opportunity to connect. “I let them share,” she said. “It’s a good way to find out what is going on with them this week.” When I asked if she observed evidence of a supportive community, she noted that the women are sometimes collaborative but, at other times, combative. Anger was often expressed, and sometimes they refused to participate. She shared that, at one point, she had the opportunity to talk specifically with one of the ladies. In this conversation, the leader shared her story with the resident and her views of exercise as a healthy coping mechanism.

The observation, surveys, and the interview around the exercise class pointed to limited self-expression. Because the instructor mentioned her intention to let the women share, the limited expression could be due, at least in part, to a lack of rapport. Evidence of a supportive community was more prominent. All the chatting and laughter and even the occasional conflict pointed toward an experience of honesty and relative safety. The participants reported no relationship between the exercise class and their connection with God. However, the top-rated statements did reveal feelings of happiness and accomplishment. This may have been an example of spiritual care in a non-traditional setting. Incidentally, the volunteer exercise instructor resigned from her position shortly after the observation. This opens the possibility that a more meaningful experience might happen with a different instructor.

My final observation was the Thursday morning art class. For the past four years, a retired public school art teacher has been coming to The Program to meet with the women. When I entered the room for my observation, long folding tables were arranged in a square, with participants facing one another. The instructor introduced the day's planned activity. At that point, ladies were up, setting out art supplies and talking with each other. Someone turned on some music. One woman sat down with a new resident and helped her make a "Safe Box."⁸ The new resident customized the box with glitter and ribbons. She painted the stone and shared her work with the others for their support.

⁸ The "Safe Box" contained a worry doll and a safe stone. Each woman who entered The Program received one of these boxes at their first art class.

I noticed women helping each other with their projects, sharing art supplies, and even complaining together about their Case Managers. At one point, I observed a participant who quietly approached the teacher. “I tested positive,” she said and began to cry. The teacher said, “I noticed you were acting differently today.” Then, she pulled the crying woman to her and began to pray. The other participants continued their projects which led me to believe that these confessions and prayer happened regularly in art class.

At the close of the class, the women brought their projects to a table to dry, and I had the opportunity to see each of them. The projects featured a small board, roughly the size of half a piece of notebook paper. They painted the boards with different ways of describing themselves. “I am amazing,” said one. “I am colorful,” said another. “I am beloved.” “I am a child of God.” “I shine.” When the new participant did not know what to paint on her board, I watched the teacher say to her, “My new friend is Godly.”

Participants eagerly completed the surveys for this class. Unanimously, the highest-ranked statements for this class were, “I enjoy this activity” and “I feel hopeful during this activity.” Many other statements were very highly ranked. The free-form statements were positive as well. “This program fills my heart with joy,” one participant wrote. “I love the community,” wrote another. One woman wrote, “After class, the lady prays for us individually.” And finally, “I absolutely love this group. I forget my trauma here.”

Interviewing the art teacher was enlightening. Her goal for the class was two-fold. She wanted to “Tap the inner artist of each lady so that she can be free to know who she is.” Secondly, she hoped to see each woman’s “Personal relationship with Christ through her art.”

She told me that she used to begin class with a scripture and prayer. “Not anymore!” she said, explaining that she realized, years ago, that God had already planted the devotional in their hearts, pointing them to who they are as confident, expressive artists. It was their job, as a community, to discover it. She had one rule in art class. No one is allowed to say anything negative about someone else’s art. “It is an expression of their soul!”

She explained that the constant movement in the room is purposeful. “We move and mesh together, and I try to look every woman in the eye with a spirit of acceptance and love.” When I asked her if anyone had expressed anger in her class, she laughed heartily. “When not?” She noted that the women have the right to be angry but not at another participant’s expense. She also reported seeing shame in the class. She described a participant who always let her hair fall forward, making it impossible to see her face or distinguish her speech. One day, the teacher approached her. “I’m so glad you are here. Next week you will get your own sketchbook and pencil. Write your name in it and write what you see and feel.” Though there was no response at the time, the participant accepted the sketchbook. By the time of her graduation from The Program, she had created more art than anyone before her.

The art class differed significantly from the Bible studies, but many women were clearly finding healing through this activity. My observations of the class revealed women expressing themselves and their stories, not only through words, but in unexpected, creative ways. The reverence for and celebration of the “Safe Box” for a brand-new participant seemed unifying and spiritually significant. The painted boards reflected a new self-concept. Women, once abused and victimized, were now framing themselves as “Beautiful,” “Colorful,” and “Godly.”

The community created in this class was highly supportive, as the one rule prohibiting criticism was consistently upheld. However, what struck me most was the engagement with self and God through the expression of art in this affirming setting. There were no corrections, no warnings. The women were free to create, and in doing so, they saw themselves as children of God, shining daughters, colorful, creative beings.

When all five observed activities are combined, the most popular descriptive statements from the questionnaires were, “I enjoy participating in this activity.”, “I feel hopeful during this activity.” and “I have grown closer to God through this activity.” The lowest-ranked statement for the combined classes was, “During this activity, I share personal stories from my life.” This was closely followed by the statement, “When I am participating in this activity, I ask challenging questions.”

As laid out in the original research plan, I was looking for elements of spiritual care that have been shown to promote healing for those who have sustained a moral injury. The first element I was seeking was an atmosphere of expression, where a woman has the freedom to share her point of view, wrestle with her story, and possibly reframe her trauma in a way that is helpful to her. The fact that most participants indicated that they did not choose to share any personal views or histories in the five observed spiritual care initiatives is concerning.

Though not without merit, all three Bible studies were decidedly didactic. Participants may learn important stories about the mothers and fathers of the faith. However, the women in The Program functioned as receivers rather than contributors in every session. I observed many glazed-over looks and distracted straightening of papers in each of these Bible studies.

Observation of the non-traditional spiritual care programs, Exercise, and Art did not produce uniform results. I observed a strong sense of community in both classes. The women consistently rated both programs as enjoyable. However, the experience in the art class was much more enthusiastically rated than the exercise class.

Neither the art nor the exercise class featured a devotional, but the different responses to the questionnaire illustrate the difference between the two. For instance, number ten on the questionnaire asks participants to rate the statement, “I have grown closer to God through this activity.” The exercise class received a meager rating for question ten and one extra comment. “We did not focus on God.” In comparison, the art class received a very high rating for question ten with two extra comments. The first read, “I have grown closer to God through this activity because of the people who share their love of God with us during the classes.” The second comment read, “When I get frustrated, I feel like God whispers, ‘Slow down.’”

In light of these observations, questionnaires, and interviews, it is clear that The Program has room to grow in its provision of spiritual care to survivors of moral injury. The highly didactic nature of the Bible studies and even the exercise class may be a matter of defaulting to what has always been done in Sunday school or other small groups with peers who likely have not sustained the level of trauma seen at The Program. Additionally, the classes may be over-structured out of fear of retraumatizing women or finding themselves in a situation that feels out of control. Graham articulates the tenuous survivor experience, writing, “Post-Traumatic moral injury heightens the natural anxiety about living in the world. It brings past injuries into present

consciousness.”⁹ Even the most practiced spiritual care provider may be intimidated by the prospect of past trauma surfacing in the context of a small group Bible study or enrichment class.

There were hints of personal framing and reframing of the story in the Tuesday evening discussion of Esther. The women talked about Vashti's abandonment, Esther's possible trafficking, and Haman's violence. Interestingly, none of the above discussions were instigated by the Bible Study leaders. The women in The Program exhibited a readiness to discuss themes around trauma and trafficking. There may be more fear on the part of the leaders than the participants when it comes to grappling with their traumatic stories in light of the Biblical God.

The reluctance of the Bible study leaders to engage in themes of sexual trauma and trafficking may be a product of what people are hearing and what they are not hearing in their places of worship. In a 2019 Pew research study, 73% of Protestants reported that they have never heard their Pastors preach on sexual abuse or assault.¹⁰ Perhaps if the volunteer spiritual caregivers at The Program were equipped with a stronger theological framework for understanding sexual abuse and assault, they would be more likely to create an environment of expression, welcoming even the most harrowing of narratives.

⁹ Graham, *Moral Injury*, 91.

¹⁰ Claire Gecewicz and Gregory A. Smith, “Americans See Catholic Clergy Sex Abuse as an Ongoing Problem: Most U.S. Catholics say sexual misconduct is not unique to their church,” Pew Research Center, 2019, <https://www.pewforum.org/2019/06/11/americans-see-catholic-clergy-sex-abuse-as-an-ongoing-problem/> (accessed November 26, 2021).

Tellingly, in the art class, women told their stories through a medium different from a formal discussion group. Many seemed to be connecting to their spiritual beliefs, painting, “I am beloved.” “I am God's daughter.” These connections cannot be forced or hurried. However, when an atmosphere of expression, a supportive community, and spiritually healing rituals become the norm, rather than the exception, the chance of healing from moral injury increases.

This research methodology was designed to reveal the effectiveness of five spiritual care initiatives at The Program. The greatest strength of the methodology was that I was able to hear the actual voices of the women whom The Program is attempting to serve through the observations and surveys. Even reading their body language in the observations was helpful. Nonverbal cues, everything from dazed faces, bobbing sleepy-heads, and combative postures to smiling faces, tears, and a busy, enthusiastic gathering of art supplies, were evident in the observations and contributed to my understanding of the participants' experiences.

The interviews with the activity leaders were beneficial as well. Everybody seemed aware of their approach. Clearly, not everyone designed their class to be a discussion. As the leaders revealed in the interviews, many of the elements I observed were intentional and honed over years of practice. Each leader, except the exercise instructor, had a long history of faithful service at The Program. Each took the classes very seriously. Each showed evidence of genuine care for the women in The Program.

Weaknesses in the methodology cannot be discussed without including my potential biases. As I conducted my observations, I wrestled with the fact that my personal preference is participation over lecture and creativity over dogma. I honestly do not believe I could have sat

through each of those Bible studies week after week. However, the questionnaires were extremely helpful in controlling my biases. In each of the Bible studies, participants consistently noted that they had “Grown closer to God through this activity.” While the didactic Bible studies may not have featured women sharing their points of view or parts of their experience, they did foster community. Additionally, seeing the women gather with their Bibles and read the scripture created space for a spiritually healing ritual.

Finally, the lack of participation from The Program graduates was disappointing. Upon reflection, an interview or focus group may have been more effective than the questionnaires for this population. The two who answered the questionnaire identified their spiritual care as coming primarily from local churches. They did mention supportive relationships with other residents and the ability to discuss their trauma. This information is helpful but not entirely relevant because it does not pertain to the five classes selected for observation.

In conclusion, the data from this research study illuminate a critical deficiency in the services at The Program. While the five spiritual care programs I observed all displayed competence and commitment from the leaders, they lacked the skill to create an environment of expression needed for a person with moral injury to name, frame, question, and reframe her experience. In two of the Bible studies, participants were encouraged to speak up regarding the class material. However, for a woman to share her lived experience with the group required interruption or outright rebellion. The art class showed the most self-expression but even here, the women were expressing how they believe God sees them in the present. None of the initiatives invited participants to revisit past events. This is problematic because, as enacted in

the life of Sarai of Genesis, when unaddressed, moral injury often festers, resulting in further harm to oneself or others.

CHAPTER FIVE

CONCLUSIONS, IMPLICATIONS, AND SUGGESTIONS

Imagine inviting a new friend to a Sunday morning church service. As the two of you enter the sanctuary and walk toward an available pew, you notice a trail of tiny red droplets falling to the floor behind her. You see that she is pale, slightly hunched over, and clutching part of her blood-soaked blouse. What do you do? You may choose to put your arm around your new friend and guide her to a comfortable seat. You may assure her that God loves her and she is safe, presenting her with a Bible and a songbook. Unless she can guide you, however, to the location of her blood loss, unless you can then help her address her injury, she is in danger, preoccupied, and filled with pain.

The painful, shameful, demoralizing experience of moral injury has much to teach spiritual care providers as we increasingly encounter the complex wounds of trauma. Moral injury ruthlessly invades, not only the lives of military veterans, but also those who have survived sex trafficking.

Looking through the refined lens of moral injury reveals that sometimes the horror and grief of trauma can be accompanied by complicated feelings of shame, leading to behaviors of secrecy, isolation, and ethical confusion. Working to keep these feelings locked inside is a coping strategy that is ultimately harmful in its own right. Taking into consideration some of the written responses in this research like, “I don’t feel like this is the place to share stories of my life.” and, “We were told not to ask questions,” demonstrates that The Program has much work

to do in accompanying survivors through the essential steps of naming, framing, and reframing their painful experiences.

A survivor's reticence or inability to speak compounds the difficulty of their recovery. One's narrative must be understood and articulated if therapeutic reframing is to occur. Herman not only emphasizes the importance of expression, but also that of a supportive community, writing, "The core experiences of psychological trauma are disempowerment and disconnection from others. Recovery, therefore, is based upon the empowerment of the survivor and the creation of new connections. Recovery can take place only within the context of relationships. It cannot occur in isolation."¹ Robert Frost may have best described the importance of connection in the final stanza of his poem, *Revelation*:

But so, with all, from babes that play
At hide-and-seek to God afar,
So, all who hide too well away
Must speak and tell us where they are.²

As restorative anti-trafficking organizations like The Program begin to understand the struggle people with moral injury face in the aftermath of trauma, the terrain is daunting. One path that appears to be helpful leads toward a safe and spiritually nourishing environment. Three elements that contribute to this kind of healing environment were chosen to be measured in this

¹ Herman, *Trauma and Recovery*, 133.

² Robert Frost, *A Boy's Will* (New York: Henry Holt and Co, 1915).

study because of their potential to help coax people with moral injury out of their often-self-imposed exile and into a community of faith.

The first element studied was the evidence of an atmosphere of expression. Here, a person can safely develop the narrative of her life, as well as freely share her thoughts and opinions. The second element was a supportive community where she may be able to build connections with peers and volunteer leaders. The third and final element measured was the existence of meaningful rituals that offer opportunities for connection with God. The conclusions, implications, and opportunities identified in this chapter stem from research on the degree to which these three initiatives were present in the provision of spiritual care at The Program, a therapeutic residential community who serves women who have survived sex trafficking.

Five spiritual care programs were measured through observations, interviews, and anonymous questionnaires. These programs consisted of three Bible studies, as well as an art class and an exercise class. All classes were led by volunteers with a history of serving at The Program. Outcomes from the study are divided into two categories: positive findings and areas of consideration. Impact, implications, and opportunities for growth are also featured. Further research and programming suggestions round out the chapter by focusing not only on what has been learned about the study participants, but also on how organizations like The Program might respond with further research and enhanced spiritual care for sex trafficking survivors who have sustained moral injury. Further research opportunities around moral injury itself are also briefly examined.

The first of the positive findings was most apparent in the class observations and leader interviews. With the exception of the exercise class, recently instituted, the classes I observed were led by people with a long-term commitment to the women in The Program. Each of the leaders had been volunteering at the same time each week for a number of years. I believe their consistent presence communicated stability, safety, and a genuine concern for the ladies in The Program. At each class observation, the women gathered together in a special spot, different for each class, with their Bibles, exercise equipment, or art supplies in hand, prepared for the event. There never seemed to be any doubt that their teacher would arrive exactly on time. Considering the levels of betrayal experienced by the participants prior to coming to The Program, the consistent presence of each of the leaders signaled the existence of a supportive community. Interestingly, the exercise class was led by an individual who had only been volunteering for the past six months. This class had the lowest participation rate in both the class and the study questionnaires. Consistency clearly mattered to research participants.

Another supportive community sign was evidenced by the fellowship I witnessed in each of the spiritual care programs. From sharing multiple prayer requests to celebrating birthdays to the raucous laughter in an exercise class, the ladies seemed to enjoy being with each other. This supportive community was also observable in the way that both class leaders and participants seemed familiar with the day-to-day struggles each other faced. While the women may not have been sharing the depth of their experience in the classes I observed, they were making connections with each other and with the leaders.

Herman explains why the community is both compromised and critical for survivors of trauma. About disconnection as a result of traumatic experiences, Herman writes, “Traumatic events call into question basic human relationships. They breach the attachments of family, friendship, love, and community.”³ Observing the participants making positive connections with others was an indication that the classes played a part in their development, or redevelopment, of their ability to trust. The prayer requests portion of each class in particular, reflected a willingness on the part of the participants to share some of life’s difficulties without the fear of judgment or abandonment. Herman writes of the importance of a safe, communal environment, “The acutely traumatized person needs a safe refuge...Once the traumatized person has established a refuge, she can gradually progress toward a widening sphere of engagement in the world.”⁴

Other positive research findings pointed to an atmosphere of expression. The Bible study that took place around the kitchen table on Thursday evenings centered on the true definition of love. The leader of this class achieved more participation than the other two Bible studies. It was encouraging to see the women sharing their thoughts and ideas about love while the leader encouraged dialogue. Here, I witnessed healthy debate and what appeared to be some connection to personal experience. I concluded that when the leader was able to facilitate a discussion, most of the participants were willing to share their thoughts.

³ Herman, *Trauma and Recovery*, 51.

⁴ *Ibid.*, 162.

The comment one participant left regarding participants being discouraged from speaking up in class points to a communication breakdown, possibly between the Bible study leader and Program staff or participants and staff. Either way, this concern must be acknowledged and taken seriously if spiritual care initiatives have any hope of creating the environment of expression needed for overcoming moral injury.

The atmosphere of expression was most prominently displayed, however, in the art class. Here, participants were able to share a part of themselves through a medium more symbolic and arguably more profound than a written or spoken narrative. This creative class revealed evidence of deep reflection on the part of the participants. The women painted the ways they believed or hoped that God saw them, and they seemed to find the practice liberating and for some, joyful.

The particular art project I observed called to mind the many Biblical accounts of God giving individuals a new name as they move into a different chapter in life. Abram became Abraham, and eventually, Jacob became Israel. Even Sarai experienced a name change in preparation for the promised heir. Moral injury has been described as a soul wound that causes a disintegrated concept of identity. What is done negatively affects understanding of who one is. Therefore, the art project not only encouraged an atmosphere of expression but also the possibility of a new understanding of identity in the eyes of God. In her masterful administration of the art program, the leader may have unknowingly created a life-affirming, God-connecting ritual.

The positive findings around rituals that offer opportunities for connection with God were at once simple and yet more difficult to quantify than the other two criteria, an atmosphere of

expression and a supportive community. On the questionnaires, participants consistently rated “Connection with God” very highly when commenting on Bible studies. However, in my observation, participant ability to contribute to the conversation in most of the Bible studies was severely limited. Most of the time, participants had to interrupt the leader if they had a comment or question. Though the women may have enjoyed each Bible study, they reported little to no connection of the Biblical material to their own experience.

Connection with God through rituals left me with more questions than answers. Some further questions include: What does connection with God mean to the participants in The Program? What does connection feel or look like? Is it different for each woman or are there common threads throughout the community? Though I tried to pursue these answers through the questionnaires, I was limited. The fact that participants indicated that they grew closer to God through Bible studies was a positive finding. However, I find myself curious, wondering if the participants checked the “I grew closer to God” box simply because they were rating a Bible study. Was their response an automatic response or a thoughtful, reasoned one? This concern leads me to some areas of consideration.

Three areas of consideration surfaced in response to the research. The first consideration is regarding the women’s experience in the observed programs. Moral injury sits in the soul, creating massive shame, isolation, and hopelessness. Spiritual care can facilitate relief and comfort, but only if the connection can be made to the injury. Are the women in The Program connecting their stories to what they are hearing in Bible studies, exercise, or art classes? Are

participants able to reveal the source of their pain without fear of rejection or, arguably worse, correction?

In the Bible studies I observed at The Program, I saw little uncovering of wounds, little revelation of pain, little anger, and little grief. While these kinds of emotional demonstrations must never be the product of pressure or manipulation on the part of leaders, their conspicuous absence, particularly in Bible studies, is something to consider. It is very likely that participants are more comfortable wrestling with their moral injury in the individual therapy space. However, if this is so, there is still cause for concern. If therapy is viewed as the concrete way to deal with the pain while Bible study is viewed as a nice time to sit together and talk about Jesus, we have failed as spiritual care providers. If survivors are not connecting to the God that sees their suffering and can be accessed in the middle of the pain, shame, and confusion of moral injury, the wound will fester.

The theological and historical chapter of this thesis reminds us that silence has consequences. There is no scriptural record of Sarai reflecting on the deception that led her into the home of the man who was not her husband. Either Sarai never spoke of the incident, or her words were deemed unworthy of recording. If Sarai was indeed able to speak, no one appeared to listen. Her subsequent abuse of Hagar was a tragic medium for Sarai/Sarah to express her pain and frustration.

And so it is in the world of sex trafficking survivors. Experts found that approximately 41% of sex trafficking in 2017 was familial.⁵ Unfortunately, many wounded, trafficked parents are wounding and trafficking their children. Therefore, the unaddressed moral injury found in the sex trade contributes to a cycle of victims hurting victims that perpetuates, generation after generation.

Elizabeth L. Jeglic has found that up to 35% of current sex traffickers are women. Noting the different levels of power in this criminal enterprise, Jeglic identifies three primary roles women tend to hold. The first role is that of a “Recruiter” who seeks out vulnerable people, luring them into the system. This includes the grooming process that may entail a fraudulent friendship, job opportunity, or romantic partner. The second role is the “Supporter,” who manages the operations, such as payment, transportation, and lodging of trafficked individuals. The third role is the “Bottom Girl.” While “Bottom Girls” have many of the same responsibilities as the “Recruiter” and “Supporter,” they do not receive the same reprieve from sex work as the other positions tend to have. Rather than managing systems from the outside, “Bottom Girls” are still being sexually exploited.⁶

⁵ Human Trafficking Expert Consultant Network, “Navigating the Unique Complexities in Familial Trafficking, The United States Department of State: Office to Monitor and Combat Trafficking in Persons, 2021, Navigating-the-Unique-Complexities-in-Familial-Trafficking_LOW.pdf (state.gov) (accessed July 1, 2022).

⁶ Elizabeth L. Jeglic, “Understanding the Role of Women in Sex Trafficking: Women are involved in up to 35 percent of domestic sex trafficking operations,” *Psychology Today*, 2021, <https://www.psychologytoday.com/us/blog/protecting-children-sexual-abuse/202112/understanding-the-role-women-in-sex-trafficking> (accessed July 1, 2022).

Several women at The Program have reported having had the role of “Bottom Girl.” They share that this is a highly coveted position. Anecdotally, women who have identified with the role of “Bottom Girl” tend to exit The Program much earlier than the general population. I suspect that this group struggles with the compounded moral injury of personal sexual exploitation as well as sexual perpetration against others at a level that The Program has yet to adequately understand or address.

Daunting though the challenge may be, a spiritual care provider who is able to create a safe place in the acknowledged presence of God offers the survivor an opportunity to wrestle, narrate, frame, reframe, and bring her pain into the light of day. This is a holy undertaking but one, in light of this research, not easily accomplished. The challenge of the spiritual care provider leads to several opportunities for growth identified through the study.

The first opportunity for growth is ongoing, relevant training for volunteers at The Program. Because spiritual care initiatives at The Program are performed exclusively by volunteers, there is great diversity from one spiritual care initiative to another. The participant questionnaires reflect that this diversity is not necessarily a deficit, as different approaches seem to appeal to different people. However, there are two critical areas identified through the research that can be greatly improved through intentional training without compromising the diversity of the leaders and their classes.

The first aspect of training pertains to a trauma-informed approach to Biblical content. The second area in need of training is skill development and practice in group facilitation. Improvement in either of these areas has the potential to deepen the provision of care at The Program by engaging program participants more effectively. However, each area also has challenges that may render change difficult.

A trauma-informed approach to content for the Bible studies at The Program is two-fold. First, it is about understanding the nature of trauma and the effects it can have on survivors of sex trafficking. All volunteers receive basic trauma information at their general onboarding training. However, spiritual care providers would greatly benefit from a more challenging training curriculum.

Equipping spiritual care volunteers with an understanding of moral injury would be helpful in a number of ways. First, moral injury helps debunk the angel/demon mythology around survivors of trauma. In other words, caregivers are encouraged to move beyond the dichotomy that views a survivor as a completely innocent victim or, on the other polarity, an irresponsible, deserving criminal unsuitable for rehabilitation. Moral injury helps us see the nuances of the celebrated war hero with the hidden secret and the trafficking survivor with pervasive shame.

A spiritual care provider with an understanding of trauma-induced moral injury may be more likely to recognize impaired social interaction and shame-based behavior. Empathetic leaders may alter the way their spiritual care program is conducted. Appreciating the fact that any woman at The Program may be struggling with shame, regret, or moral confusion, in

addition to the aftereffects of violence and abuse, can lay the groundwork for the radical acceptance and support she desperately needs. An introduction to the concept of moral injury and the healing potential of connection with God and others could be a powerful means of building knowledge, empathy, and community.

Additionally, trauma-informed content would be improved if group leaders were equipped to focus, at least occasionally, on scripture stories that feature events and people likely touched by moral injury. Biblical examples of sexual assault, abuse, betrayal, and forgiveness abound in the Old and New Testaments. These stories of wounding, injustice, recovery, and reconciliation in the lives of imperfect people are fertile ground for exploring survival in a world where God reigns but trauma pervades.

In one of the observed Bible studies, the women in The Program identified with the experience of Esther. They recognized that this Biblical story featured a woman who was forced into a situation not unfamiliar to their own. If the leaders of the study had been equipped with an understanding of moral injury and the healing elements of narrative sharing, perhaps they would have facilitated a deeper discussion about what their participants were seeing. As it was, the leaders acknowledged the observations, which was helpful, but quickly moved from the topic, a missed opportunity.

The example of the story of Sarai and Hagar featured in the Biblical/Theological portion of this thesis is another resonant tale that may be worth exploring. Both Sarai and Hagar suffered unjustly. Deprived of an atmosphere of expression and possibly a supportive community, Sarai

responded to her moral injury by horrendously abusing Hagar. Miraculously, both Sarai/Sarah and Hagar also encountered God, and both received a promised child.

With the right training, spiritual care providers may be able to lead participants through resonant, provocative scripture stories, like the one we find in Genesis and throughout the Bible. Examples of potentially resonant stories in the Hebrew text include the aforementioned Esther, Rahab, Miriam, and the wife of Lot, to name only a few. If survivors are able to connect these stories to their own experiences in a way that facilitates healing and an awareness of God, a renewal of faith, hope, and love may occur.

Unfortunately, there is little evidence of these kinds of personal story/Bible story connections in the programs I observed. After interviewing each of the class leaders, I believe that one barrier that the volunteers had regarding adding some of the more difficult stories in scripture to their teaching schedule was a reluctance to upset the participants. In response to the interview questions about emotions in class, almost all the leaders acknowledged that women had become angry in their classes. However, not a single leader talked about demonstrations of grief. Clearly, the women have much to lament, and spiritual practices, including the reading of the Bible, can be a valuable tool for facilitating healthy grieving. The leaders, however, have not been able to create an environment conducive to the expression of strong emotions.

For instance, in one of the interviews, a leader shared a time that a participant expressed her anger toward God. The leader responded with an affirmation that being angry with God is

okay but reminded the participant that, sometimes, we are angry with our circumstances.⁷ While I appreciated the leader's affirmation, I found myself internally responding, "But what if she is angry not only with her circumstances but also with God?" A moral injury-informed response to the participant may have been something like, "Would you like to say more about being angry with God?" My suggested approach may bring some negative emotions to light. It may also compromise a well-planned agenda. However, a flexible approach to spiritual care may help uncover what desperately needs to be said.

If the spiritual care leaders are indeed concerned about upsetting the women at The Program, this is understandable. The Program participants have experienced unimaginable trauma. However, input from the Director of Trauma Therapy, or another trained mental health clinician, may help clarify the boundaries between spiritual care and clinical counseling.

Cultivating a supportive community includes opening up to the hard discussions in life as well as the light and festive. If women are going to connect what they are learning in Bible study with their actual experience, present and past, there will be a degree of discomfort for both student and teacher. Ongoing training aimed at helping volunteers understand that the demonstration of negative emotion does not a failed spiritual care program make may be the catalyst to the formation of an environment of expression so needed at The Program.

The second recommended volunteer training may be less intimidating and even a little bit more fun. A study of basic group dynamics, discussion facilitation, and active listening skills

⁷ My paraphrase.

would be extremely beneficial for the group leaders. The interaction between teacher and participant showed room for improvement in each of the spiritual programs, with the exception of the art class, which had a completely different group dynamic plan. Helping participants wrestle with their own understanding of God challenges leaders to contend with varying theologies that may have always been present but remained unspoken. An environment of expression and a supportive community will produce robust, productive discussions leading to authentic connections with God and each other.

One approach to small groups that is intentionally collaborative can be found in James Bryan Smith and Lynda Graybeal's *Spiritual Formation Workbook*.⁸ Their workbook encourages groups to seek a balance of knowledge and mutual encouragement and accountability.⁹ As in traditional Bible studies, participants experience Biblical stories and concepts. However, discussion questions are thought out, prepared, and interspersed strategically throughout the session. The goal is not simply to learn the material but to study, learn about, and love the people in the group. One very simple contemplative question like, "What impresses you most about this passage?"¹⁰ may open the door to real-life connections for participants.

⁸ James Bryan Smith and Lynda Graybeal, *Spiritual Formation Workbook* (New York: HarperCollins, 1999).

⁹ *Ibid.*, 12.

¹⁰ *Ibid.*, 32.

Interestingly, Smith and Graybeal recommend rotating the “leader” role from participant to participant throughout the duration of the group. A skilled facilitator at The Program may be able to partner with participants in leading. This approach may be an effective way to engage, empower and embolden participants. At the close of their proposed sessions, the authors suggest giving participants a menu of homework options. For instance, participants may choose to write out their own prayer, take a quiet walk outside, read a written prayer once a day, or create their own assignment. Participants are invited to report on their experiences the following week.

The authors explain their goals for spiritual formation groups writing, “Within this flexible format, members are reminded of their task, enabled to hear from one another, and empowered to share, plan, and dream with each other. It is within this framework that the balance, the knowledge, and the encouragement and accountability are nurtured.”¹¹ By intentionally prioritizing group interaction, this model moves the balance of power from a vertical “teaching” mode to a horizontal learning-together style, which may help create the environment of expression and communal support needed for people struggling with moral injury.

While strategic, ongoing training for volunteer leaders would have a positive impact on the spiritual care initiatives at The Program, there are barriers to the training as well. In the interviews with each of the leaders, there was little interest in modifying their classes. When I probed about participant contribution to the discussion, the leaders had little to say. On the

¹¹ Ibid., 12.

whole, I observed more of a teach/learn model than a discussion/discernment style. Of the three Bible studies I observed, one is led by an influential board member and another by the wife of the board Chairman. The implicit pressure to acquiesce to board expectations, whether consciously or subconsciously, may discourage a staff person from implementing substantive training or honest feedback.

In addition to volunteer training, The Program can continue to grow in its provision of an atmosphere of expression and a supportive community in another concrete way. Just as the participants in the spiritual care program need an atmosphere of expression and a supportive community to begin to articulate their personal experiences in a way that is healing, the women also benefit from sharing their thoughts, opinions, and experiences with the management of The Program. Observing the spiritual care programs, interviewing the leaders, and reading the resident questionnaires proved enlightening on many levels.

The Program would greatly benefit from making observations, interviews, and other means of gathering feedback a regular part of the resident experience. Building ongoing feedback collection does not need to be difficult but may be time-consuming. Even so, I am convinced that it is worth the effort and will contribute greatly to the success of The Program by enhancing the experience of the participants.

Another interesting way of gathering feedback from the program participants is the establishment of a graduate council. This research project highlighted how difficult it was to connect with Program graduates living all over the country. An intentional establishment of a small group of graduates committed to sharing feedback to improve The Program, could become

an efficient, effective way of learning if we are helping people heal, connect with others, and experience spiritual growth.

The presence of meaningful rituals for spiritual connections overwhelmingly presented the most opportunity for growth. My observation of the art class convincingly demonstrated that connecting with God outside the traditional small Bible study group model can be helpful and resonant for many of The Program’s participants. Other creative means of connection similar to art, such as musical expression, creative writing, and dance, are certainly worthy of exploration. Jane E. Vennard and Stephen D. Bryant explore nine different ways of approaching God in prayer, including contemplative prayer, Lectio Divina, praying by gaze, with music, with others, and with our bodies.¹² While each of these prayer modalities (and many others) are worthy of exploration, prayer in chorus with the body may hold significant healing potential for sex trafficking survivors.

Graham notes one of the hallmarks of moral injury is what he calls a “questing body.”¹³ Describing a soldier on active duty who has taken the life of another person, Graham details the disconnect between the body and the soul that occurs. This disconnect can result in disgust for one’s physical form and the neglect of self-care. Even then, there is a deep need for healing. Graham writes, “Morally injured persons are questing for healed bodies, the restoration of bodily

¹² Jane E. Vennard, and Stephen D. Bryant, *The Way of Prayer: Participants Book* (Nashville: The Upper Room, 2007).

¹³ Graham, *Moral Injury*, 85-86.

integrity, and the reunification of body and soul.”¹⁴ Survivors of sex trafficking have experienced repeated trauma to their bodies. Therefore, their disconnect with their bodies can be profound. Spiritual practices that incorporate the body are something spiritual care providers may want to consider carefully.

Vennard and Bryant remind us that many people feel more comfortable praying while engaging in movements, such as walking or swimming. One may create a prayer dance that articulates deep connection without the need for a spoken word, while another may pray as a part of her daily work, in the tradition of Brother Lawrence.¹⁵ Vennard describes a meaningful experience of both personal and communal prayer by means of a labyrinth. This ancient, often circular maze of lines with unexpected openings and closings has proven to be a spiritual catalyst for many, generation after generation. After meditatively walking through a labyrinth at Grace Cathedral in San Francisco, California, Vennard reflects on what she saw in the others concurrently walking the maze.

I sat in awe of the beautiful, flowing, vibrant image of the body of Christ that was before me. I was witnessing a community in prayer and action. Everyone was walking the same path but traveling with the freedom to walk as they wished. No one was above or below, ahead, or behind. Everyone was simply moving with and toward God, and with each other. “An image of the church,” I breathed. “A healed and whole and holy church.”¹⁶

¹⁴ Ibid., 92.

¹⁵ Vennard and Bryant, *The Way of Prayer*, 71-74.

¹⁶ Jane Vennard, *Praying with Body and Soul: A Way to Intimacy with God* (Minneapolis: Fortress Press, 1998), 126.

Another way of experiencing a connection with God can be found in the practice of lament. The Psalmist has written, “My soul melts away for sorrow; strengthen me according to your word.”¹⁷ The prophet exclaimed, “Woe is me! I am lost, for I am a man of unclean lips, and I live among a people of unclean lips; yet my eyes have seen the King, the Lord of hosts!”¹⁸ The call to lament reads, “Arise, cry out in the night, at the beginning of the watches! Pour out your heart like water before the presence of the Lord!”¹⁹ Gafney finds that the expression of lament was performed by many women throughout the Hebrew scriptures.²⁰ Gafney highlights the women who gathered yearly to grieve the short life of the daughter of Jephthah,²¹ Rachel weeping for her children,²² and the women in the book of Jeremiah who were charged with teaching a lament to their daughters.²³

The experience of lament is universal. Anyone who has breathed air has known trouble and distress. Everyone grieves. Strangely, the purposeful articulation of past sufferings, current

¹⁷ Ps 119: 28.

¹⁸ Isa 6:5

¹⁹ Lam 2:19a.

²⁰ Wilda C. Gafney, *Daughters of Miriam: Women Prophets in Ancient Israel* (Minneapolis: Fortress Press, 2008), 121.

²¹ Judg 11:40.

²² Jer 31:15.

²³ Jer 9:20-22.

confusion, and fear of the future is rarely modeled in a way that acknowledges the presence of God in the middle of the mess. Brueggemann shares his theology of lament as well as the detriment of its neglect, writing:

One loss that results from the absence of lament is the loss of genuine covenant interaction, since the second party to the covenant (the petitioner) has become voiceless or has a voice that is permitted to speak only praise and doxology. Where lament is absent, covenant comes into being only as a celebration of joy and well-being. Or in political categories, the greater party is surrounded by subjects who are always “yes-men and women” from whom “never is heard a discouraging word.” Since such a celebrative, consenting silence does not square with reality, covenant minus lament is finally a practice of denial, cover-up, and pretense, which sanctions social control.²⁴

Brueggemann’s description of the practice of denial, cover-up, pretense, and social control unfortunately, brings to mind the nearly voiceless acquiescence I observed at the Bible studies. A spiritual practice of lament that integrates experiences of complaint, confession, questioning, and internally driven expressions of trust and praise is not only potentially transformative but also Christ-like. The Savior is described as, “In his anguish he prayed more earnestly, and his sweat became like great drops of blood falling down on the ground.”²⁵

A ceremony of lament has never been conducted at The Program. This is likely due to concerns around triggering traumatic memories or provoking hyper-emotional responses. Still, with care and collaboration between spiritual care provider and therapist, a sympathetic reading of certain Biblical accounts and/or The Psalms, Lamentations, or gospels could prove very

²⁴ Walter Brueggemann, “The Costly Loss of Lament,” in *The Psalms: The Life of Faith*, ed. Patrick D. Miller (Minneapolis: Fortress, 1995), 98-111.

²⁵ Luke 22:44.

helpful. A lament practice could provide participants with a framework for grieving their deepest hurts in the context of a religious service where the presence of God is acknowledged.

Such a service could be arranged around the church calendar, possibly during the Lenten season. Other opportunities to develop a practice of lament might be through a group study on lament or a service during Human Trafficking Awareness Month. There may be another special day of remembrance that would be appropriate.

Another suggestion for opportunities to connect with God is in the development of sacred spaces. The recent construction of a campus chapel has proven to be a helpful place of prayer for some women in the program. A simple garden, where one could tend and admire God's creation, could also be a place of connection. For instance, "Hagar's Bench" under a shade tree could invite someone to invoke the God who sees her.

Sue Monk Kidd presents a compellingly creative exploration of trauma survival in her novel, *The Secret Life of Bees*.²⁶ In the book, one character constructs a personal altar of stones at the edge of the family homestead. Throughout the twists and turns of the story, she returns to her sacred structure to grieve the pain of her past as well as her present in an attempt to make peace with her anguish. Eventually, the other women in the story adopt the practice and begin tucking small notes of lament into the crevices between the stones. This homemade wailing wall becomes an integral part of their spiritual practice as they process cruelty, injustice, abuse, and

²⁶ Sue Monk Kidd, *The Secret Life of Bees* (New York: Penguin Books) 2003.

death.²⁷ The wall becomes a symbol of hope and the possibility of healing. Perhaps a sacred structure where similar hurts, regrets, and prayers are expressed could facilitate personal release and refuge and possibly nurture a budding faith at The Program. While the practice of lament is certainly a consideration for the women at The Program, it is hardly the only ritual practice that may facilitate a connection with God.

Roy M. Oswald and Jean Morris Trumbauer write about the value of ritual as a means of working through change.²⁸ Their book utilizes William Bridges' three-stage Model of Transitions as a clear call for transformative rituals.²⁹ They explain that Bridges' first stage of life transition is an actual, physical change. A person may move to a new city, change careers, or commit to a new life partner.

Bridges' second stage, however, is more of a neutral zone. Here, people begin to wrestle with, seek to understand, and accept the change they have experienced. Stage one is a physical experience, while phase two is internal. Oswald and Trumbauer observe that only when people have worked through the painstakingly slow process of the neutral zone, where regret, anger, confusion, fear, and hope may all exist, sometimes simultaneously, only then can the third stage, that of transformation, occur.

²⁷ Ibid., 105-106.

²⁸ Roy M. Oswald and Jean Morris Trumbauer, *Transforming Rituals: Daily Practices for Changing Lives* (Durham, The Alban Institute) 1999.

²⁹ William Bridges, *Managing Transitions: Making the Most Out of Change* (Reading: Perseus Books, 1991), 3f.

Ritual, they contend, can be incredibly helpful at every stage. They note, however, that while our rituals around beginnings (baptisms) and endings (funerals) are strong, it is during the time in the liminal space that we also need transforming rituals. They write, “People involved in the neutral zone, long periods of confusion, fear, depression, hopelessness, or lack of movement, also need special support...It is less common to engage in a ritual that acknowledges the period we most hate to experience, the in-between times when nothing seems to bring meaning.³⁰ People working through a residential recovery program spend many days and nights in this neutral, slow-moving progression.

Oswald and Trumbauer’s ideas around change speak to the experience of the women in The Program. When the women arrive at The Program, massive environmental, social, and physical changes have taken place. As the ladies experience spiritual care programming, they are surely working through the ramifications of their life changes. Rituals to honor the experience of adjustment would be a powerful way for them to process strong emotions. Oswald and Trumbauer provide beautiful examples of rituals that help people acknowledge, honor, and adjust to change. Several of their suggestions are geared toward people who have experienced trauma. These ritual services include the Remembrance of a Stillborn Child or Miscarriage, a Service of Word and Prayer After School Violence, and a Service of Healing. Unfortunately, the authors provide no examples of ritual services for survivors of sexual assault or human trafficking.

³⁰ Oswald and Trumbauer, *Transforming Rituals*, 33.

Colleen Galambos takes on this group of individuals, writing about two distinct rituals for survivors of rape.³¹ The first, a candlelight vigil, is a way for survivors to acknowledge their individual experiences while taking in the presence of those with lit candles around them who may have experienced similar trauma. This relational ritual may be a powerful way to build the supportive community that is dearly needed by survivors of moral injury.

The second ritual, developed by Galambos, is the “Candle Service.” This ritual can be performed by the survivor in solitude or with others. Two candles are needed, one symbolizing darkness and the other light. She begins by lighting the candle of suffering. As the candle flickers, she recalls whatever parts of her story she chooses. She may speak her narrative, or she may sing, scream, weep, or none of the above. Her response is her own. The object is to intentionally remember sad, difficult, or shameful traumatic events.

When she is ready, she ignites the candle of light (goodness) and begins to call to mind any good thing; something she has learned, a friend made, a moment of levity, a kernel of faith. She focuses on the good and finds what she is able to embrace. Both candles continue to burn, symbolizing the coexistence of both sorrow and joy. In this moment, she is alive to both. When ready, she extinguishes the candles, repeating the ritual as often as she chooses.

Galambos’ candle service is designed to empower people who have experienced sexual assault. The survivor chooses to light the candles. She expresses her narrative and emotion in her

³¹ Colleen Galambos, “Healing Rituals for Survivors of Rape,” *Advances in Social Work* Vol.2. No.1 (Spring 2001) 65-74.

own way. She determines who is present and when the service comes to an end. If invited into this ritual experience, a wise spiritual care provider may observe that agency over her story is exactly what is needed. Furthermore, the experience may lead to fruitful conversations around Biblical themes of good, evil, and the ever-present God.

Attentive spiritual care for survivors of moral injury will encourage such expression while continually exploring creative ways to connect to one's soul and to God. The story of Sarai and Hagar has many resonant points for survivors of sex trafficking who incur moral injury. In Sarai/Sarah's story, we see a complicated relationship with a marriage partner, infertility, a breach of trust, abandonment, silence, violence enacted on another, and resolution. In Hagar's story, we contend with slavery, abuse, rejection, survival, and connection with God. In Sarai/Sarah, we see signs of moral injury. In the abuse of Hagar, we see the consequence of Sarai/Sarah's pain and ethical confusion. Engaging this story with a group of women who have suffered in similar ways could be very helpful.

There is much that survivors of sex trafficking can teach us about survival, resilience, growth, and spiritual recovery. Further research into moral injury and the experience of a survivor of sex trafficking would be very helpful. For instance, how does moral injury affect their relationships? How is it addressed in therapy? Would survivors themselves benefit from a course on moral injury?

Further study is also needed around the organizations who serve this population. What mechanisms of participant feedback are being utilized, and what influence is the feedback

having? If the organization is attempting to provide spiritual care, is this best offered by professionals, volunteers, or both?

The study of moral injury itself has begun to move beyond the realm of the military veteran into the experiences of other groups who have endured trauma. In a recent study of 400 healthcare workers during the height of the COVID-19 pandemic, 73% reported experiencing a morally injurious event.³² As the understanding of moral injury expands, spiritual care providers may consider practices that provide help and healing, not only to military veterans or victims of sexual assault, but to health care workers, law enforcement officers, teachers, and many others who may be struggling in the aftermath of traumatizing events.

In conclusion, there is no doubt that providing spiritual care to survivors of sex trafficking is challenging work. Moral injury has rendered most survivors isolated and silent. Many never had the chance to use their voices. The continual intrusion of shame has made them adept at hiding their feelings. Therefore, they may be unlikely to share their thoughts.

Other times, survivors who have sustained a moral injury have developed a way to be disconnected from their trauma and ongoing pain. This coping mechanism makes it difficult to connect the stories they hear in Bible study with their own lives. But the injury needs to be brought into the light for healing. Larry Kent Graham reminds us, “The collaborative process of

³² Chloe J. Brennan, “Study Highlights Extent of Moral Injuries Faced by Health Care Workers During Pandemic,” *Medical Press*, 2022, Study highlights extent of moral injuries faced by health care workers during pandemic (medicalxpress.com) (accessed July 20, 2022).

naming is also a part of living out the co-humanity of our divine creation: it is not good that men and women should be alone but that we should face our perils and possibilities together.”³³

Naming requires a level of trust in one’s spiritual care provider, peers, and ultimately in God. The word of God is a good, helpful, beautiful thing. Healing may be found when a survivor is able to connect what she hears and reads to her experience. The observations at The Program confirmed that continued preaching, ordering, telling, or demanding is counterproductive. She who has held her thoughts inside for years in fear of what she might find, needs to know that if she speaks, she will be accepted. She who has been silenced must be encouraged to express herself.

God models this environment of expression and support. God heard Sarai/Sarah when she laughed at the idea of giving birth to Isaac. God saw Hagar when she was alone in the desert, facing not only her own death but that of her son. Two women were traumatized. God listened, observed, and connected. May we do likewise.

³³ Graham, *Moral Injury*, 110.

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APPENDICES

APPENDIX A
IRB APPROVAL

APPENDIX A
IRB APPROVAL



Wednesday, May 5, 2021

Debra Haralson
3001 Mercer University Drive
Other
Atlanta, GA 30341

RE: Moral Injury and Human Trafficking (H2105085)

Dear Haralson:

On behalf of Mercer University's Institutional Review Board for Human Subjects Research, your application submitted on 30-Apr-2021 for the above referenced protocol was reviewed in accordance with the 2018 Federal Regulations [21 CFR 56.110\(b\)](#) and [45 CFR 46.110\(b\)](#) (for expedited review) and was approved under category(ies) 7 per 63 FR 60364.

Your application was approved for one year of study on 05-May-2021. The protocol expires on 03-May-2022. If the study continues beyond one year, it must be re-evaluated by the IRB Committee.

Item(s) Approved:

The Wellhouse is a restorative, residential program for adult women who have survived sex trafficking. This project will answer one primary question: What compromises a meaningful spiritual care program for survivors?

NOTE: You **MUST** report to the committee when the protocol is initiated. Report to the Committee immediately any changes in the protocol or consent form and **ALL** accidents, injuries, and serious or unexpected adverse events that occur to your subjects as a result of this study.

We at the IRB and the Office of Research Compliance are dedicated to providing the best service to our research community. As one of our investigators, we value your feedback and ask that you please take a moment to complete our [Satisfaction Survey](#) and help us to improve the quality of our service.

It has been a pleasure working with you and we wish you much success with your project! If you need any further assistance, please feel free to contact our office.

Respectfully,

Ava Chambliss-Richardson, Ph.D., CIP, CIM.
Director of Research Compliance
Member
Institutional Review Board

"Mercer University has adopted and agrees to conduct its clinical research studies in accordance with the International Conference on Harmonization's (ICH) Guidelines for Good Clinical Practice."

Mercer University IRB & Office of Research Compliance
Phone: 478-301-4101 | Email: ORC_Mercer@Mercer_Edu | Fax: 478-301-2329
1501 Mercer University Drive, Macon, Georgia 31207-0001

APPENDIX B
INFORMED CONSENT



McAfee School of Theology

Moral Injury and Human Trafficking

Informed Consent

You are being asked to participate in a research study. Before you give your consent to volunteer, it is important that you read the following information and ask as many questions as necessary to be sure you understand what you will be asked to do.

Investigators

Debra Haralson, BA, MTS, DMIN Candidate Mercer University, McAfee School of Theology
3001 Mercer University Drive, Atlanta, GA 30341, (205)577-9236

Dr. David Garber, Ph.D., Mercer University, McAfee School of Theology
3001 Mercer University Drive Atlanta, GA 30341 (205)577-9236

Purpose of the Research

This research study is designed to identify what aspects of The WellHouse spiritual care initiatives are helpful to program participants .

The data from this research will be used to develop recommendations for a long range spiritual care plan for The Well House.

As a current Doctor of Ministry student, this study will assist my understanding of spiritual care in residential settings.

Procedures

If you volunteer to participate in this study, you will be asked to participate in either a series of observations, questionnaires or interviews about the helpfulness of several programs at The Well House (Bible Studies, Art Class and Exercise Class.) Your participation will take approximately one hour per questionnaire set, one hour per observation or one hour per interview.

Potential Risks or Discomforts

While there are no foreseeable risks for this study, if you become inconvenienced or overwhelmed by any of the questions, questionnaires or interviews in this study, you may discontinue your participation at any time.

Potential Benefits of the Research

If you choose to participate in this study, you will have the opportunity to share your views on Well House programming in a way that could impact future programs at The Well House and in other similar organizations.

Confidentiality and Data Storage

All questionnaires are designed to be anonymous. You will not be asked to share your name. Completed questionnaires will be scanned into a secure file immediately after being collected. Data from the questionnaires will be stored on a password protected data base and available only to the principle investigator in this study, Debby Haralson and Faculty

January 2017
Mercer University

Office of Research Compliance

<http://orc.mercer.edu/irb/>
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Page 13 of 35

Mercer University IRB
Approval Date: 05/05/2021
Protocol Expiration Date: 05/04/2022

Advisor, Dr. David Garber.

Interviews will be conducted individually with volunteer leaders. Interviews will be recorded and transcribed. Though names of individuals interviewed will not be included in the final report, there is a chance that readers will be able to discern your identity due to your volunteer position.

The completed report and data will be stored at Mercer University for a minimum of three years after completion of the study.

Participation and Withdrawal

Your participation in this research study is voluntary. As a participant, you may refuse to participate at any time before the completion of the anonymous questionnaire. To withdraw from the study please contact Debby Haralson at (800) 991-9937.

Questions about the Research

If you have any questions about the research, please speak with Debra Haralson at debra.haralson@live.mercer.edu or (800) 991-9937 Dr. David Garber at garber-dg@mercer.edu or (678) 547-6413

In Case of Injury

It is unlikely that participation in this project will result in harm to subjects. If an injury does occur, you may seek help at the UAB at The Well House Clinic or a local emergency room. All expenses associated with care will be the responsibility of the participant and their insurance.

Reasons for Exclusion from this Study

All participation in this study is voluntary. This project has been reviewed and approved by Mercer University's IRB. If you believe there is any infringement upon your rights as a research subject, you may contact the IRB Chair, at (478) 301-4101. You have been given the opportunity to ask questions and these have been answered to your satisfaction. Your signature below indicates your voluntary agreement to participate in this research study.

Research Participant Name (Print)

Name of Person Obtaining Consent (Print)

Research Participant Signature

Person Obtaining Consent Signature

Mercer University IRB
Approval Date: 05/05/2021
Protocol Expiration Date: 05/04/2022

Data Collection Instrument A

January 2017
Mercer University
Office of Research Compliance

<http://uorc.mercer.edu/irb/>
Phone (478) 301-4101
Fax (478) 301-2329

Page 14 of 35

APPENDIX C
OBSERVATIONAL NOTES TEMPLATE

APPENDIX C

OBSERVATIONAL NOTES TEMPLATE

Data Collection Instrument A

Observation Notes P.1

Confidential. To be completed by researcher only.

Date:

Day: M T W R F S S

Time (i.e. 2:00 PM – 3:00 PM) _____

Type: Bible Study ____ Art ____ Exercise ____

Facilitator/s: _____

Topic: _____

General Observations:

Data Collection Instrument A

Observation Notes P.2

Confidential. To be completed by researcher only.

1. *Atmosphere of Expression* – Where (and how) do you see facilitation of the following?

Sharing experiences? (Naming):

Sharing point of view? (Framing):

Sharing a new understanding or response? (Reframing):

Data Collection Instrument A

Observation Notes P.3

Confidential. To be completed by researcher only.

2. *Supportive Community*– Where (and how) do you see facilitation of the following?

1. Peer to Peer Acceptance:

2. Peer to Peer Asset Recognition:

3. Peer to Peer Accountability:

Data Collection Instrument A

Observation Notes P.4

Confidential. To be completed by researcher only.

3. *Meaningful Rituals*– Where (and how) do you see facilitation of the following?

1. Lament:

2. Confession:

3. Renewal:

APPENDIX D
ANONYMOUS RESIDENT SURVEYS

APPENDIX D

ANONYMOUS RESIDENT SURVEYS

Data Collection Instrument B: Anonymous Resident Survey: Monday morning Bible Study

1. During this activity, I share stories from my personal life.

Often Sometimes Rarely Never

Optional Comments:

2. When I am participating in this activity, I ask challenging questions.

Often Sometimes Rarely Never

Optional Comments:

3. This activity helps me think positively about myself.

Often Sometimes Rarely Never

Optional Comments:

4. I share my point of view during this activity.

Often Sometimes Rarely Never

Optional Comments:

5. People have pointed out my good qualities during this activity.

Often Sometimes Rarely Never

Optional Comments:

6. I feel strong emotions during this activity (happiness, anger, laughter, sadness).

Often Sometimes Rarely Never

Optional Comments:

7. I enjoy participating in this activity.

Often Sometimes Rarely Never

Optional Comments:

8. I have felt hopeful during this activity.

Often Sometimes Rarely Never

Optional Comments:

9. I have grown closer to God through this activity.

Often Sometimes Rarely Never

Optional Comments:

10. Optional. A topic I wish we could discuss is:

Data Collection Instrument B: Anonymous Resident Survey: Tuesday Evening Bible Study

1. During this activity, I share stories from my personal life.

Often Sometimes Rarely Never

Optional Comments:

2. When I am participating in this activity, I ask challenging questions.

Often Sometimes Rarely Never

Optional Comments:

3. This activity helps me think positively about myself.

Often Sometimes Rarely Never

Optional Comments:

4. I share my point of view during this activity.

Often Sometimes Rarely Never

Optional Comments:

5. People have pointed out my good qualities during this activity.

Often Sometimes Rarely Never

Optional Comments:

6. I feel strong emotions during this activity (happiness, anger, laughter, sadness).

Often Sometimes Rarely Never

Optional Comments:

7. I enjoy participating in this activity.

Often Sometimes Rarely Never

Optional Comments:

8. I have felt hopeful during this activity.

Often Sometimes Rarely Never

Optional Comments:

9. I have grown closer to God through this activity.

Often Sometimes Rarely Never

Optional Comments:

10. Optional. A topic I wish we could discuss is:

Data Collection Instrument B: Anonymous Resident Survey: Thursday Evening Bible

Study

1. During this activity, I share stories from my personal life.

Often Sometimes Rarely Never

Optional Comments:

2. When I am participating in this activity, I ask challenging questions.

Often Sometimes Rarely Never

Optional Comments:

3. This activity helps me think positively about myself.

Often Sometimes Rarely Never

Optional Comments:

4. I share my point of view during this activity.

Often Sometimes Rarely Never

Optional Comments:

5. People have pointed out my good qualities during this activity.

Often Sometimes Rarely Never

Optional Comments:

6. I feel strong emotions during this activity (happiness, anger, laughter, sadness).

Often Sometimes Rarely Never

Optional Comments:

7. I enjoy participating in this activity.

Often Sometimes Rarely Never

Optional Comments:

8. I have felt hopeful during this activity.

Often Sometimes Rarely Never

Optional Comments:

9. I have grown closer to God through this activity.

Often Sometimes Rarely Never

Optional Comments:

10. Optional. A topic I wish we could discuss is:

Data Collection Instrument B: Anonymous Resident Survey: Art Class

1. During this activity, I share stories from my personal life.

Often Sometimes Rarely Never

Optional Comments:

2. When I am participating in this activity, I ask challenging questions.

Often Sometimes Rarely Never

Optional Comments:

3. This activity helps me think positively about myself.

Often Sometimes Rarely Never

Optional Comments:

4. I share my point of view during this activity.

Often Sometimes Rarely Never

Optional Comments:

5. People have pointed out my good qualities during this activity.

Often Sometimes Rarely Never

Optional Comments:

6. I feel strong emotions during this activity (happiness, anger, laughter, sadness).

Often Sometimes Rarely Never

Optional Comments:

7. I enjoy participating in this activity.

Often Sometimes Rarely Never

Optional Comments:

8. I have felt hopeful during this activity.

Often Sometimes Rarely Never

Optional Comments:

9. I have grown closer to God through this activity.

Often Sometimes Rarely Never

Optional Comments:

10. Optional. A topic I wish we could discuss is:

Data Collection Instrument B: Anonymous Resident Survey: Exercise Class

1. During this activity, I share stories from my personal life.

Often Sometimes Rarely Never

Optional Comments:

2. When I am participating in this activity, I ask challenging questions.

Often Sometimes Rarely Never

Optional Comments:

3. This activity helps me think positively about myself.

Often Sometimes Rarely Never

Optional Comments:

4. I share my point of view during this activity.

Often Sometimes Rarely Never

Optional Comments:

5. People have pointed out my good qualities during this activity.

Often Sometimes Rarely Never

Optional Comments:

6. I feel strong emotions during this activity (happiness, anger, laughter, sadness).

Often Sometimes Rarely Never

Optional Comments:

7. I enjoy participating in this activity.

Often Sometimes Rarely Never

Optional Comments:

8. I have felt hopeful during this activity.

Often Sometimes Rarely Never

Optional Comments:

9. I have grown closer to God through this activity.

Often Sometimes Rarely Never

Optional Comments:

10. Optional. A topic I wish we could discuss is:

APPENDIX E
VOLUNTEER INTERVIEW QUESTIONS

APPENDIX E

VOLUNTEER INTERVIEW QUESTIONS

Data Collection Instrument C:

Volunteer Interview Questions

1. Can you introduce yourself and tell me a little bit about the class you lead at The Program?
2. Can you walk me through an average session and highlight any elements that stand out?
3. How often do the participants speak up in class?
4. What kinds of topics do they want to discuss? (i.e. past events, future, theology, daily concerns?)
5. How would you describe your participant's interaction with each other? (i.e. supportive, challenging, competitive, loving?)
6. Are there any rituals (repeated actions) that have become sacred to you and your class?
7. Is there a time you remember when a participant expressed grief and sorrow in class? Can you tell me about that?

8. Is there a time you remember when a participant expressed anger in class? Can you tell me about that?

9. Is there a time you remember when a participant expressed shame in class? Can you tell me about that?

10. What would you love to see happen with your class in the future?

APPENDIX F
GRADUATE SPIRITUAL CARE QUESTIONNAIRE

APPENDIX F

GRADUATE SPIRITUAL CARE QUESTIONNAIRE

Data Collection Instrument D: Graduate Spiritual Care Questionnaire

1. What are some memories you have of your time at The Program?
2. Spiritual Care attends to a person's spiritual or religious needs and can help them heal emotionally. Do you recall a time when someone cared for your spiritual needs at The Program?
3. Can you recall a time when you were able to share your life experience with someone at The Program?
4. Can you recall a time when you wanted to share your life experience with someone at The Program but could not?
5. Can you recall a time when you were able to share your point of view on spiritual matters while at The Program?
6. How would you describe your relationships with the other women in The Program?

- Encouraging
- Challenging
- Competitive
- Trustworthy
- Other (please share)

7. Were you able to express grief and/or anger while at The Program?

8. Is there a topic you wish were discussed further during your time at The Program?

APPENDIX G

SAMPLE VOLUNTEER RECRUITMENT EMAIL

APPENDIX G

SAMPLE VOLUNTEER RECRUITMENT EMAIL

Dear (Volunteer),

Greetings from The Program. I am currently pursuing a Doctor in Ministry degree from Mercer University's McAfee School of Theology. My focus in this program is spiritual care for survivors of trauma. In the research design for my thesis project, I have identified seven programs at The Program that provide outstanding spiritual care, and yours is on the list!

If you are agreeable, I would like to research your program in three ways:

A (silent) in-house observation.

A follow-up interview with you.

A brief questionnaire for willing participants and program graduates.

I would love to talk further with you about the study and answer any questions you may have.

This is not an evaluation of your work at The Program. I am interested in what we are doing well! Would you be open to a conversation about this project over the next week?

With Thanks,

Debby Haralson

APPENDIX H

SAMPLE MEMO FOR PROGRAM RESIDENTS AND GRADUATES

APPENDIX H

SAMPLE MEMO FOR PROGRAM RESIDENTS AND GRADUATES

Sample Memo for Program Residents and Graduates

Program Residents and Graduates

Your Feedback is Requested!

I am studying Spiritual Care at The Program

And I would love to know your thoughts.

Join me for a brief conversation

May 5 at 11:00 am in the activity room

For a brief discussion.

Thank You

Debby Haralson