

Trauma-Informed Ministry

Presentation for UCC Keystone Conference

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Trauma involves:

- Experience of unspeakable horror
- Autonomous survival-response (fight, flight, freeze, or fawn)
- Embodied memory susceptible to sensory triggers (for example, PTSD)
- Past interrupts the present

The Three “E’s” of Trauma: Event, Experience, Effect

“Individual trauma results from an event, series of **events**, or set of circumstances that is **experienced** by an individual as physically or emotionally harmful or life threatening and that has lasting adverse **effects** on the individual’s functioning and mental, physical, social, emotional, or spiritual well-being.” (SAMHSA)

Trauma is not the event but the individual’s experience of the event. It can be experienced as individual, collective (community-wide), epigenetic (inherited or intergenerational), socio-cultural (for example, racism), or vicarious (secondary).

The effects of trauma manifest in observable ways:

- Difficulty focusing, attending, retaining, and recalling
- Tendency to miss appointments or other obligations
- Challenges with emotional regulation
- Fear of taking risks
- Anxiety about deadlines, social interactions, or public speaking
- Anger, helplessness, or dissociation when stressed
- Withdrawal and isolation
- Involvement in unhealthy relationships

Trauma-informed ministry draws on faith practices to promote healing:

TRAUMA	FAITH PRACTICES	HEALING
abandonment	Prayer	recognition
disruption	Ritual	re-integration
interruption	Story	re-narration
isolation	Accompaniment	solidarity
separation	Community-building	re-connection

The R's of Trauma-Informed Care

A program or organization that is trauma-informed:

- **realizes** the widespread impact of trauma and understands potential paths for recovery;
- **recognizes** the signs and symptoms of trauma;
- **responds** by fully integrating knowledge about trauma into policies, procedures, and practices, and
- **resists** re-traumatization. (SAMHSA).
- **reconnects** victim-survivors with loved ones, caring communities, and faith. (McClintock)

Values and Principles of Trauma-Informed Care



Six Key Principles of a Trauma-Informed Approach (SAMHSA)

1. Safety

2. Trustworthiness and Transparency

3. Peer Support

4. Collaboration and Mutuality

5. Empowerment, Voice, and Choice

6. Cultural, Historical, and Gender Issues

TRAUMA	FAITH PRACTICES	HEALING
<p>abandonment disruption interruption isolation separation</p>	<p>Prayer Ritual Story Accompaniment Community-building</p>	<p>recognition re-integration re-narration solidarity re-connection</p>

1. **Rev. Kellie** is considering an appointment to Elmsdale Church, in which the former pastor was found guilty of sexually exploiting an adult congregant and was removed from ministry. However, members of the community exhibit a wide array of emotions, and some are in denial about the outcome of the church trial. Rev. Kellie is unsure about how she would handle the situation.

2. **Michael** attended adult Sunday School class regularly until the new study of Christian approaches to war. He has been absent or extremely tardy several times lately. During the most recent class, he became angry during a discussion of a Bible passage and left the room.

3. First Church experiences turmoil every autumn during their financial pledge drive. The treasurer expresses anxiety about the next year’s budget; the church council chair does not want to talk about money in church; and long-time members show distrust about the budgetary process. **Pastor Linda** wonders why this event elicits such extreme responses in the congregation.

4. **Rev. Miller** serves a predominantly African American congregation in Philadelphia. On Thursday, September 1, 2022, he saw news about the killing of an unarmed Black man shot in bed by an Ohio police officer. The body-camera footage showed the officer pushing open a bedroom door and immediately firing at 20-year-old Donovan Lewis. Rev. Miller was planning to spend the evening working on his sermon, but he cannot seem to concentrate.

5. Four months ago, a tropical storm ravaged the community on the east side of Asbury UMC. The west side of the community suffered minimal damage. Church members live in both areas. The church building was left intact. **Pastor Paul** leads an effort to help neighboring families recover. However, church members are getting upset with each other about this ministry. Some are impatient with slow progress, others are ready to move on to another cause, still others have stopped volunteering, giving various reasons for their departure from this effort.

6. Hope Church recently returned to in-person worship after nearly two years of online-only worship during COVID. **Chaplain Chris** leads the prayer team and coordinates home visits with members. Chris has noticed a high level of anxiety among the congregation, even after they returned to in-person worship. In fact, people seem to be more anxious now, so Chris brings up the issue during staff meeting.