In February, 2007 an improvised explosive device detonated under our truck near Fallujah, Iraq. All of us sustained minor injuries from the blast and debris. I came through that incident with minor burns, cuts, and a concussion. In the time following that event, symptoms of mild traumatic brain injury, depression, and post-traumatic stress began to manifest. Upon redeployment, I connected with the medical community and began traditional treatments of sleeping medicines, anti-depressants, and cognitive behavioral therapy. As time went by, the symptoms became more aggravated and caused dysfunction in my work and family life. I wanted something to relieve the numbing misery. The military medical community’s protocols did not harm me and provided a degree of relief. However, the military medical community habitually used the words “manage” and “cope” in reference to my diagnosis of post-traumatic stress disorder and depression. I found that disturbing. The message seemed clear: I will be like this the rest of my life and I need to find a way to deal with it.

By March of 2008, I became aware of a local ministry in Anchorage, Alaska that developed an inner healing workshop over the previous fifteen years. That ministry, developed by Pastor Roger Schoeniger, is called “Healing the Heart” (HTH). It models wholeness through the shared testimony of the journey through pain toward healing in close community. With my symptoms worsening, I became desperate for relief. I decided to try Healing the Heart.

I discovered something I never experienced before: leaders of the church being normal, vulnerable, and authentic with regards to their personal stories of brokenness, their sinful responses to trauma, their encounter with the Divine, and the transformation of brokenness into a source of comfort and hope for others. During the week-long didactic phase, we learned how healing works through the testimony of 8 to 10 leaders sharing their stories. A weekend ministry retreat followed. There we could share our story and process unresolved pain in close, accepting community. I did and it was liberating. After a year of emotional pain and struggle, the symptoms of PTSD and depression lifted following the retreat. My psychologist and psychiatrist marveled, monitored me for three more months before stopping all medications, and released me from care because there was nothing left to treat.

The purpose of this paper is to share my reflections on the things that were helpful in the Healing the Heart experience. Perhaps they may be applied to other secular and religious efforts in treating victims of trauma. I would like to add these reflections follow my subsequent clinical training and licensure as a marriage and family therapist.

I’m mindful of something I learned from Dr. Terry Wardle at Ashland Theological Seminary some time ago. He said trauma produces an episodic memory that contains the facts, the sensory data, the emotions, and the meaning of the event mixed into one powerful memory. Often, people bury traumatic episodic memories because they are too overwhelming to deal with in our conscious states. Dr. Richard Schwartz conceptualizes traumatic episodic memories as “exiled parts” of our inner world that take on a life of their own and carry the pain of unprocessed trauma. What I’ve learned about processing and healing traumatic episodic memories is there needs to be a new, more powerful episodic experience that can trump the stuck memory. I see several key elements needed for a new episodic experience to compliment conventional military therapies and treatments for the purpose of healing painful memories. Those elements are:

**Spirituality.** Secular traumatologists, such as B. Rothschild and P. Levine note an essential ingredient in healing trauma is addressing the spirit of the hurting person. Hurting people benefit from a spiritual awareness or experience of the Divine breaking into the context of our life to include the traumatic events in a powerful, transformational way. The didactic phase of HTH includes references from the Hebrew and Christian scriptures. These serve as the foundation of matters concerning identity, who God is, how we relate to God, how we relate to each other, how to do forgiveness, mourning, and confession. During the application (also called ‘ministry’) phase, participants have a transformational experience with the Divine to confess dysfunctional behavior, mourn past wounds, express and receive forgiveness, and to reconcile relationships. It is my belief that any religious protocol emphasizing these concepts will be helpful to the hurting.

**Modeling wholeness through shared testimony.** This is one of the most essential elements of Healing the Heart. The leaders who facilitate the workshop share their story of brokenness, inner healing, and how life is now different as they present the various teaching modules of the workshop. It normalizes the common human experience and demonstrates healthy vulnerability. It is a tangible example of Christian leadership applying, living, and modeling their sacred texts: 2 Cor 1:3-7 (God comforts us so we can comfort others...) and James 5:16 (confess your sins to each other...). This dynamic generates hope and is very attractive to the wounded spirit. Pastor Roger Schoeniger states neglect of this element will undermine the entire process of the workshop (personal communication, Mar 10, 2010).

**Confession in a safe, accepting community.** A basic tenant of Christian spirituality is confession of wrong doing, transgressions, or what theologians call ‘sin’. Specifically, the Bible commands Christians to ‘confess your sins to one another.’ This discipline is often neglected in Western Christianity. Confession in involves stating how one attempted to meet one’s own needs or treat pain apart from God’s design. It includes an admission of guilt for the wrong doing and an admission of God’s standard for that area. In HTH, participants confess how they tried to deal with their pain apart from God and count the cost of that sin. This happens best with a group that is non-judgmental, safe, confidential, and accepting of the person in pain.

**Forgiveness and role play.** Forgiveness is giving up one’s perceived right to get even, demand payment, or hold a grudge. It has an element of acceptance of what happened. However, it is acceptance with follow-through. The follow-through is a letting go of what happened and giving it to God. It involves trusting God will reconcile things better than we can. Failure to forgive leads to bitterness and effects most relationships negatively. Role play is used for the purpose of confession of sin and the asking for and giving of forgiveness. Without forgiveness, there can be no healing. Forgiveness isn’t staying in an abusive relationship nor is it becoming a door mat for others to trample. However, the very nature of forgiveness with reconciliation does involve exposing ourselves to the possibility of future pain. Love is risky.

**Mourning**. Grieving is the internal processing of pain or loss, which is often private and unseen. Mourning is the processing of emotions related to painful, traumatic events in community. Mourning may include talk, lamenting, crying, and expression of emotion in the healing the heart group during the ministry phase of the experience. This is counter-culture to many North Americans, especially Soldiers, who prefer to be alone in pain and think grieving alone is enough to handle loss.

**New episodic experiences.** In the safety and acceptance of the group, participants remember the unresolved experience and recreate it in their mind. In this place, and applying all of the lessons taught during the didactic phase, participants invite God’s healing presence into the trauma to reframe the event from God’s perspective and to invite God’s healing touch and truth. As this happens, the traumatic memory transforms into a new, more powerful healing memory. When it transforms, it becomes a potential source of power for encouragement, hope, and comfort for others.

**Transformation of wounded internal parts.** Here structures of Internal Family Systems Therapy are employed to transform and integrate rogue sub-personalities of the participant’s inner world. These parts, called managers, exiles, and firefighters, when touched by the healing power of God, serve more noble purposes for the core-self. When governed by the Holy Spirit, they produce good fruit. Facilitators of inner healing search for and position these parts before the presence of God. They follow the pain doggedly through the behaviors to the wound and there they prompt mourning, confession, forgiveness, and transformation.

**The witness and power of acceptance.** Experts such as Harry Harlow (Van der Horst, 2008), John Bowlby (Hall, 2007), and Susan Johnson (Jones, 2005), theorize people are hard-wired for healthy affective dependency; we tend to gravitate toward those who create an emotional safe harbor and a safe base to return to when life becomes painful. In these healthy attachments, people are free to explore life and make sense of past trauma. In HTH, the ministry group provides safety, grace, acceptance, and love. Each witnesses the other sharing their pain, sin, and struggle. They experience hope as God touches broken parts and heals them. This dynamic has the power break the isolation and shame that is often associated with traumatic episodic memory.

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C:\Users\daniel.w.hardin2\Documents\Previous Assignments\FS HAAF FLC\Healing the Heart\OCT HTH basic statistical data.tiff Since that time, I’ve facilitated several HTH workshops with active duty Soldiers, National Guard Soldiers, retires, and spouses. Here I share data from one of those workshops. I measured the participant’s perceptions of personal wellness, depression, and other spiritual variables before HTH, immediately after HTH, and 45 days after HTH (Figures 1 and 2). Perceived wellness increased for the participants on average by 13% after 45 days following the retreat. Symptoms of depression decreased by 11% after 45 days. And specific measures of connectedness to community, trust, self-awareness, and spiritual heal increased by nearly 23% after 45 days. Those C:\Users\daniel.w.hardin2\Documents\Previous Assignments\FS HAAF FLC\Healing the Heart\OCT HTH graphs.tiffchanges are statistically significant and warrant further study and research.

Figure - Healing the Heart Statistical Data

Figure - Healing the Heart Data Charts

There are many ways to treat people who suffer from PTSD symptoms. Palmer, Stalker, Gadbois, and Harper (2004) found that among other helpful elements, community is highly valued. Based on these data, I believe any group-trauma-healing initiative that includes the essential elements of Healing the Heart will be more effective. Wounded people need not “manage” and “cope” with unprocessed trauma forever. There is hope for some degree of transformation and healing. While it’s true we won’t be the same as we were before the trauma, we can be different in a better, more resilient way. We can find meaning to what happened and we can comfort others with the comfort we’ve received. Integrating these elements into pastoral care and counseling may help people unburden and process pain quicker and more efficiently.

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