

COVID-19 as Trauma

Author: Amy Quinn-Graham [1]

Contributor: Captain Nicky Watson [2]

This follows the 'Faith-Based Facilitation' model. You may wish to consider the 'Four Theological Voices' when reading Scripture (NB all references are from the NIV, 2011). Please see OurHub for details.

Introduction - The issue

Research carried out during the pandemic suggests that COVID-19 will have been a traumatic experience. Whether directly or indirectly, trauma affects us all, and therefore the Church has a responsibility to ensure it is a safe space for people who have been affected by trauma to return to. The literature outlined the need for churches to adopt a trauma-informed approach to congregational life, including a space for a collective memory to be formed and for testimonies without a happy ending to be shared (Quinn-Graham, 2020).

The First Step - Why 'trauma'?

What is trauma?

'An inescapably stressful event that overwhelms people's existing coping mechanisms' (van Der Kolk and Fisler, 1995, p505).

The Salvation Army's Addictions Services describe trauma as:

“ a person's unique experience of an event in which: their ability to integrate the emotional experience is overwhelmed, or they experience (subjectively) a threat to their life, bodily integrity or emotional stability. Therefore, reactions to traumatic events vary considerably, ranging from relatively mild, creating minor disruptions in a person's life, to severe and debilitating. ”

What is clear from these definitions of trauma is that an event can be experienced differently by different people, leading to various levels of trauma. Everyone is different. You may feel that COVID-19 hasn't been particularly traumatic for you; however, it's important to recognise that for some, COVID-19 may have been 'severe and debilitating'. Additionally, the level of impact experienced by the pandemic may not be immediately obvious to you or to others.

Why is it important that COVID-19 is acknowledged and processed as trauma?

If COVID-19 is not recognised as trauma, individuals, families and even groups risk experiencing re-traumatisation as the experience of COVID-19 triggers memories from other life events. Additionally, as church leaders move into new ways of ‘doing church’ and ‘reimagining mission’, it is important that this activity does not become a distraction that prevents them from processing their own pandemic experiences, as this could colour all their future work. ‘You have a lens through which you see the world, yourself and other people. And events will colour that lens. [With enough stress], even when those events have stopped, some people are left with a coloured lens’ (Trickey, 2021, cited in Prideaux, 2021).

Left unresolved, trauma can be passed on through generations. Trauma can develop into long-term mental health disorders, such as depression and anxiety. Trauma can also influence an individual’s belief in God. ‘Many people lose their faith because they experience God as being absent during the disaster that hit them’ (O’Connor, 2011, cited in de Kock-Malan, 2019, p4).

Paul Huggins is a Lifehouse chaplain in Sheffield who works with people who have experienced the trauma of homelessness; often this is linked to other traumatic incidents in people’s lives. Paul leads several support groups that are underpinned by the six principles of trauma-informed care. He says that one of the most helpful things that can be done in integrating a trauma-informed approach is to give people space where they feel safe, able to share as much or as little as they want, and the freedom to know they can get up to go or take a break for some fresh air. This builds trust and nurtures the visitors’ sense of safety, choice, and empowerment.

Questions for reflection

- Thinking about the definitions of trauma - what are the effects COVID-19 could have had on individuals in your setting and the pastoral care they will require?
- How may people in your setting feel differently about their theology (or understanding of themselves and their place in the world) as a result of COVID-19? How do we assimilate this into our pastoring, support, worship, and teaching?
- What does it mean for ‘mission’ that we acknowledge COVID-19 as trauma?



Going Deeper -Trauma in Scripture

What does Scripture tell us about trauma?

A scriptural theme that arose multiple times throughout the research was the reminder that the Israelites spent time living in exile (Quinn-Graham, 2020). They experienced a loss of rituals and ways of approaching and connecting with God that could have overwhelmed their coping mechanisms and left them feeling that their life and stability was threatened, as described in the earlier definitions of trauma. Their pain is articulated in Psalm 137:1-4 when they cry out to the Lord, asking how they can sing their songs of praise and worship when they are in a strange and foreign land.

Looking to the New Testament, it is likely that 1 Peter 1:18-19;22-23 was written within the context of trauma. 'For these early Jesus followers, alienation, suffering, hostility, possible persecution for their faith, being exiles living in diaspora, and living as foreigners, also in the face of Empire, were daily realities which might have caused trauma' (de Kock-Malan, 2019, p2). Dealing with trauma requires reframing your beliefs and finding new meaning, as demonstrated by Peter through the coping strategies he gave his readers. He encouraged them - and therefore encourages us - to reconstruct the past and realise their identity in a new light, that of Jesus' suffering.

Questions for reflection

- Did you and your corps or spiritual community lose any rituals or ways of approaching and connecting with God during COVID-19? If so, how did that feel?
- What does it mean to you to look back at the pandemic in light of Jesus' suffering?

Reflection - How to address the trauma

Adopting a trauma-informed approach

Now that you have a better understanding of trauma and the importance of acknowledging COVID-19 in this way, you may be wondering how to start processing this trauma or supporting others to do so. It's important to acknowledge that church leaders are not clinically trained and should therefore not be attempting to deliver individual interventions that aim to heal someone of their trauma. Instead, church leaders have a role in integrating a trauma-informed approach into congregational life and mission, supporting people to find new meaning and reframe their beliefs (Prideaux, 2021).



In fact, it is important that leaders recognise the impact of this trauma on themselves by taking time to reflect on how it has affected them physically and their energy to lead, their mental resilience with supporting others, and the effects on their own practical theology (making sense of God in the world, the Church, their life, and their ministry). Any impact should be acknowledged and leaders supported to recover and process their understanding.

What is trauma?

A trauma-informed approach requires a shift from asking, ‘What is wrong with this person?’ to ‘What has happened to this person?’ The Salvation Army’s Core Recovery work is underpinned by six principles of trauma-informed care: safety, choice, collaboration, trustworthiness, empowerment and cultural humility. These principles can give us the bedrock values that will inform our work together as worshipping communities and as we think about mission in the light of this trauma.

Moving Forward - Making a plan

Going beyond a trauma-informed approach

Developing a trauma-informed approach is just one step in the process of creating space for COVID-19 to be acknowledged as trauma both in congregational life and in mission. We recommend aligning your plans and actions to this structure:

1. Build a trauma-informed approach into your corps or spiritual community.
2. Bring in as many voices as possible. For example, are there groups in your community who have not been given a voice to process their trauma? Start by listening to them first. Can you work together?
3. Create a balance between activity and purpose, sharing and lament.
4. Revisit, reflect and redraw regularly.

Additional resources

If you would like additional support or resources, please contact Captain Nicky Watson, Regional Chaplaincy Officer, Homelessness Services, Southern Region, on nicola.watson@salvationarmy.org.uk. Nicky is involved in The Salvation Army’s recently launched Core Recovery work which supports the development of worshipping communities across the territory focused on creating safe and inclusive environments for those in recovery from addiction and anyone wanting to explore their faith and build genuine community.

We hope you have found this helpful. A bibliography for this chapter and the full COVID-19 booklet that addresses key themes in greater detail is available on OurHub. If you have feedback or any ideas you’d like to share, email rdu@salvationarmy.org.uk.