



Article

Bearing Witness as Social Action: Religious Ethics and Trauma-Informed Response

Darryl W. Stephens

Lancaster Theological Seminary, 555 West James Street, Lancaster, PA 17603, USA;
dstephens@lancasterseminary.edu or dws@darrylwstephens.com

Abstract: Written from a standpoint of religious ethics, this article interprets the work of trauma response and recovery in transcendent and moral terms not always apparent to the practitioner or institution. This article provides a broad understanding of spirituality, transcendence, and faith as these concepts relate to Judith Herman's stages of trauma healing and the characteristics of trauma-informed response articulated by the Substance Abuse and Mental Health Services Administration. These features are then mapped onto specific modes of transcendence and moral themes identifiable in a wide range of religious traditions. The connective framework for this mapping is provided by utilizing the concept "bearing witness," as synthesized from a wide range of disciplinary perspectives, to describe the work of trauma-informed response. This article concludes by recognizing bearing witness as a form of social action, a moral response with implied if not explicit religious dimensions and spiritual implications, for which an understanding of religious ethics is a helpful ally. Thus, this article concludes that religious ethics can be a valuable resource and partner in addressing the personal, systemic, and political aspects of trauma response and recovery, enabling attention to spiritual well-being of both the trauma survivor and the one responding to the survivor.

Keywords: psychological trauma; trauma-informed care; interpersonal trauma; spirituality; bearing witness; religious ethics; solidarity; social action; Judith Herman; relational model; process theology



Citation: Stephens, D.W. Bearing Witness as Social Action: Religious Ethics and Trauma-Informed Response. *Trauma Care* **2021**, *1*, 49–63.
<https://doi.org/10.3390/traumacare1010005>

Received: 5 April 2021
Accepted: 17 June 2021
Published: 18 June 2021

Publisher's Note: MDPI stays neutral with regard to jurisdictional claims in published maps and institutional affiliations.



Copyright: © 2021 by the author. Licensee MDPI, Basel, Switzerland. This article is an open access article distributed under the terms and conditions of the Creative Commons Attribution (CC BY) license (<https://creativecommons.org/licenses/by/4.0/>).

1. Introduction

Bearing witness to trauma, as a form of social action, is a moral response with implied if not explicit religious dimensions. Trauma affects the whole person, including those aspects considered spiritual or religious. According to the Substance Abuse and Mental Health Services Administration (SAMHSA) in the United States, psychological trauma is characterized, in part, by "lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being" [1] (p. 7). A person's spiritual well-being, though, is difficult to define within a broad, secular context, potentially complicating this aspect of recovery and care within a trauma-informed community. Trauma-informed response inherently attends to multiple moral themes through modes of transcendence not always apparent to the practitioner or institution.

Religious ethics provides resources for a spiritually informed response to trauma. The spiritual well-being of the trauma survivor can be identified and cultivated with resources from religious ethics, drawing on notions of the transcendent as survivors and responders alike find renewed purpose through their collaborative work. This article uses the term recovery, not as a destination or endpoint but as a shorthand for the ongoing work of integrating traumatic histories into one's life narrative and journey of healing. As noted by Judith Herman, some, though not all, survivors find a mission through their recovery:

A significant minority, as a result of the trauma, feel called to engage in a wider world. These survivors recognize a political or religious dimension to their misfortune and discover that they can transform the meaning of their personal tragedy by making it the basis for social action. While there is no way to compensate for an

atrocities, there is a way to transcend it, by making it a gift to others. The trauma is redeemed only when it becomes the source of a survivor mission [2] (p. 207).

Spiritual crisis and a sense of mission can be experienced by both the trauma survivor and those persons bearing witness to the trauma survivor. Aspects of religion and spirituality pertain to all parties involved. Not only is knowledge about trauma's effects on spiritual well-being essential to a trauma-informed response, knowledge of one's own spiritual motivations and beliefs is also essential for a holistic response to trauma. Caregivers, service sectors, and communities seeking to attend to the trauma survivor's spiritual well-being must become not only trauma-informed but also spiritually informed. The purpose of the present article is to support this sense of mission, in the fullness of its political and religious dimensions, in both survivors and responders.

This article is written from a standpoint of religious ethics to offer secular and religious service providers some guidance for recognizing how trauma-informed response and recovery relate to notions of value rooted in spirituality or religion. While this article will be of interest to theologians and religious professionals working with trauma survivors, its purview is limited to the aforementioned purpose. The present article explores neither "experiences of religious and spiritual growth following trauma" [3], advice for spiritual advisors [4], nor offers a theology of trauma [5] or the moral injury accompanying trauma [6]. Neither does this article provide a psychological analysis of trauma or faith development [7]. Disciplinary conversations about religious practice and theology are left to others, as is the topic of religious trauma [8]. Likewise, others have focused on religious coping and the spirituality of trauma survivors [9], "spiritually oriented interventions for counseling and psychotherapy" [10], and ethics for such interventions [11]. While there is "a growing recognition in the field of psychology of the central role that religious and spiritual coping can play in the recovery process of trauma survivors" [9] (p. 682), spiritual and religious dimensions of trauma-informed response are not well researched. This article is intended to complement existing research by exploring concepts central to religious ethics (as well as humanist constructs of human rights) and correlating them to trauma-informed response and recovery.

The concept of bearing witness, a multifaceted moral activity familiar to some secular service providers, is employed as a framework to structure the parallels between religious ethics and trauma-informed response and recovery. Bearing witness is a spiritually significant social action involving recognition, empathy, memory, and imagination. This approach finds resonance with the relational model of healing espoused by Pamela Birrell and Jennifer Freyd [12]. It shares Birrell's concern that, in non-relational medical approaches, "trauma becomes a medical pathology rather than a religious, moral, or ethical happening" [12] (p. 59). Both seek to offer "an ethic of compassion and mutuality" in response to trauma [12] (p. 60). Where Birrell offered three aspects to a relational model of psychiatric treatment—listening, mutual empathy, and compassion [12] (pp. 54–59)—the present article employs a similar and more detailed framework, for non-specialists. This article identifies four practices of bearing witness and correlates them to Herman's stages of trauma recovery, the SAMHSA's trauma-informed response, universal moral themes, and distinct modes of transcendence arising from religious ethics. Thus, this article draws on religious ethics for the purpose of better equipping trauma-informed institutions and individuals to understand their work in relation to spiritual well-being and transcendent values.

This article begins with a broad understanding of spirituality, transcendence, and faith as these concepts relate to trauma and the transformative work of healing and recovery. Then, religious ethics is presented as a resource for this work of transformation, providing modes of transcendence and moral themes in four perspectival moments. The next section maps the aforementioned onto Herman's stages of recovery and the SAMHSA's four-fold description of trauma-informed care, allowing the work of trauma response and recovery to be interpreted in transcendent terms. The heart of this article presents bearing witness as social action, enabling attention to spiritual well-being of both the trauma survivor and

the one responding to the survivor. As synthesized from a wide range of disciplinary perspectives, the concept of bearing witness consists of four identifiable practices—grounded being, attentive presence, historical clarity, and meaningful participation—correlating to the perspectival moments, modes of transcendence, moral themes, and stages of recovery and response identified previously. This article concludes by recognizing the social action of bearing witness as a political effort with spiritual implications, for which an understanding of religious ethics is a helpful ally. Thus, this article argues that religious ethics can be a valuable resource and partner in addressing the personal, systemic, and political aspects of trauma response and recovery.

2. Spirituality, Transcendence, and Faith

The activities and themes of which Herman wrote—transformation, redemption, transcendence, mission, meaning-making, and social action [2] (p. 207)—invite reflection on the spiritual and religious dimensions of trauma and recovery. Herman named the dialectic of trauma as being at once unspeakable and yet demanding to be told. From a spiritual standpoint, the experience of trauma is doubly unspeakable, involving both the transcendent and the atrocious. Thus, for trauma-informed responders, it is vital to gain familiarity with concepts, categories, and vocabulary often employed to speak of the unspeakable—whether spiritual or traumatic. This section shows that trauma recovery and trauma-informed response require consideration of spiritual well-being and a sense of the transcendent, which many people express through religious categories and traditions.

The parallels between traumatic and spiritual experiences are multiple. Both kinds of experience fall outside of “normal” perception and coping, both involve the holistic body (even an “out of body experience” has meaning only in reference to the body), both are inadequately communicated through words yet demand to be shared (evidencing Herman’s dialectic of trauma, [2]), and both are politically disruptive, changing and challenging existing relationships, one’s sense of justice, and self-perceived place in the world. Both trauma and spirituality shake up and reshape how one makes meaning of the world and how one contributes meaningfully to the world. If healing from trauma involves reconstruction of one’s personal narrative, narrating the transcendent in terms of spirituality must be included in the stages of recovery and tools of trauma-informed response.

The deleterious effects of trauma on spiritual well-being are widely recognized. A great deal of literature already exists related to spirituality, trauma, and resilience [13] (pp. 9–10). Effects of trauma include loss of meaning, difficulty recovering intimacy, guilt, shame, and a myriad of physiological manifestations [2,14,15]. Each of these effects negatively impacts spiritual well-being. For example, Besser van der Kolk observed, “Survivors of trauma often begin to fear that they are damaged to the core and beyond redemption” [15] (p. 2). Trauma undermines one’s sense of self, self-worth, and humanity. Van der Kolk also wrote of “the inner void—the holes in the soul” resulting from previous, adverse experiences of alienation from self and others. Resmaa Menakem described intergenerational trauma as “a soul wound” [14] (p. 10). The relational ruptures of trauma undermine the survivor’s sense of basic trust necessary to human flourishing. According to Herman, “Basic trust, acquired in the primary intimate relationship, is the foundation of faith” [2] (p. 54). Traumatic events shatter this basic trust, “creating a crisis of faith” [2] (p. 55). Fundamental self-worth, human connection, and basic trust are deeply spiritual issues.

Spirituality encompasses all human experience of the transcendent, expressed through many different words and concepts. Rita Nakashima Brock and Gabriella Lettini named their work with veterans recovering from PTSD as “soul repair” [16]. Emphasizing the holistic, embodied nature of trauma, Menakem described the *vagus nerve* as the “soul nerve” and his therapeutic work as providing others a contact with his “settled, regulated nervous system” as a way of calming their nervous system [14] (pp. 138, 152). For Menakem, healing and recovery from trauma clearly have a spiritual component. Teaching his clients access to “the Infinite Source” of settledness, according to Menakem, “doesn’t require a

name, or an explanation, or a belief" [14] (p. 152). Spiritual well-being is adversely affected when trauma disrupts relationships, sunders one's autobiographical narrative, and shakes the foundations of one's understanding of and connection to the transcendent. Trauma ruptures relationships to self, loved ones, community, and even God—though one does not have to speak about God in order to name the spiritual impact of trauma.

The transcendent can go by many names. The transcendent is the universal, Infinite Source to which each person has a connection. It is that ever-present reality beyond our capacity to understand—what is known as Truth or Reality in Hinduism [17] (p. 84); what enables the I–Thou relationship depicted by Martin Buber [18]; and what Howard Thurman called "the sound of the genuine" [19]. When developing his well-known theory of faith development, James Fowler embraced a theory (story) of the self based on a triadic structure of relational engagement: self, others, and what he termed "the ultimate Other, or the center(s) of value and power in one's life structure" [20] (p. 163). This highest or ultimate center of value in one's life represents the locus of faith—God, "the ultimate Other," "the Infinite Source," the Holy, etc. Rebecca Chopp, a feminist theologian, identified "God as the term of the transcendent" in the Christian tradition [21] (p. 10). Transcendence is often used to describe that which is wholly other to human experience; however, transcendence can also be understood immanently, in this-worldly terms.

Many cultures make sense of the transcendent through traditions of faith. Fowler described faith development theory as "the journey of the faithful or religious self, with its companions and life challenges, toward increasingly reflective and responsible relation to and grounding in the Holy" [20] (p. 165). Fowler's operational definition of faith included at least seven aspects, including perspective taking, moral judgment, social awareness, and form of world coherence [20] (p. 161). Traumatic experiences disrupt all of these features of faith, often requiring the victim-survivor to reassess what they previously believed and had been taught about themselves, others, and God. Transcendence is the path through this traumatic wilderness. Chopp described transcendence as "the power and spirit of transfiguration" [21] (p. 10). Transcendence can refer to that which empowers humans to think beyond themselves, imagine possibilities, and join in collective action. It can be enfolded, as a relational term, suggesting awe and wonder [22,23]. In Christian feminist theology, "transcendence is expressed in the hope that the memories of suffering will be told and not go unredeemed, in the hope that personal and social existence can and will be transformed" [21] (p. 10). Thus, transcendence is very much part of the human experience, pertaining to memories, suffering, redemption, social relationships, hope, and transformation.

3. Religious Ethics and Transformation

Religious ethics can be a valuable resource for the work of transformation. For survivors of trauma, the work of healing and recovery is enabled by attention to the transcendent, allowing for the human connections that can repair ruptured relationships with self, others, community, and God. For those bearing witness to trauma survivors, the work can also be transformative—and risky. To be involved at all—and no bystander can avoid being involved, even when choosing not to act—is to experience something of the trauma and its effects. The experience can be difficult to communicate: "witnesses as well as victims are subject to the dialectic of trauma" [2] (p. 2). Survivor and responder are intertwined. Trauma recovery and trauma-informed response take place, albeit in radically different ways, through shared moments of transcendence and transformation. Furthermore, the human capacity for transcendence is what enables a moral response to trauma in the first place. Thus, religious ethics provides helpful tools for naming the spiritual aspects of trauma and the modes of transcendence needed for transforming tragedy into meaningful social action through specific moral themes.

One tool often used to bridge science and Christian faith is process theology. Process theology provides a way to speak about the transcendent and morality while taking into account the social nature of humanity and the interconnectedness of the natural world.

Marjorie Suchocki, a noted process theologian, named the ability to transcend one's self and circumstances as the defining feature of humanity in contrast to other hominids [24] (p. 94). To be human is to have the capacity to recognize the self in relation to others and others as subjects equal to oneself. This article identifies this "recognition" of human existence as a mode of transcendence rooted in existence as a perspectival moment. Suchocki identified three other modes of transcendence—memory, empathy, and imagination—corresponding to past, present, and future perspectival moments, respectively [24] (p. 36). Taken together, these four modes of understanding oneself in relation to others allow for the possibility of morality by providing meaningful choice in relation to violence. In Suchocki's Christian parlance, evil is not "sin" if there is no ability to transcend one's violent tendency [24] (p. 94). The reverse is also true. The ability to recognize, remember, empathize, and imagine implicates one in an interconnected world of sin and allows for a moral response. In other words, these four modes of transcendence enable human moral agency. Trauma due to human atrocities can be named sinful, unjust, and immoral because of the human ability to recognize the victim-survivor as equally human, empathize with their suffering, remember the wider circumstances that enabled the violation, and imagine more just relationships. Thus, through the modes of recognition, memory, empathy, and imagination, the ability to transcend oneself supplies both a moral possibility and a moral imperative.

Each perspectival moment and mode of transcendence correlates to a moral theme central to responding trauma response and recovery. Persons bearing witness to trauma survivors need language to address concerns about individual worth, regard for others, a sense of right and wrong, and community life. These concepts and commitments are expressed through the universal moral themes expressed in many religious and philosophical traditions: human dignity, love, justice, and solidarity, respectively. These moral themes are prominent in traditions and institutions as diverse as the Roman Catholic Church [25], the World Council of Churches [26] (p. 160), Islam [27,28], Judaism [29], Sikhism [30], Buddhism [31], the American Humanist Association [32], and Protestantism across the theological spectrum [33–35]. These moral themes are correlated to the four modes of transcendence and distinct but overlapping existential and temporal perspectival moments (See Table 1).

Table 1. Four Modes of Transcendence and Moral Themes.

Perspectival Moment	Mode of Transcendence	Moral Theme
I. Existence	recognition	dignity
II. Present	empathy	love
III. Past	memory	justice
IV. Future	imagination	solidarity

The following consideration of religious ethics and humanist thought begins with document of the Parliament of the World's Religions and then examines the moral themes of dignity, love, justice, and solidarity as evident in specific religious traditions. The Declaration of a Global Ethic by the Parliament of the World's Religions sought commonalities in religious ethics for addressing unnecessary suffering and other worldwide problems [36]. According to one of the initiators of this effort, "The 'Global Ethic' is the articulation of the basic principles of right and wrong, which in fact are found to be affirmed by all major—and not so major—religions and ethical systems of the world, past and present" [37] (p. 1). The Global Ethic was designed to connect rights and religion, politics and morality. The declaration begins with a call to solidarity in light of the interdependence of humanity and the natural environment [36] (p. 4). An appeal to the "Golden Rule" provided a common starting place for ethical behavior, "We must treat others as we wish others to treat us" [36] (pp. 4, 10) [37] (p. 5). This appeal leads directly to a recognition of "the full realization of the intrinsic dignity of the human person" [36] (pp. 4, 8, 10). The declaration includes

commitments to human rights, justice, and “a spirit of compassion with those who suffer” [36] (pp. 7, 14). The authors’ intention was to create a shared foundation of ethics to function alongside the Universal Declaration of Human Rights, drawn from religious and philosophical traditions based on a recognition of “an Ultimate Reality” [37] (p. 5). In this Declaration, the transcendent meets human rights, religious ethics enters into political discourse, and imagination is engaged to allow humans of all faith traditions to work together, in solidarity, for a better world. An examination of dignity, love, justice, and solidarity in specific religious and philosophical traditions provides a fuller picture of the resources of religious ethics.

Dignity reckons with existence through the individual worth of the human being, establishing grounds for equality and human rights. The Abrahamic traditions include a creation story in which God created humans in the image of the divine, endowing each person with inestimable worth. For example, “the dignity of the human person is the foundation of all the principles” of Roman Catholic social teaching [25]. When Muslim and Christian leaders enter into interfaith dialogue, shared human dignity provides a common starting point. For example, a document co-written by Pope Francis and Sheikh Ahmad Muhammad al-Tayyeb begins, “In the name of God who has created all human beings equal in rights, duties and dignity” [28]. The World Council of Churches expressed, as its first methodological assumption about moral discernment in the churches, “human persons are created in the image of God” and “each human person has a unique dignity” [26] (p. 160), and Protestants across the theological spectrum ground their social ethics and political engagement in the dignity of humans as made in the image of God [33–35]. Dignity is also a fundamental belief of the humanist tradition. The Humanist Manifesto III declares its commitment to the “inherent worth and dignity” of every person [32]. The Declaration of Independence states, “all men are created equal, that they are endowed by their Creator with certain unalienable Rights” [38]. The Preamble to the Universal Declaration of Human Rights begins with a recognition of “the inherent dignity and of the equal and inalienable rights of all members of the human family” and its first article declares, “All human beings are born free and equal in dignity and rights” [39]. These commitments to dignity and equality correspond to fundamental beliefs in many religious traditions. The first teaching in the Sikh tradition, the concept of *ik oankar*, meaning “the oneness of the divinity,” provides a foundational commitment to equal treatment and rights for all persons [30]. The Dalai Lama, the leader of Tibetan Buddhism, asserted “the fundamental oneness of the human family” as a basis for ethical thought and action [31] (p. 163). Among the Bantu people and many cultures across Africa, the term *Muntu* refers to fundamental dignity of the human being, based on “the moral character, the essence of genuine humanity, the essence of a deeply humane being” [40] (pp. 306–307). Since trauma can upend one’s sense of value and dignity as a human person, recognition of the inherent dignity of the survivor is a necessary starting place for recovery and healing.

Love refers to the relational ideal promoted within many religious traditions, enacting human dignity on an interpersonal level in the present. In the Sikh tradition, oneness is practiced through the pursuit of a “deep connection of love” [30]. When discussing human fraternity, Sheikh Ahmad Muhammad al-Tayyeb and Pope Francis together affirmed, “Faith leads a believer to see in the other a brother or sister to be supported and loved” [28]. The concept is central to the Abrahamic traditions. Judaism, Islam, and Christianity all elevate love as one of if not the highest expression of faithful living. For example, a group of prominent Muslim scholars seeking to establish peaceful relations with Christian leaders asserted, “The basis for this peace and understanding already exists. It is part of the very foundational principles of both faiths: love of the One God, and love of the neighbour” [27]. Love of God and neighbor are also central to Jewish law (Torah) and provide a common moral starting point with Christian traditions: “Love your neighbor as yourself.” The Dalai Lama observed, “human nature is basically disposed toward love and compassion,” and asserted “that the capacity for empathy which underlies it is of crucial importance when it comes to ethics” [31] (p. 72). Thus, love as an expression of empathy is rooted deeply in

Buddhist ethics. As noted above, the “Golden Rule,” expressing love for fellow humans, is so common among various religious traditions and philosophies that it provided a starting point for the Declaration of a Global Ethic [37] (p. 5). Since trauma recovery centers on healing relationships, the moral theme of love is an essential resource for the work of bearing witness to the trauma survivor.

Justice refers to a sense of right relationship, interpersonally and also systemically, involving a commitment to engage memory to redress past injustices. In the Sikh tradition, oneness and love naturally lead to a commitment to service and justice, the third central teaching of founder Guru Nanak [30]. Among the many different conceptions of justice [41,42], justice in relation to oppression and suffering is most relevant to bearing witness to survivors of trauma. This commitment is often expressed in terms of special consideration for the vulnerable. Muslim and Christian “believers are called to express this human fraternity by safeguarding creation and the entire universe and supporting all persons, especially the poorest and those most in need” [28]. One of the primary themes of Roman Catholic Social Teaching is “to put the needs of the poor and vulnerable first” [25]. In Judaism, God is often depicted on the side of the oppressed, giving special protections to the vulnerable; justice is expressed as *mishpat* and *tzadeqah*, attending to rights, responsibilities, and right relationships. Protestants often focus on justice in terms of protecting human rights and addressing systemic injustices, as illustrated by the social creed tradition [33–35]. Supporting the most vulnerable is the essence of justice in the work of trauma response.

Solidarity brings dignity, love, and justice into social action, based on the interrelatedness of humans as well as the natural world, and is shaped by imagining a better future. In the Sikh tradition, love and justice naturally lead to collective efforts to serve one another: “If we truly love, we will be driven to engage politically and make the world a better place for all” [30]. One of the seven themes of Catholic Social Teaching, solidarity is based on the idea of humanity as “one human family” [25]. Solidarity is a key concept in Christian liberation theology, in which the oppressed find common cause in the struggle to be liberated from suffering [43]. In many cultures across Africa, the term *Bumuntu* (or, more familiarly to Western ears, *Ubuntu*), refers to “hospitality and solidarity: ‘I am because we are, and because we therefore I am’” [40] (p. 306). In Jewish tradition, *tikkun olam*, or “repairing the world,” provides motivation for social justice [44]. In ecumenical Protestantism, solidarity generally refers to the intersection of hope and community. A visible example of Protestant solidarity was manifest in the effort toward “justice, peace and the integrity of creation,” in which member of the World Council of Churches sought to address human and ecological suffering [45]. Solidarity is also expressed the Global Ethic of the Parliament of the World’s Religions, which opens with a preamble, “The world is in agony. But this agony need not be” [36] (p. 3). The document proceeds to seek cooperation among the world’s religions to imagine participating in a building a better world by addressing suffering. Thus, solidarity points to the interrelatedness of survivor and responder, imagining the possibilities of working together for recovery and healing from trauma.

4. Trauma Recovery and Trauma-Informed Response in Four Perspectival Moments

Models of healing and recovery from trauma, as well as trauma-informed response, are designed to address the reality of traumatic suffering and empower the survivor to flourish within new and renewed relationships. This section presents Herman’s stages of recovery and the SAMHSA’s four-fold description of trauma-informed care and correlates them to distinct perspectival moments, modes of transcendence, and moral themes.

Herman identified three stages preceded by the necessary step of establishing a healing support relationship; this article takes the liberty of integrating this preliminary step into the process by interpreting Herman’s approach as consisting of four stages—overcoming relational barriers, safety, reconstruction of narrative, and reconnection and restoration—as implied in her work [2] (pp. 3, 156, 267, 276). Similarly, trauma-informed response consists of four “key assumptions”—realize, recognize, respond, and resist [1] (pp. 9–10). “SAMHSA defines any setting as ‘trauma-informed’ if the people there realize how widespread trauma

is, recognize signs and symptoms, respond by integrating knowledge into practice, and resist doing further harm” [46]. These stages and assumptions correlate to the four modes of transcendence previously identified: recognition, empathy, memory, and imagination (See Table 2). The purpose of this section is to map the transcendent dimensions of trauma-informed response and recovery onto four perspectival moments, setting the stage for a discussion of trauma-informed response as bearing witness, which is fully developed in the next section.

Table 2. Four Moments of Trauma-Informed Response and Recovery.

Perspectival Moment	Mode of Transcendence	Moral Theme	Trauma-Informed Response (SAMHSA)	Stage of Trauma Recovery (Judith Herman)
I. Existence	recognition	dignity	realize	overcoming relational barriers
II. Present	empathy	love	recognize (identify and name)	safety
III. Past	memory	justice	respond	reconstruction of narrative
IV. Future	imagination	solidarity	resist	reconnection and restoration

The first moment of trauma-informed response and recovery is grounded existentially and employs recognition. According to the SAMHSA, trauma-informed response begins with realizing the widespread occurrence of trauma [46]. Trauma is a fact of existence in this world. Realizing the ubiquity of trauma also entails an awareness of what trauma is and what is required to recover from trauma. The experience of trauma includes loss of meaning, guilt, shame, and a myriad of other disruptions to healthy living and relationships. Psychological trauma is, simply put, an experience that is too much to handle with the body’s normal coping mechanisms. Trauma impacts one’s very existence. Recognition of the survivor’s humanity is essential for the survivor to transition from patient to agent, for the responder–survivor relationship to become I–You instead of I–It [18]. According to Herman, “the first principle of recovery is the empowerment of the survivor” [2] (p. 133). Empowerment occurs through healing relationships, which give the survivor a sense of being recognized as an agent of their own healing. Thus, overcoming relational barriers, “barriers of shame and secrecy,” through existential recognition is prerequisite to all stages of healing and recovery [2] (p. 276). Birrell indicated that effective listening in the healing relationship must “reach below the surface to the level of experience and being”; the responder must consider the survivor “an individual with a unique and deep subjectivity” [12] (p. 55). Realizing the reality of trauma in the world helps remove the stigma of shame and denies trauma the power of secrecy. Recognition enables the responder to realize the widespread occurrence of trauma and the survivor to overcome relational barriers, thus addressing existence as a perspectival moment of trauma-informed response and recovery.

The second moment of trauma-informed response and recovery is focused on the present and employs empathy. According to the SAMHSA, trauma-informed response proceeds by recognizing (identifying and naming) the signs and symptoms of trauma [46]. Trauma reveals itself in social withdrawal, irritability, dissociation, difficulty recovering intimacy, PTSD, and an inability to remain fully attentive in the present moment, to list only a few common symptoms. These signs and symptoms are how the effects of trauma manifest in the present. Since trauma is a whole-body response to an overwhelming experience due to life-threat or social betrayal [12] (p. 50), a sense of safety is paramount for healing and recovery. Herman named “attending to safety in the present” as the first of three stages of recovery once a healing relationship is established [2] (p. 269; see also p. 156). Safety is an immediate concern for the trauma survivor. Safety addresses the needs of the survivor in the here and now, “making intolerable feelings bearable through connection with others” [2] (p. 276). To establish such a relationship and provide a sense of safety requires empathy on the part of the responder. Empathetic presence allows one to re-establish human connection, providing a sense of safety for the survivor. Empathy enables the responder to identify and name the signs and symptoms of trauma and to

establish a safe environment for the survivor of trauma, thus addressing the present as a perspectival moment of trauma-informed response and recovery.

The third moment of trauma-informed response and recovery is rooted in the past and employs memory. According to the SAMHSA, an appropriate response to the trauma survivor involves integrating knowledge into practice [46]. Everything one has learned about trauma becomes relevant to trauma-informed response. To respond appropriately to trauma requires action intentionally informed by one's past training and experience. The past is also the focus of Herman's next stage of recovery, reconstruction of narrative through remembrance and mourning [2] (p. 156). Reconstructing the trauma narrative allows the survivor to grieve the past so that it can become part of the past rather than remain an ever-present, recurring nightmare. Memory, then, serves both survivor and responder. Memory enables one to respond by integrating knowledge into practice and to assist in reconstructing the trauma narrative, thus addressing the past as a perspectival moment of trauma-informed response and recovery.

The fourth moment of trauma-informed response and recovery finds meaning in the future and employs imagination. According to the SAMHSA, to resist doing further harm is the fourth feature of trauma-informed response [46]. One can resist re-traumatization by avoiding triggering traumatic physiological responses, being aware of the dynamics of revictimization, and becoming an ally and advocate for the survivor's healing and future well-being. This work requires imagining a future for the survivor that is free of the shackles of traumatic triggering. Resisting re-traumatization takes into account responders as well as survivors, creating organizational cultures conducive to the well-being of all. Herman identified the final stage of recovery as "reconnection": "Having come to terms with the traumatic past, the survivor faces the task of creating a future" [2] (p. 196). This task requires imagination and hope. The work of reconnection is accomplished through reconciling relationships with self, others, and community, thereby allowing for deepening of intimacy and concern for the next generation [2] (p. 206). Imagination enables one to resist re-traumatization and to empower reconnection. Thus, imagination addresses the future as a perspectival moment of trauma-informed response and recovery.

5. Bearing Witness

Bearing witness to the trauma survivor is an ethical response to suffering involving the responder in specific practices of social action. It is a spiritually informed, moral response to suffering, characterized by distinct moral themes, modes of transcendence, and relational practices. It has resonance in fields as diverse as literature, holocaust studies (particularly through the work of Elie Wiesel), health care, philosophy, theatre, and theology. Bearing witness to trauma survivors is a set of liberating practices with transcendent dimensions, a social action of radical solidarity with those who have suffered.

Synthesizing and innovating on conceptions from many disciplines, this section presents bearing witness as a spiritually informed mode of trauma-informed response, through four perspectival moments. The following mapping suggests a way of understanding bearing witness as social action, enabling attention to the spiritual well-being of both the trauma survivor and the one responding to the survivor. This model correlates the SAMHSA's definition of trauma-informed response [1] (p. 9) [46], Herman's stages of recovery [2] (pp. v, 3, 276), and distinct modes of transcendence with prominent moral themes drawn from religious ethics. Bearing witness reckons with human existence, present, past, and future, through recognition, empathy, memory, and imagination and engages the moral themes of dignity, love, justice and solidarity, respectively. The work of bearing witness involves four identifiable practices of social action: grounded being, attentive presence, historical clarity, and meaningful participation (See Table 3).

Table 3. Bearing Witness in Four Perspectival Moments.

Perspectival Moment	Mode of Transcendence	Moral Theme	Practice of Social Action	Trauma-Informed Response (SAMHSA)	Stage of Trauma Recovery (Judith Herman)
I. Existence	recognition	dignity	grounded being	realize	overcoming relational barriers
II. Present	empathy	love	attentive presence	recognize (identify and name)	safety
III. Past	memory	justice	historical clarity	respond	reconstruction of narrative
IV. Future	imagination	solidarity	meaningful participation	resist	reconnection and restoration

Bearing witness is a spiritually grounded, moral action connecting survivor and responder, trauma recovery and trauma-informed response, embodied existence and the transcendent. Trauma-informed response acknowledges the interrelation of responder and survivor: “To study psychological trauma means bearing witness to horrible events” [2] (p. 7). Bearing witness is, therefore, a risk-laden and purposeful action of moral engagement, putting the responder at risk of indirect or vicarious traumatization [47]. To bear witness is to attest to the truth of another person’s story—and to act upon it. The concept is familiar in the profession of nursing:

Bearing witness is [a way of] being with and relating to others that is based on values and beliefs that give rise to a commitment to attend to, honour, and stay with persons’ truths, perspectives, priorities, hopes, and dreams; that is, their lived experience [it] is a distinct way of being and relating with persons because of the ontological view about human beings and health that underlines it [48] (p. 149).

Rooted in ethics (values and beliefs) and attuned to the victim-survivor’s spiritual life (truths, perspectives, priorities, hopes, and dreams), the action of bearing witness is a particular way of responding and relating to victim-survivors of trauma that lends itself to religious mapping. Kelly Oliver, a professor of philosophy specializing in politics and gender, proposed bearing witness as a way of bringing ethical concerns into politics, noting, “witnessing has both the juridical connotations of seeing with one’s own eyes and the religious connotations of testifying to that which cannot be seen” [49] (p. 483). Thus, bearing witness finds overlap between the sacred and the secular, involves both personal and political response, and demands moral engagement.

Bearing witness is grounded existentially through the recognition of human dignity. It is, for example, a means of “enacting one’s moral agency in nursing” [48] (p. 152). Bearing witness requires, first and foremost, recognition of the survivor as a person, grounding the relationship in mutual being-ness. “Bearing witness is enacting the moral responsibility arising from the encounter with the other, and it is a form of ethical resistance because when we bear witness, we acknowledge the other as other and turn towards him or her” [48] (p. 149). Recognition of the survivor’s shared human dignity is a fundamental part of bearing witness: “we can only bear witness when we acknowledge the other’s irreducibility and infinity” [48] (p. 149). The activity of “ethical resistance” can include both resisting the initial cause of trauma as essentially unjust as well as resisting doing further harm. Tamsin Jones, a political theologian, described bearing witness as “a spiritual exercise” that presupposes and enacts hope by attending to “the truth of resistance in the face of dehumanization” [50] (pp. 139, 141). The trauma survivor’s existence is itself a testament to this truth of resistance. Drawing on Oliver’s philosophical work, Jones identified three characteristics of bearing witness: a relational view of human subjectivity, an encounter with radical otherness, and a way of seeking truth that is pluralistic and dynamic [50] (pp. 141–143). In this way, the responder becomes a partner with the survivor to find and declare unspeakable truths. Bearing witness involves recognizing common humanity, encountering that which cannot be adequately described or understood, and acting on that knowledge.

Bearing witness reckons with the present moment through the practice of attentive presence, exercising empathy as an expression of love. Umair Haque, a well-known writer in leadership studies and economics, described bearing witness as “our first and truest

responsibility” as humans during troubled times [51]. Haque named three aspects of bearing witness: seeing through the eyes of those harmed, seeing through the eyes of history, and seeing through the eyes of humanity [51]. These aspects correspond to present, past, and future, respectively. The process begins in the present, with empathy, and seeks to transform injustices, allowing the one bearing witness to “reclaim a sense of ourselves as fully human” [51]. Through bearing witness, the humanity of responder and survivor are intertwined. Anne Bogart, a theatre professor, described this dynamic in terms of audience and actor: to bear witness is to “develop a point of view in relation to what one has seen” [52]. Bearing witness is a moral activity requiring not only attentive presence but also participation. Bogart traced increased levels of moral response through the stages of seeing, witnessing, and bearing witness:

The steps from seeing to witnessing to bearing witness travel from inaction to conscious action. First we see others. Seeing does not require the responsibility of consciousness. In order to shift from seeing to witnessing, we must attempt connection, understanding and interpretation. Finally, to bear witness requires the courage to show up fully and take responsibility for one’s own anxiety and to “be with” fully and compassionately. To bear witness asks for what ministers, therapists and peacemakers call a “non-anxious presence” [52].

Bogart clearly understood bearing witness as a moral activity pertaining not only to theatre and the arts but also to helping professionals and service providers, religious and secular. In Bogart’s depiction, bearing witness involves connection, attentiveness, interpretation, and responsibility. The responsibility “to ‘be with’ fully and compassionately” is what the present article names “attentive presence,” exercised through empathy. This kind of attentiveness, or attention, is an expression of love, a connection explored by Simone Weil, Iris Murdoch, and others [53]. Recovery is based, in part, on “the hope that restorative love may still be found in the world” [2] (p. 211). Trauma-informed response through attentive presence is the first line of reassurance that such love exists.

Bearing witness reckons with the past through the practice of historical clarity, exercising memory in the work of justice. There is no morally neutral way to care for a victim of trauma. For example, the concept of bearing witness is a fundamental principle of the identity and purpose of Doctors Without Borders/Médecins Sans Frontières [54]. To bear witness is to speak out publicly about the trauma and suffering encountered during disaster relief work, in order to “to alleviate suffering, protect life and health, and to restore respect for human beings and their fundamental human rights” [54]. Responding to and caring for survivors of trauma requires bearing witness to emotionally difficult and potentially traumatizing truths and naming the injustices. To insist on “neutrality” is to side with the perpetrator [2] (p. 7). Some helping professionals may be uncomfortable with this admission of bias. However, Herman made a clear distinction between “the technical neutrality of the therapist” and “moral neutrality” [2] (p. 135).

Working with victimized people requires a committed moral stance. The therapist is called upon to bear witness to a crime. She must affirm a position of solidarity with the victim it involves an understanding of the fundamental injustice of the traumatic experience and the need for a resolution that restores some sense of justice [2] (p. 135).

Thus, trauma-informed responders must engage in the work of justice, which can only be done through the practice of historical clarity. For the survivor, this involves integrating one’s memories of the trauma into one’s life story, “remembrance and mourning” [2] (p. 242). Herman asserted the power and centrality of this aspect of bearing witness within her therapeutic context: “The consulting room is a privileged space dedicated to memory” [2] (p. 246). For the responder, the work of memory involves cultural and institutional memory, reconstructing the narrative of complicity in the unjust social structures that enable and perpetuate traumatic violence, such as institutional betrayal [55], racism, rape culture, war crimes, forced migration, genocide, and other forms of social and political oppression.

Reckoning with the past through a lens of justice requires, in religious terms, some form of collective repentance and lament, acknowledging that this trauma should not have happened and resolving, “Never more!”

Ultimately, bearing witness must reckon with the future through the practice of meaningful participation, exercising imagination in the work of solidarity. In nursing, according to Naef, “bearing witness is attentive presence, involving relationship with others, standing in solidarity with others, being in community” [48] (p. 150). Herman affirmed these aspects of the work recovery, for both survivor and responder by asserting the importance of community and relational connections, “the solidarity of a group,” as essential to recovery and declaring that “bearing witness is an act of solidarity” [2] (p. 247). Solidarity is where survivor and responder meet in imagining and crafting a better future. For Oliver, invoking imagination is an ethical responsibility:

The tension between eyewitness testimony and bearing witness, between subject position and subjectivity, is the dynamic operator that moves us beyond the melancholic choice between either dead historical facts or traumatic repetition of violence. It is the tension between our social-political contexts and our ethical responsibility to imagine life otherwise [49] (p. 483).

Transforming the future—this is an exercise of moral agency. Oliver’s description recapitulates the practices of bearing witness. Grounded in being, the responder, enacts subjectivity, becoming part of the action. Attentive presence enters the tension between bystanding (“eyewitness testimony”) and social action (bearing witness), allowing for the possibility of transcending the “traumatic repetition.” Historical clarity places the fact of this trauma in the past while also making room for the possibility that the future can be different. Meaningful participation not only imagines “life otherwise” but also takes responsibility for bringing it about in solidarity with the survivor. Bearing witness thus includes the practices of grounded being, attentive presence, historical clarity, and meaningful participation.

To bear witness is to support the survivor in healing and recovery, a process that may include the survivor developing a sense of mission. A survivor’s mission typically consists of public action involving various forms of participation: truth-telling, pursuing justice, strategic alliances, and giving to others [2] (pp. 207–211). Responders can support survivors by demanding specific elements of justice-making and accompanying them through the journey [56] (pp. 112–118). Additionally, Herman noted, “In taking care of others, survivors feel recognized, loved, and cared for themselves” [2] (p. 209), reinforcing a positive, supportive cycle by bearing witness to others. Unlike traumatic repetition, which is stuck in the past, the cycle of bearing witness constantly integrates the past into the present as it looks to the future. The role of the trauma-informed responder is to bear witness to the survivor through recognition, love, justice and solidarity, enabling the survivor to realize his ability to live out these moral themes himself, and to join in the effort, choosing sides with the survivor. The fact that it is done in solidarity with the intent to shape a better future signals that bearing witness is a political endeavor. Bearing witness to trauma requires, as Herman asserted, “the context of a political movement” [2] (p. 32). Bearing witness to the survivor is, therefore, a politically engaged form of social action.

6. Conclusions

When one works toward liberation from oppression through solidarity with others, the effort is inevitably political, with all of the risks political action entails. “To speak publicly about one’s knowledge of atrocities is to invite the stigma that attaches to victims” [2] (p. 2). The act of bearing witness to trauma brings unjust structures to light, exposing violence for what it is. To bear witness to the trauma survivor is to become involved, to stake moral ground and to engage in the struggle. Herman argued, “these attacks remind us that creating a protected space where survivors can speak their truth is an act of liberation. They remind us that bearing witness is an act of solidarity” [2] (p. 247). Suffering is both a political [57] and a theological problem [58]; likewise, bearing witness to suffering is both a

political and religious form of social action. A religious perspective is not necessary for this political work. However, many people draw on their faith for the strength necessary to engage in this difficult work, and a basic understanding of religious ethics can facilitate solidarity with persons of many religious traditions or no religious tradition.

Religious ethics offers significant support for the social action of bearing witness through dignity, love, justice, and solidarity, concepts with resonance within the wide diversity of religious traditions and philosophies around the world. The process of regaining spiritual well-being is, for many victim-survivors, a religious journey. Likewise, service providers may find the work of trauma-informed response to be a spiritually demanding journey. Where Herman declared, “only an ongoing connection with a global political movement for human rights could ultimately sustain our ability to speak about unspeakable things” [2] (p. 237), this article has asserted that such a global political movement is enhanced through interreligious understanding and the resources of religious ethics. Responders desiring to attend to a victim-survivor’s spiritual well-being must themselves be attuned to the spiritual aspects of their work. Responders must become spiritually informed to bear witness effectively to survivors of trauma.

Funding: This research received no external funding.

Institutional Review Board Statement: Not applicable.

Informed Consent Statement: Not applicable.

Data Availability Statement: Not applicable.

Acknowledgments: I would like to thank James S. Evinger, consultant with the Faith Trust Institute, for introducing me to the significance of trauma-informed care and Myka Kennedy Stephens for encouraging me to continue along this avenue of research.

Conflicts of Interest: The author declares no conflict of interest.

References

1. Substance Abuse and Mental Health Services Administration. SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach. HHS Publication No. (SMA) 14-4884. Available online: <https://store.samhsa.gov/product/SAMHSA-s-Concept-of-Trauma-and-Guidance-for-a-Trauma-Informed-Approach/SMA14-4884> (accessed on 28 March 2021).
2. Herman, J.L. *Trauma and Recovery: The Aftermath of Violence, from Domestic Abuse to Political Terror*; Basic Books: New York, NY, USA, 2015; ISBN 978-0-465-06171-6.
3. de Castella, R.; Simmonds, J.G. “There’s a deeper level of meaning as to what suffering’s all about”: Experiences of religious and spiritual growth following trauma. *Ment. Health Relig. Cult.* **2013**, *16*, 536–556. [CrossRef]
4. Paulin-Campbell, A. Teaching spiritual accompaniment in the context of trauma. *Way* **2014**, *53*, 29–44.
5. Rambo, S. *Spirit and Trauma: A Theology of Remaining*; Westminster John Knox Press: Louisville, KY, USA, 2010; ISBN 978-0-664-23503-1.
6. Kinghorn, W. Combat trauma and moral fragmentation: A theological account of moral injury. *J. Soc. Christ. Ethics* **2012**, *32*, 57–74. [CrossRef]
7. LaMothe, R. Trauma and Development: A Faith Perspective. *Pastor. Psychol.* **1999**, *47*, 373–388. [CrossRef]
8. Panchuk, M. The Shattered Spiritual Self: A Philosophical Exploration of Religious Trauma. *Res. Philos.* **2018**, *95*, 505–530. [CrossRef]
9. Bryant-Davis, T.; Wong, E.C. Faith to Move Mountains: Religious Coping, Spirituality, and Interpersonal Trauma Recovery. *Am. Psychol.* **2013**, *68*, 675–684. [CrossRef]
10. Aten, J.D.; McMinn, M.R. (Eds.) *Spiritually Oriented Interventions for Counseling and Psychotherapy*; American Psychological Association: Washington, DC, USA, 2011; ISBN 978-1-4338-0946-0.
11. Hathaway, W.L. Ethical guidelines for using spiritually oriented interventions. In *Spiritually Oriented Interventions for Counseling and Psychotherapy*; American Psychological Association: Washington, DC, USA, 2011; pp. 65–81, ISBN 978-1-4338-0946-0.
12. Birrell, P.J.; Freyd, J.J. Betrayal Trauma: Relational Models of Harm and Healing. *J. Trauma Pract.* **2006**, *5*, 49–63. [CrossRef]
13. Matheson, K.; Asokumar, A.; Anisman, H. Resilience: Safety in the Aftermath of Traumatic Stressor Experiences. *Front. Behav. Neurosci.* **2020**, *14*. [CrossRef] [PubMed]
14. Menakem, R. *My Grandmother’s Hands: Racialized Trauma and the Pathway to Mending Our Hearts and Bodies*; Central Recovery Press: Las Vegas, NV, USA, 2017; ISBN 978-1-942094-60-9.
15. Van der Kolk, B.A. *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma*; Penguin: New York, NY, USA, 2014; ISBN 978-0-670-78593-3.

16. Brock, R.N.; Lettini, G. *Soul Repair: Recovering from Moral Injury after War*; Beacon: Boston, MA, USA, 2013; ISBN 978-0-8070-2912-1.
17. Crawford, S.C. Ethical foundations for Hindu bioethics. *Dialogue Alliance* **2003**, *17*, 81–92.
18. Buber, M. *I and Thou*, 2nd ed.; Scribner: New York, NY, USA, 1958.
19. Thurman, H. The Sound of the Genuine. *Spelman Messenger* **1980**, *96*, 14–15.
20. Fowler, J.W., III. 1940–2015 Faith development theory and the postmodern challenges. *Int. J. Psychol. Relig.* **2001**, *11*, 159–172. [CrossRef]
21. Chopp, R.S. Theology and the Poetics of Testimony. *Criterion* **1998**, *37*, 2–12.
22. Rivera, M. *The Touch of Transcendence: A Postcolonial Theology of God*, 1st ed.; Westminster John Knox Press: Louisville, KY, USA, 2007; ISBN 978-0-664-23073-9.
23. Rambo, S. Trauma, Transformation, and Transcendence. In *Conflict Transformation and Religion: Essays on Faith, Power, and Relationships*; Marshall, E.O., Ed.; Palgrave Macmillan: New York, NY, USA, 2016; pp. 155–171, ISBN 978-1-137-56839-7.
24. Suchocki, M. *The Fall to Violence: Original Sin in Relational Theology*; Continuum: New York, NY, USA, 1994; ISBN 0826406890.
25. Seven Themes of Catholic Social Teaching/USCCB. Available online: <https://www.usccb.org/beliefs-and-teachings/what-we-believe/catholic-social-teaching/seven-themes-of-catholic-social-teaching> (accessed on 26 March 2021).
26. Wijlens, M.; Shmaliy, V. (Eds.) *Churches and Moral Discernment: Volume 1: Learning from Traditions*; Faith and Order Paper No. 228; World Council of Churches: Geneva, Switzerland, 2021.
27. A Common Word between Us and You. Available online: <https://www.acommonword.com/downloads-and-translations/> (accessed on 14 March 2021).
28. Francis, P.; al-Tayyeb, S.A.M. Document on Human Fraternity for World Peace and Living Together. Available online: http://www.vatican.va/content/francesco/en/travels/2019/outside/documents/papa-francesco_20190204_documento-fratellanza-umana.html (accessed on 17 June 2021).
29. The Guiding Principles of Reform Judaism. Available online: <https://www.ccarnet.org/rabbinic-voice/platforms/article-guiding-principles-reform-judaism/> (accessed on 4 April 2021).
30. Singh, S.J. On the Anniversary of His Birth, a Reflection on the Life of Guru Nanak; Religion News Service, 30 November 2020. Available online: <https://religionnews.com/2020/11/30/550-years-after-his-birth-a-reflection-on-the-life-of-sikhisms-founder-guru-nanak/> (accessed on 17 June 2021).
31. Bstan-'dzin-rgya, Dalai Lama XIV. *Ethics for the New Millenium*; Riverhead Books: New York, NY, USA, 1999; ISBN 978-1-57322-025-6.
32. Humanism and Its Aspirations: Humanist Manifesto III, a Successor to the Humanist Manifesto of 1933. Available online: <https://americanhumanist.org/what-is-humanism/manifesto3/> (accessed on 2 April 2021).
33. National Council of Churches of Christ in the USA. A 21st Century Social Creed. Available online: <https://nationalcouncilofchurches.us/christian-unity/a-21st-century-social-creed/> (accessed on 17 June 2021).
34. National Association of Evangelicals. *For the Health of the Nation: An Evangelical Call to Civic Responsibility*, 2018th ed. Available online: <https://www.forthethehealth.net/> (accessed on 17 June 2021).
35. United Methodist Church. *The Book of Discipline of the United Methodist Church*, 2016; United Methodist Pub. House: Nashville, TN, USA, 2016.
36. Parliament of the World's Religions. *Towards a Global Ethic: An Initial Declaration of the Parliament of the World's Religions*, 2018th ed. Available online: <https://www.global-ethic.org/declaration-toward-a-global-ethic/> (accessed on 17 June 2021).
37. Swidler, L.J. The Movement for a Global Ethic. *J. Ecum. Stud.* **2018**, *53*, 1–11. [CrossRef]
38. Declaration of Independence: A Transcription. Available online: <https://www.archives.gov/founding-docs/declaration-transcript> (accessed on 26 March 2021).
39. United Nations. Universal Declaration of Human Rights. Available online: <https://www.un.org/en/about-us/universal-declaration-of-human-rights> (accessed on 26 March 2021).
40. Nkulu-N'Sengha, M. Bumuntu Memory and Authentic Personhood: An African Art of Becoming Humane. In *Memory and the Narrative Imagination in the African and Diaspora Experience*; Spencer-Walters, T., Ed.; Bedford Publishers: Troy, MI, USA, 2011; ISBN 978-0-911557-28-2.
41. Lebacqz, K. *Six Theories of Justice: Perspectives from Philosophical and Theological Ethics*; Augsburg Pub. House: Minneapolis, MN, USA, 1986.
42. McCracken, V. (Ed.) *Christian Faith and Social Justice: Five Views*; Bloomsbury: London, UK, 2014; ISBN 978-1-6235-6818-4.
43. Soto Albrecht, E.; Stephens, D.W. (Eds.) *Liberating the Politics of Jesus: Renewing Peace Theology through the Wisdom of Women*; T&T Clark: London, UK; New York, NY, USA, 2020; ISBN 978-0-567-69279-5.
44. Jacobs, J. The History of "Tikkun Olam". *Zeek Jew. J. Thought Cult.* 2007. Available online: <http://www.zeek.net/706tohu/> (accessed on 17 June 2021).
45. Falcke, H. The ecumenical assembly for justice, peace and the integrity of creation. *Ecum. Rev.* **2004**, *56*, 184–191. [CrossRef]
46. Substance Abuse and Mental Health Services Administration. Spotlight: Building Resilient and Trauma-Informed Communities—Introduction. HHS Publication No. (SMA) 17-5014. Available online: <https://store.samhsa.gov/product/Spotlight-Building-Resilient-and-Trauma-Informed-Communities-Introduction/SMA17-5014> (accessed on 28 March 2021).
47. McCann, I.L.; Pearlman, L.A. Vicarious traumatization: A framework for understanding the psychological effects of working with victims. *J. Trauma. Stress* **1990**, *3*, 131–149. [CrossRef]

48. Naef, R. Bearing witness: A moral way of engaging in the nurse-person relationship. *Nurs. Philos.* **2006**, *7*, 146–156. [[CrossRef](#)] [[PubMed](#)]
49. Oliver, K. Witnessing, Recognition, and Response Ethics. *Philos. Rhetor.* **2015**, *48*, 473–493. [[CrossRef](#)]
50. Jones, T. Bearing Witness: Hope for the Unseen. *Polit. Theol.* **2016**, *17*, 137–150. [[CrossRef](#)]
51. Haque, U. Why Our First Responsibility is Bearing Witness. Available online: <https://umairhaque.com/why-our-first-responsibility-is-bearing-witness-2e493c4d3fd> (accessed on 11 March 2021).
52. Bogart, A. Bearing Witness. Available online: <https://siti.org/bearing-witness/> (accessed on 24 March 2021).
53. Cordner, C. What did Iris Murdoch mean by ‘attention’? Available online: <https://www.abc.net.au/religion/iris-murdoch-and-the-meaning-of-attention/11301690> (accessed on 31 March 2021).
54. Doctors Without Borders–USA. Bearing Witness. Available online: <https://www.doctorswithoutborders.org/who-we-are/principles/bearing-witness> (accessed on 24 March 2021).
55. Smith, C.P.; Freyd, J.J. Dangerous Safe Havens: Institutional Betrayal Exacerbates Sexual Trauma. *J. Trauma. Stress* **2013**, *26*, 119–124. [[CrossRef](#)] [[PubMed](#)]
56. Fortune, M.M. *Is Nothing Sacred?: When Sex Invades the Pastoral Relationship*, 1st ed.; Harper & Row: San Francisco, CA, USA, 1989; ISBN 0-06-062683-6.
57. Halpern, C. *Suffering, Politics, Power: A Genealogy in Modern Political Theory*; State University of New York Press: Albany, NY, USA, 2002; ISBN 978-0-7914-5103-8.
58. Copeland, M.S.; Mary, S. “Wading through many sorrows”: Toward a theology of suffering in womanist perspective. In *A Troubling in My Soul: Womanist Perspectives on Evil and Sufferin*; Townes, E.M., Ed.; Maryknoll: New York, NY, USA, 1993; pp. 109–129, ISBN 978-0-88344-783-3.