LIBERTY UNIVERSITY

JOHN W. RAWLINGS SCHOOL OF DIVINITY

Forgiving Childhood Hurt Biblically

A Thesis Project Report Submitted to

the Faculty of the Liberty University School of Divinity

in Candidacy for the Degree of

Doctor of Ministry

by

Latisha Shearer

Lynchburg, Virginia

September 2022

Copyright © 2023 by Latisha Shearer All Rights Reserved Liberty University John W. Rawlings School of Divinity

Thesis Project Approval Sheet

Dr. Mark Plaza Mentor

Dr. Teresa K. Duez Reader

THE DOCTOR OF MINISTRY THESIS PROJECT ABSTRACT Latisha Shearer Liberty University John W. Rawlings School of Divinity, Date Completed Here Mentor: Dr. Mark Plaza

The profound impact of childhood experiences on an individual's mindset, emotional well-being, and transition into adulthood is a compelling problem addressed in this thesis paper titled "Forgiving Childhood Hurt Biblically." This DMIN action research project is to implement biblical forgiveness as a transformative tool to address the physical, mental, and emotional wounds inflicted by childhood trauma. Adverse childhood experiences (ACEs), marked by earlylife toxic stress, establish a foundation for the intergenerational transmission of trauma, significantly affecting the health and lives of adults. Given the vulnerability of childhood, addressing and forgiving the sources of trauma is crucial for effectively reprogramming and renewing the human brain. Furthermore, understanding the impact of family history on an individual's physical and psychological health is essential, as childhood experiences often underlie adult psychological issues. This research highlights the vital role of biblical forgiveness in overcoming hindrances caused by childhood trauma to spiritual, mental, and physical health. The thesis unfolds across five chapters: Chapter One articulates the problem and purpose of the study. Chapter Two provides a robust foundation by exploring relevant literature and theology, highlighting the effects of trauma and the advantages of forgiveness. Chapter Three details the research methodology employed, while Chapter Four analyzes collected quantitative and qualitative data. Chapter Five assesses the data and proposes strategies for further exploration among individuals with adverse childhood experiences. The thesis concludes by summarizing the project and drawing essential implications from this doctoral study, underscoring the transformative potential of biblical forgiveness in healing childhood wounds.

Keywords: trauma, forgiveness, biblical forgiveness, mental health, mindset, adverse childhood experiences (ACE)

TABLE OF CONTENT

ILLUSTRATIONS	VII
ABBREVIATIONS	VIII
CHAPTER 1:	
INTRODUCTION	1
Ministry Context	
Problem Presented	
Purpose Statement	
Basic Assumptions	
The War	
Definitions	
Limitations	
Delimitations	
Thesis Statement	
CHAPTER 2: CONCEPTUAL FRAMEWORK	22
Literature Review	
Effects of ACE	27
Psychological Effects of ACE	31
Physical Effects of ACE	34
The Neurological Aftermath: Trauma's Impact on the Brain	37
Navigating the Depths of Trauma: Insights into the Mind	52
The Profound Significance of Forgiveness	58
Theological Foundations	
Theoretical Foundations	
ACEs Survey	75
The Soul	79
The Metanoia Method	81
Combined Approach	83

Summary	84
CHAPTER 3: METHODOLOGY	85
Intervention Design	85
Implementation of the Intervention Design1	04
CHAPTER 4: RESULTS1	13
Collective Results	13
Data Analysis1	16
Summary of the Results	27
CHAPTER 5: CONCLUSION1	32
Research Implications	36
Research Applications	38
Research Limitations	43
Further Research	45
BIBLIOGRAPHY	50
APPENDIX A1	62
APPENDIX B1	64
APPENDIX C1	65
APPENDIX D1	69
APPENDIX E1	73

ILLUSTRATIONS

List of Figures

Figure 1: Three Types of ACEs90
Figure 2: ACE Survey Question Data
Figure 3: Royer's Research Study
Figure 4: Phase 2 Screening Survey
Figure 5: Intervention Design
Figure 6: Univariate predictors of success
Figure 7: ACE Survey Question Data
Figure 8: Phase 2 Survey Data115

Abbreviations

ACEs Adverse Childhood Experiences

DMIN Doctor of Ministry

CHAPTER 1: INTRODUCTION

Fervently Creations is a ministry that assembles weekly through a social media application. The overarching mission is to bridge the gap between the original intent of the authors of Scripture and the understanding of modern-day readers of Scripture. As individuals read Scripture with modern-day Western eyes, they often misunderstand the original author's purpose and intent in the original hearings, resulting in misinterpretation of the Scriptures. The spiritual levels of the individuals within the ministry vary, making it crucial to employ a strategic teaching approach that can effectively reach people at different spiritual levels. This teaching method connects the original intent of biblical authors to the hearers during the biblical era and the application to modern hearers constructed through transparency.¹ What sets Fervently Creations apart is its capacity for individuals to engage in conversations and ask questions when further clarity is required. The open communication within the ministry sheds light on biblical truths and teachings that can be challenging for some to understand or accept, often due to their mindset rather than their spiritual maturity.

The presence of Fervently Creations on social media serves a critical purpose because many of God's people continue to suffer mentally, emotionally, physically, and financially due to a lack of understanding of the God they serve (as stated in Hosea 4:6, New Living Translation). They do not know how to connect what is currently going on in their personal life with the ancient text. Though many denominations do not have priests who operate or carry themselves as instructed in Ezekial 44, for those in ministry leadership, the responsibility stated

¹Marion Adams, "The Author," *John's Gospel - Free Bible Commentary in easy English*, 2006, accessed November 10, 2022, <u>https://www.easyenglish.bible/bible-commentary/john-ma-lbw.htm</u>.

in verse 23 still applies, which is to "teach my people the difference between what is holy and what is common, what is ceremonially clean and unclean (Ezekiel 44:23, NLT)."

Another reason Fervently Creations is essential is the reluctance of many people to return to physical church buildings after the pandemic. Apart from the repercussions of the pandemic, individuals frequently associate the motivation to attend a physical church with diverse factors, which include 'people hurt,' widely known as 'church hurt.'² Social media platforms, such as the one in which Fervently Creations allows those individuals to receive the Word of God. Scripture emphasizes the importance of sharing the message and states, "But how can they call on him to save them unless they believe in him? And how can they believe in him if they have never heard about him? And how can they hear about him unless someone tells them? And how will anyone go and tell them without being sent? That is why the Scriptures say, "How beautiful are the feet of messengers who bring good news!" (Rom 10:14-15, NLT).

Ministry Context

Fervently Creations primarily operates on Clubhouse, a social media app with a unique audio-based format. Clubhouse focuses entirely on audio interactions like a call-in radio show and other social media platforms.³ Users can create "rooms" where they can engage with up to 5,000 participants who join the room. The room's title and topic are displayed, allowing users to discover intriguing discussions. While room participants can invite others to join, only moderators have the authority to remove participants from the room if necessary. Participants

² Shahaboddin Vahidi Mehrjardi. "Factors Leading to Decline in Church Attendance in the Present Age" *Religious Inquiries* 11, no. 2 (2022): 221-231, accessed November 28, 2023, doi: 10.22034/ri.2022.208383.1374

³Rohit Shewale, "Clubhouse Statistics," *DemandSage*, 2023, accessed October 10, 2023, <u>https://www.demandsage.com/clubhouse-statistics/</u>.

can also "raise their hand" to join the conversation, and moderators can add them as speakers. Moderators can also turn the chat feature on or off, allowing members and guests to interact without speaking. To aid in moderating the room, the room's creator can assign additional moderators.

What sets Clubhouse apart from other social media platforms is its unique blend of features from podcasts, telephone conversations, radio stations, classrooms, Zoom calls, and realtime news and reports. Clubhouse is an interactive social networking app that enables people to engage in live conversations, allowing individuals to listen or actively participate verbally or by using the chat feature. Room creators can record the conversation for users to return and listen to after the room ends. However, some moderators choose not to record the rooms for personal reasons, rendering the content exclusively available to those participating during the live conversation.

As of February 2021, approximately ten million users around the globe have embraced Clubhouse, making it the 9th most downloaded app in app stores as of April 2022. In April 2021, 44 percent of U.S. users accessed the app daily, with 700,000 rooms created daily by the users. Over half of the Clubhouse's user base falls within the 18 and 34 age group, with users aged 35 to 54 accounting for 42 percent, while those aged 55 and older makeup only 2 percent. The app has become a prominent platform for hosting business, global, and political conversations, with one room in mid-April of 2022 attracting 1 million users as they discussed the situation in Ukraine.

Clubhouse has also experienced continued growth in Christian ministries, churches, prayer hubs, and other organizations using it as an evangelistic tool to share the gospel and

discuss trending topics.⁴ The development is partially due to COVID-19, as many churches have closed or limited their in-person gatherings. In May 2020, Clubhouse had around 1,500 users, significantly increasing to approximately 600,000 by December 2020. "Clubhouse gained immense popularity during the COVID-19 pandemic as people sought innovative ways to connect with others,"⁵ Clubhouse offers an alternative to extended Zoom meetings, especially for those who spend much of their day working remotely at a computer desk.

As mentioned, the issue is that generations are leaving the four walls of the church building for assorted reasons. However, those leaving brick-and-mortar churches did not start with the pandemic. What is supposed to be a loving and welcoming environment has the opposite effect on many people. As Andy Stanley stated, "I grew up attending churches designed for church people. No one said it, but the assumption was that church was for church people. The unspoken message to the outside world was, "Once you start believing and behaving like us, you are welcome to join us."⁶

Finding rooms sharing the gospel has also been effective for those unable to attend traditional Sunday Morning Worship Services at their local church. Some users appreciate the convenience of listening to discussions from the comfort of their homes or while on the go, effectively replacing their radio experiences. Some users enjoy conversing with others on biblical topics, which is how Fervently Creations was born. However, while the app continues to

⁴Jason Steinhauer, "*History, Disrupted: How Social Media and the World Wide Web Have Changed the Past,*" *SpringerLink*, 2021, accessed November 3, 2023, <u>https://link.springer.com/book/10.1007/978-3-030-85117-0</u>.

⁵Rohit Shewale, "Clubhouse Statistics," DemandSage, 2023, accessed October 10, 2023, <u>https://www.demandsage.com/clubhouse-statistics/</u>.

⁶Andy Stanley, *Deep and Wide: Creating Churches Unchurched People Love to Attend, Expanded Edition* (Grand Rapids, MI: Zondervan, 2016), 69.

boast a significant user base, the growth and user engagement slowed as people reverted to their regular routines post-pandemic. The app underwent several substantial changes simultaneously, which made navigation challenging.⁷

The functionality of Fervently Creations aligns with that described in "*Everyday Church: Gospel Communities on Mission*," precisely resembling *The Crowded House Sheffield* approach.⁸ This weekly gathering represents a critical element of church life, bringing the people of God together under the Word of God. However, the primary place of belonging is the gospel community.⁹ The researcher established Fervently Creations on February 26, 2022. After visiting numerous rooms to share the gospel, which often didn't involve a deep exploration of Scripture, the researcher decided to establish a space where individuals could delve more thoroughly into the text. Driven by a longstanding interest in exegetical study and how others apply it to daily life, the researcher aimed to foster diverse interpretations and insights from the Scriptures. Solomon, the Proverbs writer, states, "As iron sharpens iron, so a friend sharpens a friend" (Prov 27:17, NLT). Each speaker's in-depth exploration of the Word of God aims to make the Word more relatable and applicable to the members. Fervently Creations hosts a weekly discussion with over 1,000 members, attracting an average of 190 people throughout the teaching session. These sessions typically last for about 3 hours and 4 minutes.

The conversation at Fervently Creations involves members and non-members, fostering a rich dialogue between participants. A creative approach to teaching the Bible encourages critical

⁷Ibid.

⁸ Tim Chester and Steve Timmis, *Everyday Church: Gospel Communities on Mission* (Wheaton, IL: Crossway, 2012).

thinking and the development of strong analytical skills. The primary teacher, often the researcher, delves into the Scripture's historical-cultural context to grasp the passage's original message to its audience.¹⁰ "Teaching the Bible is like building a bridge that connects the modern world to the biblical world and back again. This two-directional span enables students to explore the meaning of the ancient texts in Scripture and their relevance to contemporary life."¹¹ By bridging the gap in biblical passages' historical and cultural contexts, listeners profoundly appreciate the text's complexities and nuances. This two-directional bridge also facilitates an understanding of ancient texts. It promotes biblical clarity, empathy for one's current circumstances or situations, and engagement with diverse perspectives and interpretations of the Bible.

Therefore, the teacher's role at Fervently Creations is to decipher the passage's interpretation within its original historical context and audience during biblical times. Subsequently, this interpretation is to bridge the gap to the hearers inside.¹² Fervently Creations welcomes leaders from diverse backgrounds, some of whom come from formal biblical education and others who claim to have attended "the school of the Holy Spirit." All contributions are valued in this space, regardless of whether the person holds a ministerial title. Discussions revolve around the Scriptures, emphasizing understanding rather than debating. Each session at Fervently Creation begins with worship and prayer before delving into the

¹⁰ Daniel M. Doriani, "Take, Read," in *The Enduring Authority of the Christian Scriptures*, ed. D. A. Carson (Grand Rapids, MI; Cambridge, U.K.: William B. Eerdmans Publishing Company, 2016), 1143.

¹¹ Lawrence O. Richards and Gary J. Bredfeldt, *Creative Bible Teaching* (Chicago, IL: Moody Press, 1998), 182.

¹² J. Scott Duvall and J. Daniel Hays, *Grasping God's Word: A Hands-on Approach to Reading, Interpreting, and Applying the Bible* (Grand Rapids, MI: Zondervan Academic, 2020), 36.

teaching. An invitation at the end of the room to verbally accept Jesus Christ as one's Lord and personal Savior is available in addition to individual and corporate prayer. However, it is common for prayer for an individual in need to occur in the middle of the discussion.

Fervently Creations allows evangelization to both non-believers and those who have backslidden. It will enable others to remove the mask and honestly share their life challenges. Speakers discuss how the Scripture or text is personally relatable to them, often sharing their testimonies.¹³ People can convey these testimonies verbally or through messages about experiencing miraculous healing through faithful prayer during our session. For instance, a story of a woman who gained the strength to leave an abusive relationship; to this day, she has not returned to her abuser. People have confessed Jesus Christ as their Lord and personal Savior for the first time.¹⁴ Many have proclaimed deliverance from strongholds such as addictions, fear, depression, and more. Other speakers also join the conversations and relate the Scripture to various aspects of their lives, including childhood trauma, health issues, addictions, and hurt experienced by those in the church, relationships, and careers. Although speakers are limited to 2 to 3 minutes, some may exceed this time. The moderator rings a bell to signal the speaker to bring their comments to a close, and they can mutter the microphone, move the speaker back to the audience, or remove them from the room. However, no situations have arisen to warrant the use of those features. Speakers and listeners engage in discussions from various locations, including their homes, workplaces, gyms, or while traveling.

¹³ Baker, Amy, ed., "Caring for the Souls of Children, "A Biblical Counselor's Manual, (New Growth Press, 2020)

¹⁴ Engel, Beverly, "The emotionally abusive relationship," *How to stop being abused and how to stop abusing*, John Wiley & Sons, 2023.

Though the initial purpose of the room was to have groups of people discussing biblical passages, it has evolved into a ministry and, more importantly, a family. In one session, you can hear laughing as one person opens their microphone to speak, followed by tears as the next person shares their thoughts. The room has no set time limit, allowing individuals the necessary time to work through their emotions as we lend a listening ear and then words of encouragement and empowerment. Sometimes, the entire room shifts its focus to minister to individuals who are in need.¹⁵ In other instances, members take turns praying for people in the room individually or collectively.

Realizing the growing impact of the ministry, Fervently Creations has recently formed a team of individuals to help expound on the Scriptures. This team consists of four Fervently Creations members who consistently add value to the discussion. These team members have displayed their understanding and ability to dissect Scripture accurately. The team will take turns as primary teachers on weekends. It helps one teacher stay energized while allowing the listener to hear different voices and teaching styles. The primary teacher and the other moderators receive the Scriptures a week in advance, enabling them to delve deeper into the text and engage in more profound conversations. The team communicates the chosen text, key verse, and topic through email, allowing each member to study and prepare at their own pace. On Saturday mornings, the team will partake in an unscripted conversation on the pre-selected text and topic, creating an environment like a remote morning or daytime talk show. In addition to Clubhouse, Fervently Creations is expanding its reach by recording and airing live on other social media platforms and two streaming television networks through Amazon Fire T.V. and ROKU.

¹⁵Rachael Marie Crews, "A Theology of Trauma for Pastoral Ministers," PhD diss., *Regent University*, 2023, ProQuest Dissertations & Theses Global.

Fervently Creations will reach people beyond the Clubhouse app by sharing the gospel. It also helps address another increased issue since the COVID-19 pandemic: a decline in church attendance.¹⁶ Many members who come into the room of Fervently Creations mention that they no longer attend church or do so infrequently, citing several reasons for their reduced participation. Fervently Creations can now go to them through telephone apps, computers, and television. Many Americans spend a sizable portion of their day with electronic devices, so we will branch out to multiple platforms they frequently visit to spread the gospel. Fervently Creations is not a traditional ministry; however, it has positioned itself to meet people where they are, both physically and spiritually.

Problem Presented

The shaping of a person's mindset develops through their perception of reality, modeled by the lessons taught or absorbed during infancy and childhood. These early perceptions continue to influence an individual into adulthood.¹⁷ Furthermore, adverse childhood experiences affect their relationship with others and God. Trauma experienced in early childhood is at the core of several adults battling mental, emotional, and physical health problems. When discussing topics that reveal a person's identity in Christ, the acceptance by members of Fervently Creations is challenging.

An individual sense of identity begins to develop in early childhood. Lessons, both intentional and unintentional, conveyed by adults, peers, and media can yield either positive or negative outcomes in a child's development. As it is often said, "The brain is a historical organ, a

¹⁶Rohit Shewale, "Clubhouse Statistics," *DemandSage*, 2023, accessed October 10, 2023, <u>https://www.demandsage.com/clubhouse-statistics/</u>.

¹⁷Gary C. Reynolds, "Building the Confidence of the Local Church by Renewing the Mind," PhD diss., *Biola University*, 2014, ProQuest Dissertations & Theses Global.

reflection of our personal histories. Our genetic gifts will only manifest if we receive the proper types of developmental experiences at the right times. Early in life, these experiences are primarily shaped by the adults around us."¹⁸ The results can vary significantly, as one child may fall into addiction or depression. In contrast, another in the same household becomes self-driven to be everything opposite of their challenging environment. In Fervently Creations, you can find profiles of individuals who've formed their identities through difficult circumstances rather than through the Word of God.

The analogy of the egg, carrot, and coffee bean submerged in hot water becomes evident as they open their mouths to speak or comment in the chat section on social media. ¹⁹Personal calamities can erode one's capacity to walk into the identity and wholeness God predestined for them. The hot water represents the extreme adversity experienced during childhood. The egg, carrot, and coffee bean respond differently to boiling water. Like the "egg," adverse childhood experiences have made some members emotionally tough, more rigid, and more resilient. They are often guarded, not allowing much to come in or out due to a fear of being carelessly dropped. The concept of ACEs, or Adverse Childhood Experiences, continues to be a subject of significant research. Recent studies from 2020 further underscore the enduring impact of childhood trauma on adult health and well-being. These studies highlight how ACEs can lead to adverse outcomes, including chronic illnesses, mental health issues, and addiction, demonstrating

¹⁸ Bruce D. Perry, and Maia Szalavitz, *The Boy Who Was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook: What Traumatized Children Can Teach Us about Loss, Love, and Healing* (New York, NY: Basic Books, 2017), Kindle, loc. 131-133.

¹⁹Tim Elmore, "The Story of the Carrot, the Egg, and the Coffee Bean," *Growing Leaders*, (2022), accessed October 10, 2023, <u>https://growingleaders.com/blog/the-story-of-the-carrot-the-egg-and-the-coffee-bean/</u>.

the lasting effects of early-life adversity.²⁰ Adversity can produce the opposite effect, weakening and softening the individual, like the "carrot." Many individuals come into the Fervently Creations atmosphere already broken and seeking help. However, many "coffee beans" give insight and wisdom that transforms the lives of others, making the Word of God applicable and relatable. The challenge faced by Fervently Creations lies in individuals harboring negative emotions from adverse childhood experiences, which negatively impact them later in life.

Purpose Statement

The purpose of this DMIN action research project is to use biblical forgiveness to help individuals cope with childhood trauma, leading to healing in physical, mental, and emotional aspects. The purpose is to teach individuals a more profound love for God and others and help them rediscover their authentic and unique identity in Christ. Adverse childhood experiences (ACEs), consisting of toxic stress during early life, profoundly affect children, laying a foundation for the intergenerational transfer of trauma influencing the life and health of adults.²¹ Furthermore, numerous academic and non-academic sources have extensively discussed the concept of biblical forgiveness.

One cannot fully conquer what they are unwilling or unable to identify. For many individuals, the root cause of their physical, mental, and emotional circumstances stems from unresolved childhood trauma. These traumatic experiences have rewired their brains, leading to

²⁰R.F. Anda, A. Butchart, and V.J. Felitti, et al., "Building a Framework for Global Surveillance of the Public Health Implications of Adverse Childhood Experiences," *American Journal of Preventive Medicine* 59, no. 3 (2020): 419-428, accessed November 3, 2023, <u>https://cctasp.northwestern.edu/wp-content/uploads/Global-</u> <u>Surveillance-and-ACES.pdf</u>.

²¹ Sven-Olof Andersson et al. "Adverse Childhood Experiences Are Associated with Choice of Partner, Both Partners' Relationship and Psychosocial Health as Reported One Year After Birth of a Common Child. A Cross-Sectional Study." *PloS* 16, (2021): e0244696, accessed September 7, 2022, doi:10.1371/journal.pone.0244696.

neurological and physiological issues. "And the United States has historically done little more than give lip service to children's issues, with both parties raising the banner of "family values" while doing little actually to address the day-to-day problems affecting most parents and children."²² Society has often taught coping mechanisms and created pharmaceutical solutions. Members of Fervently Creations have demonstrated numerous coping skills, frequently accompanied by a superficial or insincere sense of forgiveness. Unfortunately, they remain bound to their past, much like a war prisoner battling post-traumatic stress disorder. It is essential to clarify that biblical forgiveness does not equate to how the world views forgiveness; ignorance has kept many Fervently Creations members in captivity. Biblical forgiveness means no longer holding sinful actions or offenses against a person, regardless of the number of occurrences.

By contrast, the world permits individuals to determine who, when, what, and how often a person should receive forgiveness.²³ Peeling back the layers reveals the underlying reasons behind the member's physical, mental, emotional, and spiritual conditions, and biblical forgiveness can serve as a starting point for healing. The application of biblical forgiveness allows healing conducive to the growth of their relationship with the Father. Biblical forgiveness is the catalyst in mindset shifts through the renewing and transforming one's mind. A person's past can affect one's present, and unless the healing of the past wounds begins, they may negatively affect one's future.

²²R.F. Anda, A. Butchart, and V.J. Felitti, et al., "Building a Framework for Global Surveillance of the Public Health Implications of Adverse Childhood Experiences," *American Journal of Preventive Medicine* 59, no. 3 (2020): 419-428, accessed November 3, 2023, <u>https://cctasp.northwestern.edu/wp-content/uploads/Global-</u> <u>Surveillance-and-ACES.pdf</u>.

²³ Bruce D. Perry, and Maia Szalavitz, *The Boy Who Was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook: What Traumatized Children Can Teach Us about Loss, Love, and Healing* (New York, NY: Basic Books, 2017), Kindle, loc. 250-251.

Basic Assumptions

This action research thesis assumes humans are triune beings composed of body, soul, and spirit. While some scriptural references suggest that humans consist of two primary components, either body and soul (James 2:26; 2 Cor. 7:1, NLT) or body and spirit (Matt. 10:28, NLT), body, soul, and spirit are found within one text as well (1 Thess 5:23; Heb 4:12, NLT). ²⁴ The Bible teaches that the desires of the body and spirit oppose one another (Gal 5:16-17, NLT). Simultaneously, the body and spirit are at a constant war to influence the soul (Rom 6:19, Gal 5:17; Jam 4:1; 1 Pet 2:11, NLT). Renowned New Testament teacher Paul offers a prayer, "Now may the God of peace make you holy in every way and may your whole spirit and soul and body be kept blameless until our Lord Jesus Christ comes again" (1 Thess 5:23, NLT). The assumption of an inner war within this action research project explains why Paul also acknowledges, "I don't really understand myself, for I want to do what is right, but I don't do it. Instead, I do what I hate" (Rom 7:15, NLT).

The War

The Greek Word for the soul and *psyche*, used in the New Testament, never refers to the physical body. Instead, we consider the soul as the essence of a being, differing from the body and not dissolved by death. *Psyche* represents the breath of life, encompassing a person's feelings, desires, affections, and aversions.²⁵ Christ teaches about the separation of the body and soul, as he tells his disciples that even if opponents of the gospel unleash all their malice against them, they can only kill their frail, mortal bodies. In Matthew 10:8 (NLT), he says, "Don't be

²⁴Matthew Henry and Leslie F. Church, "Psalms," *Commentary on the Whole Bible, Genesis to Revelation* (Grand Rapids, MI: Zondervan Pub. House, 1982).

²⁵ Dennis Durst, "Soul," ed. John D. Barry et al., *The Lexham Bible Dictionary* (Bellingham, WA: Lexham Press, 2016).

afraid of those who want to kill your body; they cannot touch your soul. Fear only God, who can destroy both soul and body in hell." A sword, fire, or violence cannot physically harm the immortal soul. It is eternal, surviving the body and existing in a separate state, able to reveal happiness and bliss while the body remains in a condition of death.²⁶

The Hebrew Word for soul, *nephesh*, is translated as soul, self, life, person, or heart. In the Old Testament, the soul rarely refers to the body (used only eight times). In the narratives of the Old Testament, *nephesh* is translated 475 times as soul.²⁷ When delivering Israel from Egypt, God gave instructions to His people through Moses. Regarding the sanctity of blood, the Lord stated, "For the life of the flesh is in the blood, and I have given it to you upon the altar to make atonement for your souls; for it is the blood that makes atonement for the soul." (Lev 17:11, New King James Version). In this text, *nephesh* is translated as life and soul, while basar is the translation for flesh and body. Whenever an animal's blood is shed, it serves as a reminder that God has authority over all living creatures' lives²⁸

Both believers and unbelievers have a 'spirit,' but only believers have the Holy Spirit quickening their spirit. The spirit is quickened and awakened in an individual when they respond to the invitation of Jesus Christ through the Holy Spirit, the breath of God (1 Pet 3:18; Eph 2:4-5; Col 2:13, NLT).²⁹ Unlike the body, which reminds a person's soul of what happens to them, the

²⁶John Gill, "Commentary on Matthew 10:28," *Gill's Exposition of the Entire Bible*, (1999), accessed October 10, 2023, <u>https://www.studylight.org/commentaries/geb/matthew-10.html</u>.

²⁷ Dennis Durst, "Soul," ed. John D. Barry et al., *The Lexham Bible Dictionary* (Bellingham, WA: Lexham Press, 2016).

²⁸ Kevin D. Zuber, "Leviticus" in *The Moody Bible Commentary*, eds. Michael Rydelnik and Michael Vanlaningham (Chicago, IL: Moody, 2014), 201.

²⁹ Heather Riggleman, "What Is the Difference Between the Body, Soul, and Spirit?", *Crosswalk* (2021): accessed November 6, 2022, https://www.crosswalk.com/faith/spiritual-life/what-is-the-difference-between-the-body-soul-and-spirit.html.

spirit reminds them of their identity through the redemptive power of Jesus Christ. The messages from the body and the spirit oppose each other, influencing one's soul and shaping one's perception of the world, themselves, others, and God.

For example, a child whose parents reject experiences a conflict between the body and the spirit for the soul, as they lack acceptance or love. The body, which experienced rejection because of unwanted pregnancy through what it heard, saw, or through physical touch or lack thereof, conveys the message to the soul that they are unwanted, unloved, and rejected. The emotions in the soul, influenced by how the body (brain) remembers these rejections, hinder a person's ability to receive and give love to others. Often, the connection between feeling rejected in one's early life and the difficulties in receiving and giving love in one's adult life is not recognized. Contrary to the body, the spirit conveys the truth of God, affirming that they are loved and accepted, and nothing can separate them from the love of God (1 John 3:1; Eph 1:5; Rom 8:35-39, NLT).

Another assumption of this action research is that many believers and unbelievers alike struggle to heal the wounds in their souls because their brain (body) subconsciously and consciously regurgitates past experiences. The brain attempts to protect the soul based on previously learned experiences and perceptions of reality at the time. A child's developing brain is more susceptible to negative and positive experiences.³⁰ Sadly, children are more vulnerable to experiencing trauma. Therefore, reprogramming and renewing the brain can only be effective when the person confronts the emotions associated with their childhood experiences and forgives the offense and offender. Family history is crucial for understanding the physical conditions of

³⁰Bruce D. Perry, and Maia Szalavitz, *The Boy Who Was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook: What Traumatized Children Can Teach Us about Loss, Love, and Healing* (New York, NY: Basic Books, 2017), Kindle, loc. 43-45.

the body and holds significance for psychologists in uncovering the root causes of their adult patients' psychological problems.

Definitions

This project primarily focuses on members of Fervently Creations on the Clubhouse app. Throughout the project, we frequently use specific terms, sometimes interchangeably, to capture the essence of childhood trauma and biblical forgiveness for these members. Key terms used in this project include adverse childhood experiences, trauma, body, neurons, soul, and other words relevant to this active research thesis. There may be overlaps in the usage of these terms.

Adverse Childhood Experiences (ACEs) Refer to traumatic events during childhood and adolescence. These experiences can include physical, emotional, or sexual abuse; witnessing violence in the home; having a family member attempt or die by suicide; growing up in a household with substance use, mental health problems, or instability due to parental separation, divorce, or incarceration."³¹

Biblical Forgiveness: The act of sending away, forsaking, putting off, yielding up, expiring, disregarding, removing, or completely separating oneself from the offense or sin of oneself or another person.³²

Body: This refers to the physical body through which a person can see, hear, smell, taste, and touch.³³

³¹CM Jones, MT Merrick, and DE Houry, "Identifying and Preventing Adverse Childhood Experiences: Implications for Clinical Practice," *JAMA* 323, no. 1 (2020): 25–26.

³² James Strong, *New Strong's Expanded Exhaustive Concordance of the Bible* (Nashville, TN: Thomas Nelson Publishers, 2010), 48.

³³ "Body," *Encyclopedia Britannica*, accessed October 10, 2023, https://www.britannica.com/dictionary/body.

Neurons: Neurons are the fundamental units of the brain and nervous system; they are responsible for receiving sensory input from the external world, sending motor commands to our muscles, and transforming and relaying electrical signals at every step in between."³⁴

Soul: The soul encompasses one's mind, emotions, and free will. In Hebrew, "nephesh' means "a breathing creature." It can be translated into several meanings, such as soul, mind, or life.³⁵

Spirit: The spirit comes alive when we accept Jesus Christ as our Savior. Unlike the soul, which is both physically and eternally alive, the spirit responds to Jesus Christ's invitation through the Holy Spirit, described as the breath of God (1 Pet 3:18, Eph 2:4-5, Col 2:13, NLT).³⁶

Trauma: The term trauma, as used subjectively, refers to an individual's perceptions of an event or circumstance that occurred in their life.³⁷

Limitations

This DMIN action research thesis acknowledges several limitations beyond the researcher's control. Because of time constraints, we won't thoroughly examine the effectiveness of the *Mind Renewing Intervention Program* (MRIP) developed by the researcher. The action research will take place within an 8-week timeframe, and the focus will primarily be on biblical forgiveness and renewing the mind through repetition as the most vital and time-consuming step

³⁶ Ibid.

³⁴ Alan Woodruff, "What Is a Neuron?", *Queensland Brain Institute - University of Queensland*, (2019): accessed November 6, 2022. <u>https://qbi.uq.edu.au/brain/brain-anatomy/what-neuron</u>.

³⁵ Heather Riggleman, "What Is the Difference Between the Body, Soul, and Spirit?", *Crosswalk* (2021): accessed November 6, 2022, https://www.crosswalk.com/faith/spiritual-life/what-is-the-difference-between-the-body-soul-and-spirit.html.

³⁷ Kent McKean, and Heather McKean, *The Metanoia Method: How the Brain, Body, and Bible Work* (Port St Lucia. FL: Mind Change, 2021), Kindle, loc. 187.

of the 9-step program. It will focus more on those specific areas. The ability to forgive and commit to repetitions of positive affirmations will determine whether participants continue with MRIP.³⁸ In addition to the time restraints, the nature of the study develops another potential limitation. Furthermore, some individuals may find confronting past experiences emotionally challenging, and we anticipate they may drop out of the research due to these emotional reasons.³⁹ As a certified mental health coach, the researcher will provide a list of referrals for further emotional assistance during or after the process. The action research will involve a small sample size of 15 to 20 participants to ensure we follow individual emotional considerations. With over 10 million users, Clubhouse will be the platform used for the research; therefore, the researcher would need to create a private room on the app or use another app, such as Zoom.⁴⁰ However, finding a suitable meeting time for all participants will be challenging. The researcher must be flexible by offering two alternate weekly meeting times for the teaching and assessments.

The study will not limit the specified type of trauma, such as focusing only on participants who have experienced sexual trauma. Not having an identified childhood trauma prevents using many quantitative or scientific studies, typically narrowed down to specific traumatic events. The focus will be on biblical forgiveness of one specific traumatic event. The researcher does not see the need to limit participants based on gender or race. However, we recognize that men may express more skepticism when discussing past trauma. Like many other

³⁸ Heather Riggleman, "What Is the Difference Between the Body, Soul, and Spirit?", *Crosswalk* (2021): accessed November 6, 2022, https://www.crosswalk.com/faith/spiritual-life/what-is-the-difference-between-the-body-soul-and-spirit.html.

³⁹ Ibid.

⁴⁰ Kent McKean, and Heather McKean, *The Metanoia Method: How the Brain, Body, and Bible Work* (Port St Lucia. FL: Mind Change, 2021), Kindle, loc. 187.

ministries, there is a higher attendance of women, and the researcher acknowledges that more women are likely to participate voluntarily compared to men. Like many other ministries, there is a higher attendance of women, and the researcher recognizes that more women are likely to participate voluntarily than men.

It is not possible to control the variations in the healing processes of participants from adverse childhood experiences. However, we will conduct assessments at the beginning and end of the action research to determine their progress in emotional healing. Fervently Creations is not associated with a specified denomination, and participants' prior biblical understanding of forgiveness will vary within the group. Therefore, theological differences in teaching biblical forgiveness may arise as an issue.

Delimitations

The researcher will use the ten-question ACE survey (Appendix A) to determine whether a person has experienced adverse trauma in their childhood and whether the volunteer is a candidate for active research. The trauma is limited to events before the participant was 19. Therefore, participants must be at least 19 years of age to participate in the study. The session will go up to an hour a week.⁴¹ To maintain the time restraints of the session, the participants will receive worksheets to complete outside of the session times individually. Therefore, active research success relies on the participants' commitment to applying the teaching during the group sessions outside of meeting times. Weeks 1 and 2 will discuss the ACE survey, define trauma, and the effects of trauma: weeks 3 and 4, the explanation of biblical forgiveness and the importance of biblical forgiveness. Weeks 5 and 6 will work on applying biblical forgiveness. Week 7 will assess the participant's ability to provide biblical forgiveness to themselves and others. Finally, week eight briefly discusses the remaining self-help steps of the MRIP, showing the participants how to shift their mindsets.

Thesis Statement

Denying or partially administering forgiveness keeps individuals bound to past trauma, as their mind, body, and soul retain painful memories that shape their mindset. Childhood trauma endured during crucial cognitive development stages profoundly influences an individual's mental, physical, and emotional well-being in adulthood, leading to long-lasting effects.⁴² The retention of pain memory is a critical cognitive requirement for children to self-report their pain and invariably shapes how they cope with pain in the future. How individuals remember pain from childhood can set the stage for future pain and health behaviors well into adulthood and may underlie the development of chronic pain."⁴³

Mind Rejuvenation Intervention Program (MRIP) is a 9-step process rooted in Philippians 4:8, aiming to transform an individual's mindset to focus on what is true, noble, just, pure, lovely, commendable, virtuous, and praiseworthy. Unforgiveness acts as a barricade, blocking these thought processes from taking full fruition. Therefore, applying biblical forgiveness becomes a prerequisite before addressing other steps. Although one must use biblical forgiveness daily for old and new offenses, the groundwork of adverse childhood experiences requires uprooting. Biblical forgiveness aids spiritual, emotional, physical, and emotional healing

⁴² Horowski, J., & M. Kowalski. "Human Health and Christianity in the Context of the Dilemma of Forgiveness." *J Relig Health* 61, (2022): 1282–1299. Accessed September 7, 2022. https://doi-org.ezproxy.liberty.edu/10.1007/s10943-021-01424-1

⁴³ Melanie Noel, Maria Pavlova, Lauren McCallum, and Jillian Vinall, "Remembering the Hurt of Childhood: A Psychological Review and Call for Future Research." *Canadian Psychology* 58, no. 1 (2017): 58-68, accessed September 2, 2022,

https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/remembering-hurt-childhood-psychological-review/docview/1877753306/se-2.

as the gateway to mindset shifts. If childhood trauma hinders the spiritual, mental, and physical health of adults, implementing biblical forgiveness becomes a crucial component of the researchers' *Mind Rejuvenation Intervention Program* (MRIP).

CHAPTER 2: CONCEPTUAL FRAMEWORK

This literature review delves into childhood trauma through five key themes. The first theme will explore the effects of adverse childhood experiences. The second theme will discuss how the brain processes information. The third theme will address current approaches to childhood trauma in both the secular and spiritual world. The fourth theme will compare worldly forgiveness to biblical forgiveness. The literature review will also investigate the effects of forgiveness from a psychological and therapeutic perspective. The literature review will encompass the *Mind Rejuvenation Intervention*, a process that becomes possible only after achieving inner healing through biblical forgiveness.

Literature Review

Mayhem can strike at any stage of life, manifesting as anxiety, depression, unpleasant thoughts, fear, and toxic ruminations, all of which are the root cause of mental health problems.⁴⁴ The disheartening fact is that the "victims" of such mayhem are often children enduring trauma outside their control. According to Kent and Heather McKean, infants and children rely on adults for their survival needs, yet those same adults can be responsible for their victimhood.⁴⁵ Early developmental experiences influence human functioning in every aspect. Positive outcomes in human functioning are often associated with consistent, predictable, and loving interactions during infancy and childhood. Conversely, experiences marked by chaos, threat, unpredictability, or a lack of love tend to yield less favorable outcomes. It is important to note that the result is not

⁴⁴ Caroline Leafe, *Cleaning up Your Mental Mess: 5 Simple, Scientifically Proven Steps to Reduce Anxiety, Stress, and Toxic Thinking* (Grand Rapids, MI: Baker Books, 2021), Kindle, loc. 43.

⁴⁵ Kent McKean, and Heather McKean, *The Metanoia Method: How the Brain, Body, and Bible Work* (Port St Lucia. FL: Mind Change, 2021), Kindle, loc. 119.

inherently absolute, as we can find examples of individuals who have overcome childhood trauma, as seen in stories such as those recounted in Oprah Winfrey's book "*What Happened to You?: Conversations on Trauma Resilience, and Healing*. She describes her experience in a conversation with Bruce Perry, MD, Ph.D., where she acknowledges that what she may deem a "rough" childhood could be either a cakewalk or hell on earth for another child.

The dynamics of one's culture may cause experiences to seem normal to one child, while those experiences may be traumatizing to another. During Oprah's childhood, it was typical of that period that African-Americans in the rural South were whipped or beaten for any reason.⁴⁶ Even in early childhood, children may not fully comprehend the words used in their language, but they can sense the nonverbal aspects of a conversation. Tension and hostility conveyed through anger or weariness and hopelessness expressed in a depressed language can significantly impact a child. Estimates suggest that by the age of 18, approximately 40 percent of children in America will have experienced at least one potentially traumatizing event. Such events may include the death of a parent or sibling, sexual abuse, persistent physical abuse or neglect, witnessing domestic violence, or being present during other violent crimes, serious accidents, or natural disasters.

These experiences can significantly contribute to a traumatic childhood. However, some adverse childhood experiences, such as rape or witnessing murder, would likely result in a post-traumatic stress disorder diagnosis if experienced by adults with psychiatric problems.⁴⁷

⁴⁶ Bruce Perry, and Oprah Winfrey, *What Happened to You?: Conversations on Trauma, Resilience, and Healing* (New York, NY: Flatiron Books, 2021), Kindle, loc. 31.

⁴⁷ Bruce D. Perry, and Maia Szalavitz, *The Boy Who Was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook: What Traumatized Children Can Teach Us about Loss, Love, and Healing* (New York, NY: Basic Books, 2017), Kindle, loc. 5–7.

Misdiagnosis occurs in many children who suffer such traumatizing events. As individuals "coincidentally" develop symptoms of depression, anxiety, or attention problems, trauma histories often lose relevance and are primarily treated with medication. Presently, doctors prescribe antipsychotic medications to half a million children in the United States. Children from low-income backgrounds are four times more prone to receive antipsychotic drugs than those with private insurance. Caregivers frequently administer these medications to abused and neglected children to increase compliance and cooperation.⁴⁸

The challenge arises when attempting to understand a traumatic experience through someone else's perspective; trauma approached in this manner is in error. As stated previously, most people have or will experience trauma at some point in their lives. What one person might consider a traumatic experience might be trivial for another. Society has proven to be grossly underequipped in how to deal with traumatic life experiences and become experts in not dealing but coping.⁴⁹ Subsequently, one can be profoundly and swiftly transformed by childhood trauma. Children develop resilience as early life experiences shape their stress patterns. While the effects may not always be readily apparent to an untrained eye, a deeper understanding of what trauma can do to children reveals its impact across all aspects of their lives. Early painful experiences create significant contexts in which a child's pain-related thoughts and behaviors become socialized. These childhood Pain experiences lay the foundation for how individuals cope with pain throughout their lives.⁵⁰

⁴⁸Bessel Van der Kolk, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (San Francisco, CA: IDreamBooks Inc, 2015), 69.

⁴⁹ McKean and McKean, *The Metanoia Method*, 190.

⁵⁰Melanie Noel, Maria Pavlova, Lauren McCallum, and Jillian Vinall, "Remembering the Hurt of Childhood: A Psychological Review and Call for Future Research." *Canadian Psychology* 58, no. 1 (2017): 58-68, accessed September 2, 2022,

In the book "*The Boy Who Was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook: What Traumatized Children Can Teach Us about Loss, Love, and Healing*," Dr. Perry, along with co-author Dr. Maia Szalavitz, reports an extensive survey conducted within the past year revealing that approximately 1 in 8 children under the age of 17 had experienced some form of severe maltreatment by adults. Additionally, 27 percent of women and 16 percent of men admitted to being victims of child sexual abuse.⁵¹ A national survey in 1995 found that 6 percent of mothers and 3 percent of fathers admitted to physically abusing their children. An estimated 3 million official child abuse or neglect reports in 2004 to child protection agencies were received, with 872,000 confirmed cases. To put it differently, for each soldier deployed in a foreign war zone, ten children face danger within the confines of their own homes.⁵² The reported numbers are likely far lower than the actual figures.

Furthermore, researchers estimate that each year, 10 million American children witness domestic violence, and there is an expectation that 4 percent of children will experience the death of a parent. The survival of trauma experienced physically, emotionally, and psychologically depends on the trustworthiness and reliability of the adults around them. Adverse Childhood Experiences (commonly known as ACEs) significantly impact individuals' health in adulthood, leading to a higher risk and frequency of illness.⁵³ While this does not imply that all children

https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/remembering-hurt-childhood-psychological-review/docview/1877753306/se-2.

⁵¹ Perry and Szalavitz, *The Boy Who Was Raised as a Dog*, 7-9.

⁵² Bessel Van der Kolk, The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma (San Francisco, CA: IDreamBooks Inc, 2015), 44.

⁵³ Melanie Noel, Maria Pavlova, Lauren McCallum, and Jillian Vinall, "Remembering the Hurt of Childhood: A Psychological Review and Call for Future Research." *Canadian Psychology* 58, no. 1 (2017): 58-68, accessed September 2, 2022.

https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/remembering-hurt-childhood-psychological-review/docview/1877753306/se-2.

with adverse experiences are severely "damaged" by the trauma, moderate estimates indicate that 8 million American children suffer from medical conditions related to acute, diagnosable traumarelated psychiatric issues.

In a study involving patients between the ages of 10 and 16 exposed to trauma, Dr. Nadine Harris found that all had symptoms of post-traumatic stress disorder (PTSD). Most of her patients had experienced multiple traumatic events, lived in poverty, and frequently witnessed violent acts or endured physical and emotional abuse.⁵⁴ Numerous studies conducted over the last two decades have consistently identified connections between Adverse Childhood Experiences (ACEs) and subsequent health outcomes. For instance, encountering ACEs has been linked to heightened sleep disruptions, elevated stress and anxiety levels, reduced consumption of fruits and vegetables, compromised executive functioning, decreased perceived psychological well-being, diminished gratitude, and reduced family closeness during the middle and later stages of adulthood.⁵⁵ Over the past decades, awareness of developmental trauma and ACEs has seen an explosive expansion in mental, physical, and societal health has explosively expanded.⁵⁶

Implementation of "trauma-informed," "trauma-aware," "trauma-focused," and "ACEaware" initiatives is becoming increasingly common in public and private educational systems,

⁵⁴ Nadine Burke Harris, *The Deepest Well: Healing the Long-Term Effects of Childhood Adversity* (Boston: Mariner Books/HarperCollins, 2021), Kindle, loc. 58.

⁵⁵ Alice Ann Crandall, Jacob R. Miller, Aaron Cheung, Lynneth Kirsten Novilla, Rozalyn Glade, M. Lelinneth B. Novilla, Brianna M. Magnusson, Barbara L. Leavitt, Michael D. Barnes, and Carl L. Hanson, "ACEs and counter-ACEs: How positive and negative childhood experiences influence adult health," *Child Abuse & Neglect*, vol. 96 (2019): 104089, accessed November 3, 2023, <u>https://doi.org/10.1016/j.chiabu.2019.104089</u>.

⁵⁶L. Starecheski, "Take the ACE Quiz - and Learn What It Does and Doesn't Mean," *NPR*, 2015, accessed December 4, 2022, <u>https://www.npr.org/sections/health-shots/2015/03/02/387007941/take-the-ace-quiz-and-learn-what-it-does-and-doesnt-mean</u>.

child welfare, juvenile justice, health, mental health, and more.⁵⁷ Towards the end of the 20th Century, the health maintenance organization Kaiser Permanente developed the ACEs survey. More than 17,000 health maintenance organization members participated in the survey, revealing a strong, graded relationship between exposure to abuse, neglect, and family dysfunctions between the ages of 0-18 and multiple risk factors for several diseases and leading causes of death in adults. A global epidemiological confirmation has made ACE an indicator of conditions and circumstances of importance for toxic early life stress that profoundly affects children, molding intergenerational transmission of trauma and life and health as adults.⁵⁸

Effects of ACE

In *"The Metanoia Method: How the Brain, Body, and Bible Work,*" Kent and Heather conclude that nearly all "dis-ease" in a person's body and mind originates from perceived negative experiences. Scientists have established a strong correlation between adverse childhood experiences, childhood stress, and autoimmune diseases in both children and adults.⁵⁹ Sven-Olof Andersson claims that positive experiences during childhood, which strengthen biological systems in developmental years, establish lifelong health and well-being.⁶⁰ Insufficient protective measures and resilience due to early childhood trauma or stress have led to disruptions in

⁵⁷ Eric Whitney et al., "Diagnoses and Treatment in Juvenile Detention Before and After Evaluation by Facility-Based Mental Health Service," *Journal of the American Academy of Child & Adolescent Psychiatry* 61, no. 10 (2022): 1203-1205, accessed November 28, 2023, <u>https://doi.org/10.1016/j.jaac.2022.05.009</u>.

⁵⁸ Sven-Olof Andersson et al. "Adverse Childhood Experiences Are Associated with Choice of Partner, Both Partners' Relationship and Psychosocial Health as Reported One Year After Birth of a Common Child. A Cross-Sectional Study." *PloS* 16, (2021): e0244696, accessed September 7, 2022, doi:10.1371/journal.pone.0244696.

⁵⁹ Harris, Burke Nadine. The Deepest Well: Healing the Long-Term Effects of Childhood Adversity. Boston: Mariner Books/HarperCollins, 2021. Kindle.

developing brain architecture and other organs during maturation and metabolic changes, leading to health complications, morbidity, and mortality in adulthood.⁶¹

As children grow, their mental capacity to understand and set standards for what they deserve in life diminishes through trauma. Life becomes complicated, leading to addictions, self-sabotage, promiscuity, and acts of violence due to an inability to set standards for what they deserve. Research has demonstrated that adverse childhood experiences have far-reaching impacts on fundamental psychological functions throughout adulthood, especially those connected to reward and emotion, which are pivotal in shaping moral decision-making.⁶² Humans are innately equipped to adapt to life changes to survive. Unfortunately, these adaptations often become their perceptions of reality, forming core belief structures that limit their capacity to see the truth and develop safe and nurturing relationships with the people they encounter.

Childhood trauma, a non-specific risk factor for psychiatric disorders, elevates the likelihood of developing conditions such as psychotic disorders, mood disorders, and personality disorders, among others. This adverse experience exerts physiological effects that encompass inflammatory responses observable in blood markers, alterations in autonomic and parasympathetic nervous system activity, and, notably, impacts on the developing brain, particularly during critical developmental stages.⁶³ The effect of childhood trauma varies with

⁶¹ Ibid.

⁶²Emmett M. Larsen, Luz H. Ospina, Armando Cuesta-Diaz, Antonio Vian-Lains, George C. Nitzburg, Sandra Mulaimovic, Asya Latifoglu, Rosarito Clari, and Katherine E. Burdick, "Effects of childhood trauma on adult moral decision-making: Clinical correlates and insights from bipolar disorder," *Journal of Affective Disorders*, vol. 244 (2019): 180-186, accessed November 3, 2023, https://doi.org/10.1016/j.jad.2018.10.002.

⁶³ Aristotle N. Voineskos, "Mapping Effects of Childhood Trauma onto Brain Systems and Behavior," *Biological Psychiatry* 88, no. 11 (2020): 810-811, accessed November 3, 2023. https://doi.org/10.1016/j.biopsych.2020.08.009.

the age at which the traumatic event occurs. According to Dr. Perry and Szalavitz, a toddler, unable to articulate their feelings, may develop an aversion to touch, leading to enduring intimacy and relationship complications and persistent anxiety following repetitive and painful sexual abuse.⁶⁴ In contrast, a 10-year-old experiencing similar abuse is more likely to develop specific fears and consciously avoid triggers associated with the abuser, location, and related behaviors, with anxiety persisting into adulthood when reminded of the trauma. Older children may experience complex emotions like guilt and shame, mediated by a less-developed cortex, rendering these feelings less likely in cases of abuse beginning and ending at a younger age. Neuroimaging studies further illuminate these age-related effects, showing that childhood trauma can lead to unfavorable alterations in brain regions such as the amygdala, hippocampus, prefrontal cortex, insular, and cingulate gyrus, impacting processes like reward processing, emotional regulation, cognitive control, and executive function. Additionally, diffusion tensor imaging reveals disruptions in white matter connectivity and inter-regional communication among individuals who have experienced trauma.⁶⁵

Compared to any other genetic disease, Dr. Harris has seen transmission more from parent to child is toxic stress. It is essential to remember that caregivers were once children themselves, and the effects of trauma ripple through generations and communities. Dr. Perry suggests it is imperative to ask the central question: "What happened to you?⁶⁶ If 50 million

⁶⁴ Perry, Bruce D., and Maia Szalavitz, "The Boy Who Was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook," *What Traumatized Children Can Teach Us about Loss, Love, and Healing,* (New York, NY: Basic Books, 2017). Kindle.

⁶⁵ J. Cai, J. Li, D. Liu, S. Gao, Y. Zhao, J. Zhang, and Q. Liu, "Long-term effects of childhood trauma subtypes on adult brain function," *Brain and Behavior* 13, no. 5 (2023), accessed November 3, 2023, https://doi.org/10.1002/brb3.2981.

⁶⁶ Perry, Bruce, and Oprah Winfrey, "What Happened to You?" *Conversations on Trauma, Resilience, and Healing*, (New York, NY: Flatiron Books, 2021). Kindle.

children have experienced trauma, then there are countless millions of adults, many of whom are parents or have contact with children, who carry their unresolved pain from childhood into adulthood. Their pain can manifest in their relationships with others, affecting job performance and many other aspects of their lives. This pain is often passed on to their children, creating a long-enduring cycle through generations without fully understanding the problem. McKean indicates that specific health or behavioral issues can skip a generation or continue through many generations.

Many psychologists have observed that certain characteristics and behaviors, such as molestation, anger, and rage, often get passed down to the next generation. Epigenetic research provides evidence that enduring pain is not necessarily relieved through natural processes or the mere passage of time. Even in cases where the person who endured the original trauma has passed away, their story remains hidden within years of silence, with fragments of their life experiences, memories, and physical sensations seemingly reaching out from the past in search of resolution within the minds and bodies of those currently living.⁶⁷ These findings underscore the profound and lasting impact trauma can have on individuals and subsequent generations.⁶⁸ Understanding the enduring nature of these effects is essential for developing comprehensive approaches to healing and addressing the far-reaching consequences of unresolved pain.

However, according to Dr. Bruce and Szalavitz, the most traumatic aspect of any experience is the shattering of connections with another human being. Experiencing harm from

⁶⁷ Mark Wolyn, *It Didn't Start with You: How Inherited Family Trauma Shapes Who We Are and How to End the Cycle* S.l.: Vermilion, 2022, 1.

⁶⁸Tia Leanne Lawler, "A Phenomenological Study Exploring the Experiences of Adult Survivors of Interpersonal Childhood Trauma Have with Forgiveness in Their Healing Journey," PhD diss., *Liberty University*, 2023. ProQuest Dissertations & Theses Global.

those meant to display love, feeling abandoned, and lacking the relationships that are supposed to make one feel safe and valued constitute horrible life experiences. Adverse childhood experiences profoundly affect the lives and health of individuals, a fact that is particularly evident in couples where both members have experienced multiple offenses.⁶⁹ Outside of the context of human relationships, wholly misunderstood is trauma and the response to it, whether the survival of a natural disaster or long-lasting sexual abuse; what is more important is how the effects of the experience on the individual's relationship with their loved ones, to themselves, and the world.⁷⁰

Psychological Effects of ACE

As relational creatures at our core, it is crucial to recognize that adverse childhood experiences (ACE) have profound physiological and psychological effects. These experiences can lead to behaviors such as isolation, disconnection, and overwhelming feelings of loneliness, contributing to other mental and emotional problems. The long-lasting consequences of childhood adversity extend beyond the immediate impact on individuals; it also significantly influences public health. Research indicates a relationship between childhood trauma and depressive symptoms, and the presence of psychological resilience and daily stress partially explains this relationship.⁷¹

⁶⁹Noel, Melanie, Maria Pavlova, Lauren McCallum, and Jillian Vinall. "Remembering the Hurt of Childhood: A Psychological Review and Call for Future Research." *Canadian Psychology* 58, no. 1 (2017): 58–68, accessed September 2, 2022.

https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/remembering-hurt-childhood-psychological-review/docview/1877753306/se-2.

⁷⁰ Perry and Szalavitz, *The Boy Who Was Raised as a Dog*, 236-237.

⁷¹ Harris, Burke Nadine. The Deepest Well: Healing the Long-Term Effects of Childhood Adversity. Boston: Mariner Books/HarperCollins, 2021. Kindle.

In other words, childhood trauma not only directly impacts depressive symptoms but also exerts an indirect influence through a mediating pathway, encompassing resilience and daily stress. The combined mediation pathway, encompassing resilience and daily stress, accounts for 43.31% of the overall effect.⁷² Approximately 45 percent of all childhood mental health disorders and 30 percent of mental health disorders in adults are estimated to be closely related to traumatic experiences during early life. These percentages emphasize the importance of gaining a thorough understanding of these issues.⁷³

Historically, the lasting damages caused by psychological trauma, particularly in children, were inadequately acknowledged, often accompanied by the misconception that children were inherently resilient and capable of bouncing back effortlessly from adversity. Early experiences shape resilient children, and their resilience is not solely a product of innate qualities. The developing brain is highly adaptable and receptive to various experiences during early life, be they positive or negative. This adaptability is why we swiftly acquire language, social understanding, motor skills, and other fundamental abilities in childhood, often referred to as "formative" experiences. The interplay of stress and nurturing patterns encountered during these critical initial stages of life cultivates a child's resilience.⁷⁴

However, contemporary research has debunked this notion, demonstrating the profound and lasting effects of trauma on mental health and behavioral and emotional development. We

⁷²K. Zheng et al., "Psychological resilience and daily stress mediate the effect of childhood trauma on depression," *Child Abuse & Neglect* 125 (2022): 105485, accessed November 3, 2023, https://doi.org/10.1016/j.chiabu.2022.105485.

⁷³ Perry and Winfrey, What Happened to You, 103

⁷⁴J Grogan, "The Myth of Resilient Children," *Psychology Today*, 2013, accessed November 3, 2023. https://www.psychologytoday.com/us/blog/encountering-america/201302/the-myth-resilient-children.

now recognize that conditions like attention deficit disorder (ADD) and hyperactivity have intricate relationships with early trauma, which has significant implications for long-term well-being. Oppositional-defiant diseases further emphasize that a child's ability to bounce back is not guaranteed, highlighting the importance of appropriate intervention and support for affected individuals.⁷⁵

Caroline Leafe's observations shed light on the relatively stable rate of major depression, which remained around 4 percent between 1990 and 2010. Modern psychological and psychiatric approaches may attribute this stability to an oversimplification of the complexities of the human mind.⁷⁶ These approaches often center around prescribing antidepressants and antipsychotic medications, which, while beneficial for some individuals, may not fully address the intricacies of mental health challenges. Antidepressants rank as the primary pharmacological option for managing depression and anxiety, with 12.7% of individuals aged 12 and above in the United States reporting their use within the past month. It is noteworthy that half of the antidepressant users in the U.S. have been on these medications for a minimum of five years and one-quarter for a decade or more, despite the absence of apparent clinical justification for prolonged, continued use in the majority of patients.⁷⁷ A more biblical approach, encompassing a deep understanding of the impact of childhood trauma, is essential to provide comprehensive care and support for

⁷⁵Perry and Szalavitz, The Boy Who Was Raised as a Dog, 5-7.

⁷⁶ Leaf and Caroline, "Cleaning up Your Mental Mess," 5 Simple, Scientifically Proven Steps to Reduce Anxiety, Stress, and Toxic Thinking, (Baker Books, 2021)

⁷⁷ Shannon Hughes et al., "A Holistic Self-Learning Approach for Young Adult Depression and Anxiety Compared to Medication-Based Treatment-as-Usual," *Community Mental Health Journal* 57, no. 2 (2020): 392–402, accessed November 3, 2023. doi:10.1007/s10597-020-00666-9.

those affected by early adversity, addressing the enduring consequences and promoting overall well-being.⁷⁸

Physical Effects of ACE

Deep-seated and subconscious programs in a child's understanding can impact them both psychologically and physically. Being a parent, coupled with subconscious fear or intimidation, is often at the core of infertility. Infertility may also signify deep-rooted unresolved issues with a parent. A person with too many responsibilities as a child, such as caring for younger siblings, can develop a deep fear that raising a child is overwhelming and time-consuming, leaving little free time.⁷⁹ There is substantiating evidence indicating that children born to mothers with depression experience elevated stress levels when compared to children born to non-depressed mothers, both within and beyond the household. This observation hints at a potential contributing factor in the transmission of depression across generations. In alignment with a broader body of research on stress generation, this investigation has predominantly centered on interpersonal stress. It has consistently revealed that children of depressed mothers tend to encounter elevated levels of both persistent and occasional interpersonal stress, distinguishing them from their counterparts born to non-depressed mothers.⁸⁰ Studies progressively solidify childhood exposure to chronic stress levels as they reveal alterations in immune, nervous, and endocrine systems, producing physiological abnormalities throughout allostatic systems, biological aging, and

⁷⁸ Leaf, *Cleaning up Your Mental Mess*, 18.

⁷⁹Pedro Cheung, "12 Ways Parents Provoke Children to Anger," *BibleSumo*, (2021), accessed September 15, 2021https://www.biblesumo.com/ways-parents-provoke-children-anger/

⁸⁰Cope Feurer, Constance L. Hammen, and Brandon E. Gibb, "Chronic and Episodic Stress in Children of Depressed Mothers," *Journal of Clinical Child & Adolescent Psychology* 45, no. 3 (2016): 270-278, accessed November 3, 2023, DOI: 10.1080/15374416.2014.963859.

health. Examining chronic stress may be necessary as it relates to the intergenerational transmission of ACE.⁸¹

Many adults experience adversity or trauma during their childhood; as a pediatrician, Dr. Harris was aware of the child's exposure to trauma through the adult. Still, they often revealed that the adversities experienced were far more significant than those of the child evaluated.⁸² The adults shared stories of physical, verbal, and sexual abuse, exposure to domestic violence, or witnessing a violent assault involving someone shot or stabbed.⁸³ Ironically, these individuals had arthritis, kidney failure, heart disease, chronic lung diseases, or cancer. As her patients proved to be a product of their environment compared to other districts in the city, the children were 2 ½ times more likely to develop pneumonia than those living in areas with lower crime rates and above poverty levels. The patients were six times as likely to develop asthma and 12 times as likely to create uncontrolled diabetes. Leafe adds that the core of up to 90 percent of illnesses, including diabetes, heart disease, and cancer, is toxic stress.⁸⁴ When in a state of toxic thinking, the body releases stress hormones such as cortisol, ACTH, and even prolactin. The stress hormones begin to shut down the immune system to preserve the body's energy for a flight-or-fight reaction.⁸⁵

85 Ibid.

⁸¹ Sven-Olof Andersson et al., "Adverse Childhood Experiences are associated with choice of partner, both partners' relationship and psychosocial health as reported one year after birth of a common child. A cross-sectional study," *PloS* 16 (2021): e0244696, accessed September 7, 2022, doi:10.1371/journal.pone.0244696.

⁸² Harris and Burke Nadine, "The Deepest Well, "*Healing the Long-Term Effects of Childhood Adversity*, (Boston: Mariner Books/HarperCollins, 2021), Kindle.

⁸³Jessica Dym Bartlett, and Sheila Smith. "The Role of Early Care and Education in Addressing Early Childhood Trauma." *American Journal of Community Psychology* 64, no. 3–4 (2019): 359–72, accessed November 3, 2023. doi:10.1002/ajcp.12380.

⁸⁴ Leaf, Cleaning up Your Mental Mess, 116.

Individuals with PTSD who have endured childhood abuse or experienced partner violence during adolescence or adulthood reported experiencing twice as many symptoms when their overall health was assessed compared to their counterparts of the same age who had not experienced abuse.⁸⁶ Trauma survivors have shown an increased likelihood of substance abuse and a greater tendency to report various chronic pain conditions. Data derived from the National Comorbidity Study has revealed that individuals with a history of childhood or partner abuse tend to report higher pain levels when describing their current health symptoms. A study by Van Houdenhove, Luyten, and Egle in 2009 discovered that 64% of patients diagnosed with either fibromyalgia or chronic fatigue syndrome had encountered at least one form of traumatic experience during childhood or adulthood.⁸⁷ A wide range of traumatic exposures and experiences can lead to adverse health effects, with some of the health consequences stemming directly from injuries sustained during traumatic incidents.⁸⁸ Nearly 1/3 of abused children will encounter psychological problems as a result, and research continuously proves how physical issues such as cancer, heart disease, and obesity are more likely to develop later in life for a traumatized child. Like an infant's brain, the nervous system is underdeveloped, and the immune system goes through a developmental stage after birth.

⁸⁶Jessica Dym Bartlett, and Sheila Smith. "The Role of Early Care and Education in Addressing Early Childhood Trauma." *American Journal of Community Psychology* 64, no. 3–4 (2019): 359–72, accessed November 3, 2023. doi:10.1002/ajcp.12380.

⁸⁷ Kathleen Kendall-Tackett, "Psychological Trauma and Physical Health: A Psychoneuroimmunology Approach to Etiology of Negative Health Effects and Possible Interventions," *Psychological Trauma: Theory, Research, Practice, and Policy* 1, no. 1 (2009): 35–48, accessed November 28, 2023.

⁸⁸ Rachana Kumari and Anjana Mukhopadhyay, "Psychological Trauma and Resulting Physical Illness: A Review," *SIS Journal of Projective Psychology & Mental Health* 27, no. 2 (July 2020): 98-104, accessed November 3, 2023, <u>https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/psychological-trauma-resulting-physical-illness/docview/2423817704/se-2.</u>

Autoimmune diseases like multiple sclerosis, rheumatoid arthritis, and inflammatory bowel disease result from increased inflammation, which attacks the body's tissues. Exposure to early adversity increases inflammation in a child, making developing an autoimmune disorder more likely.⁸⁹ Multiple research studies and statistics connect sexual abuse with obesity. Weight gain often functions as a symbolic "barrier," providing emotional security by discouraging unwanted sexual advances. McKean observes that these are subconscious determinations, often unlinked to a person's conscious awareness of their weight-related issues. "The statistics and research linking obesity with prior sexual abuse are plentiful. Weight gain is often a metaphoric "barrier" of protection, almost like emotional padding."⁹⁰

The Neurological Aftermath: Trauma's Impact on the Brain

In laboratory settings, researchers have observed that stressful experiences, particularly in early life, can alter young animals' brains. Numerous animal studies have demonstrated that even seemingly minor stress during infancy can lead to enduring changes in brain architecture and chemistry, consequently influencing behavior. As infants develop, their engagement in actions and the experience of emotions form the fundamental building blocks of their cognitive processes. Childhood neglect scores positively correlated with the efficiency of information transmission within brain regions associated with cognitive and executive functions, such as the temporal lobe, insular cortex, and parahippocampal gyrus.⁹¹ Conversely, scores indicating childhood abuse were strongly linked to functional reconfigurations of brain regions influenced

⁸⁹ Harris, *The Deepest Well*, 74.

⁹⁰ McKean and McKean, *The Metanoia Method*, 228.

⁹¹ Harris, Burke Nadine, "The Deepest Well," *Healing the Long-Term Effects of Childhood Adversity*, (Boston: Mariner Books/HarperCollins, 2021), Kindle.

by an underdeveloped ego defense system and compromised emotional processing. Specifically, abuse scores exhibited a positive relationship with the efficiency of information transmission in the visual, auditory, linguistic, and motor cortex. Researchers found that scores related to emotional and physical abuse connected to isolated connections in the temporal cortex and supplementary motor cortex.⁹²

Dr. Nadine Harris observes that when a child's brain, which has endured adversity, is examined with an MRI machine, one can find measurable changes to the brain structures.⁹³ At any age, no matter what has happened to a person's brain, changes occur in neuroplasticity, which refers to the brain's ability to adapt, change, and reorganize its structure and functions in response to experiences, learning, and environmental influences. "Human beings are learning machines! From the moment we are born (and even before that), we are gaining skills. Some of these skills are fundamental and begin to develop even before birth. Breathing, eating, hearing; these skills (though done differently inside the womb) are being developed even before our birth."⁹⁴ Among the sensory pathways involved in these early experiences, the sense of touch is the first to develop and is the most well-developed at birth compared to the senses of sight, smell, taste, and hearing. Research involving premature infants has shown that gentle skin-to-skin contact can have several positive effects, including promoting weight gain, improving sleep patterns, and accelerating maturation. Remarkably, on average, premature infants receiving such gentle massages could leave the hospital almost a week earlier.

⁹² J. Cai, J. Li, D. Liu, S. Gao, Y. Zhao, J. Zhang, and Q. Liu, "Long-term effects of childhood trauma subtypes on adult brain function," *Brain and Behavior* 13, no. 5 (2023), accessed November 3, 2023, https://doi.org/10.1002/brb3.2981.

⁹³ Ibid.

⁹⁴ McKean and McKean, *The Metanoia Method*, 22.

From the prenatal period onward, throughout birth and beyond, the brain continuously processes the ceaseless stream of incoming signals from one's senses daily. "Sight, sound, touch, smell, taste, all of the raw sensory data that will result in these sensations enter the lower parts of the brain and begin a multistage process of being categorized, compared to previously stored patterns, and ultimately, if necessary, acted upon."95 The recurring, familiar, and safe pattern of incoming signals often aligns with deeply ingrained memory templates, leading your brain to disregard them effectively. The phenomenon is called habituation, which is a type of tolerance. During the fetus's utero phase, one initiates the process of acquiring specific fundamental operating systems, kickstarting the growth of the brain. Nevertheless, where did this crucial information originate? The answer lies in a person's DNA, inherited from their parents. Recent research in human genetics suggests that our DNA can express inherited trauma through biochemical processes within the human egg, sperm, and uterus. Although ongoing investigations explore the epigenetic transmission of trauma, there is sufficient data to support that traumatic experiences trigger significant physical responses, including biochemical changes.⁹⁶ These changes can persist throughout a person's lifetime, transmitting epigenetic effects across generations.⁹⁷ However, it is essential to recognize that this genetic heritage is not solely from a person's immediate lineage but also encompasses the accumulated knowledge of hundreds of thousands of years of human brain evolution. Assuming no significant genetic or

⁹⁵ Bruce D. Perry and Maia Szalavitz, *The Boy Who Was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook: What Traumatized Children Can Teach Us about Loss, Love, and Healing* (New York, NY: Basic Books, 2017), Kindle, loc. 50-51.

⁹⁶ Mark Wolyn, *It Didn't Start with You: How Inherited Family Trauma Shapes Who We Are and How to End the Cycle* S.1.: Vermilion, 2022.

⁹⁷ Shannon Craigo-Snell, "Generational Joy: Affections, Epigenetics, and Trauma," *Liturgy* 35, no. 4 (2020): 58-66, accessed November 3, 2023, DOI: 10.1080/0458063X.2020.1832852.

environmental interferences, each person entered the world with specific innate abilities firmly embedded, or "hardwired," into their brain, such as the natural ability to breathe.⁹⁸

The impact of early life experiences on a child's development endures over time. The quality of care for an infant is among the most pivotal elements in fostering growth and progress. Negative social occurrences during infancy hold the potential to modify a child's developmental path and raise the likelihood of developing various psychiatric disorders throughout their lifetime.⁹⁹ What happens in infancy profoundly impacts their capacity to love and receive love. It is commonly understood that premature babies face a higher risk of neglect because of the heightened demands they place on caregivers, including irregular sleep patterns and frequent feedings. These demands can sometimes overwhelm exhausted new parents. However, it is essential to note that if an infant does not receive the crucial elements of caregiving, such as reciprocal eye contact, engaging facial expressions, comforting cuddles, and affectionate kisses, it can lead to hormonal and neurological damage.¹⁰⁰ This damage can hinder a child's average growth and development. Even if a baby receives adequate nutrition, their physical and developmental progress may become compromised without proper care and attention.¹⁰¹ Dr. Harris knew that in a child's early years, their brain forges over one million neural connections per second. Nevertheless, during her medical residency, she witnessed that this process could

⁹⁸McKean and McKean, *The Metanoia Method*, 93.

⁹⁹ J. Boulanger-Bertolus, A.M. White, and J. Debiec, "Enduring Neural and Behavioral Effects of Early Life Adversity in Infancy: Consequences of Maternal Abuse and Neglect, Trauma and Fear," *Current Behavioral Neuroscience Reports* 4 (2017): 107–116, accessed November 3, 2023, <u>https://doi.org/10.1007/s40473-017-0112-</u> <u>Y</u>.

¹⁰⁰ Nadine Burke Harris, *The Deepest Well: Healing the Long-Term Effects of Childhood Adversity* (Boston: Mariner Books/HarperCollins, 2021), Kindle, loc. 78.

result in significant and adverse outcomes when it was interrupted by factors such as toxic exposure, illness, or physical trauma.

Studies conducted with humans and non-human animals indicate a sensitive period in early life when attachment learning occurs, regardless of the infant's quality of care, whether nurturing or maltreatment. This attachment system provides immediate advantages, as infants will always form attachments. However, early-life maltreatment has long-term adverse effects on the brain and behavior, with the most significant consequences of early-life trauma emerging during the peri-adolescent stage. While experiencing trauma during the brain's development can disrupt the developmental process, growing evidence suggests that trauma processing within the infant attachment circuits may integrate the trauma into attachment and modify the emotional brain circuits.¹⁰²

During the formative years of life, the brain undergoes rapid development, simultaneously forging numerous connections and shaping our understanding of how the world operates.¹⁰³ Recognizing that these early experiences leave a more profound imprint on infants than younger children is crucial. Insights from neuroscience reveal that our focus and practices act as a filter through which we perceive the world around us. The brain serves as the command center for our entire body, and it is pivotal to acknowledge that every thought and action can be considered a skill. This recognition holds the potential to trigger a profound shift in perspective. Understanding that the body relies on the brain's approval to initiate any action is imperative.

¹⁰² Naeem, N., R.M. Zanca, S. Weinstein, A. Urquieta, A. Sosa, B. Yu, and R.M. Sullivan, "The Neurobiology of Infant Attachment-Trauma and Disruption of Parent–Infant Interactions," *Frontiers in Behavioral Neuroscience* 16 (2022), accessed November 3, 2023, <u>https://doi.org/10.3389/fnbeh.2022.882464</u>.

¹⁰³ McKean and McKean, *The Metanoia Method*, 119.

Consequently, the brain's routines and repetitions are paramount in various aspects of life, particularly during developmental stages.¹⁰⁴

Trauma, whether resulting from actions inflicted upon you or actions you have taken yourself, typically presents significant challenges when engaging in intimate relationships. After experiencing something profoundly distressing, rebuilding trust in oneself and others becomes daunting.¹⁰⁵ Researchers have utilized the Rorschach test to examine the impact of trauma on various aspects of cognitive functioning, such as reality assessment, problem-solving, stress management, emotional regulation, perception of the world, and self and interpersonal relationships.¹⁰⁶

Among researchers studying different forms of trauma, a prevalent discovery has been the elevated occurrence of compromised reality assessment and disordered thinking in Rorschach assessments.¹⁰⁷ The Rorschach tests have also revealed that individuals who have experienced trauma perceive the world differently than those who have not. How does one become open to an intimate relationship after enduring a brutal violation? While most of us see a person walking down the street as simply taking a walk, a victim of assault may interpret that same person as a potential threat, leading to panic. An ordinary child might find a stern schoolteacher intimidating. However, for a child who has suffered abuse from a stepfather, that teacher might be viewed as a

¹⁰⁴Alan Woodruff, "What Is a Neuron?" *Queensland Brain Institute - University of Queensland*, 2019, accessed November 6, 2022, <u>https://qbi.uq.edu.au/brain/brain-anatomy/what-neuron</u>.

¹⁰⁵Bessel Van der Kolk, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (San Francisco, CA: IDreamBooks Inc, 2015), 40.

¹⁰⁶Stephen Arterburn, 7 Ways to Choose Healing (S.L.: Aspire Pr, 2017).

¹⁰⁷ Nancy Kaser-Boyd, "The Rorschach and Trauma – An Update," *Rorschachiana, The Rorschach Test Today: An Update on the Research* 42, no. 2 (2021): 118–38, accessed November 3, 2023, doi:10.1027/1192-5604/a000133.

tormentor, inciting either a burst of anger or a fearful retreat to a corner. After experiencing trauma, the world becomes sharply divided between those who have undergone the ordeal and those who have not. Those who have not shared the traumatic experience can be difficult to trust because they often cannot fully comprehend it.¹⁰⁸ Regrettably, this divide frequently includes spouses, children, and colleagues. It is crucial to recognize that trauma is not merely an event that occurred in the past; it also represents the indelible mark left by that experience on one's mind, brain, and body.¹⁰⁹

The misconception of a fixed brain: "This is just how I was born." However, scientific understanding has revealed that our brains are not static; instead, they are adaptable. The brain can adapt to change in response to structured and repetitive experiences.¹¹⁰ The brain becomes more deeply ingrained with each repetition of something. The adaptability to change is known as the brain's "plasticity." Neuroplasticity refers to the brain's capacity to adapt and change in response to new experiences, involving structural, biochemical, and network-level adjustments and the generation of new neurons in adult neurogenesis. Neuroplasticity is connected to functional recovery, leading to adaptive behavioral changes and preparing functional systems for further adaptability.¹¹¹ Consequently, these neuroplastic mechanisms provide a promising avenue for gaining insights into the causes and treatment of psychiatric and neurological disorders.¹¹²

¹⁰⁸A.E. Ermer, K.N. Matera, and S. Raymond, "The Reflections on Forgiveness Framework: A Framework to Understand Older Adults' Forgiveness Development over the Life Course," *Journal of Adult Development* 29 (2022): 255–264, accessed September 7, 2022, <u>https://doi-org.ezproxy.liberty.edu/10.1007/s10804-022-09400-z/</u>.

¹⁰⁹ Bessel Van der Kolk, *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma* (San Francisco, CA: IDreamBooks Inc, 2015), 40.

¹¹⁰ Daniel G. Amen, *Change Your Brain, Change Your Life* (New York: Harmony Books, 2015), Kindle, loc. 164.

¹¹¹Alan Woodruff, "What Is a Neuron?" *Queensland Brain Institute - University of Queensland*, 2019, accessed November 6, 2022, <u>https://qbi.uq.edu.au/brain/brain-anatomy/what-neuron</u>.

While this principle is evident in how individuals learn skills like the alphabet or riding a bicycle, it also applies in the context of trauma. The greater the repetition or severity of a traumatic experience, the more replays are required to facilitate recovery and restore equilibrium in one's life. Unfortunately, individuals who have endured recurrent adverse childhood experiences face a more formidable task when reshaping the lens through which they perceive the world. The initial impression formed during adolescence becomes lasting, influencing every thought that flows through the brain.

As individuals process each thought, their brain undergoes multifaceted changes at the cellular, molecular, chemical, genetic, and structural levels. Ongoing research consistently demonstrates that every brain's functional, chemical, and physical aspects can be transformed and refined through mental exercise.¹¹³ When toxic stress or trauma permeates the brain, it initiates a complex cascade of physiological and psychological responses. The impact is particularly evident in crucial brain regions within the limbic system, namely the thalamus, amygdala, and hippocampus. Interestingly, these brain areas (the cerebellum, prefrontal cortex, and related neurotransmitters) are the exact mechanisms responsible for our overall well-being. If someone is diagnosed with depression, it is a direct outcome of an imbalance or incongruency somewhere within these systems. The direct correlation between our memories and well-being is hard to miss."¹¹⁴

The thalamus plays a crucial role in transmitting sensory information to the brain. In the context of fear learning and recall, which are processes associated with post-traumatic stress

¹¹² Rúbia Maria Weffort de Oliveira, "Neuroplasticity," *Journal of Chemical Neuroanatomy* 108 (2020): 101822, accessed November 3, 2023, <u>https://doi.org/10.1016/j.jchemneu.2020.101822</u>.

¹¹³ Caroline Leaf, Cleaning up Your Mental Mess: 5 Simple, Scientifically Proven Steps to Reduce Anxiety, Stress, and Toxic Thinking (Grand Rapids, MI: Baker Books, 2021), Kindle, loc. 55.

¹¹⁴ McKean and McKean, *The Metanoia Method*, 170.

disorder (PTSD), the flow of information through the thalamus is particularly significant. In PTSD, individuals often experience re-experiencing symptoms, which are clinical manifestations of fear memory recall. These symptoms frequently involve vivid recollections of sensory and perceptual aspects of the traumatic event. Essentially, the thalamus is instrumental in conveying sensory data related to the traumatic experience, contributing to the reactivation of fearful memories and the sensory components of the trauma that characterize PTSD.¹¹⁵ The thalamus, acting as a gatekeeper, receives sensory signals from various sources, including visual, auditory, and tactile input. It then transmits this information to the respective areas of the cerebral cortex for further processing.

Concurrently, the brain persistently compares current sensory patterns with pre-existing templates and associations. This initial matching occurs in the brain's foundational and primitive regions, which house neural systems dedicated to threat detection. The fear response is not uniform; instead, it is adjusted and finely tuned by the brain based on its assessment of the perceived threat level. As information progresses from this initial processing stage and traverses the brain's neural pathways, it allows for a more comprehensive reexamination of the data, engaging in intricate analysis and integration. However, in the presence of toxic stress or trauma, the thalamus may experience a state of hyperactivity, causing heightened sensitivity to sensory stimuli. Consequently, this elevated sensitivity contributes to the emotional intensity of traumatic memories, amplifying their impact on an individual's psychological well-being.¹¹⁶

¹¹⁵ Isabelle Rosso, Elizabeth Olson, Gwenievere Birster, Scott Rauch, "Thalamus Volumes and Structural Connectivity are Associated With Trauma Re-Experiencing and Fear Extinction Recall," *Biological Psychiatry* 85, no. 10, Supplement (2019), accessed November 3, 2023, doi: <u>https://doi.org/10.1016/j.biopsych.2019.03.566</u>,.

¹¹⁶Daniel J. Siegel and Chloe Drulis, "An Interpersonal Neurobiology Perspective on the Mind and Mental Health: Personal, Public, and Planetary Well-Being," *Annals of General Psychiatry* 22, no. 1 (2023): 5, November 3, 2023, doi:10.1186/s12991-023-00434-5.

The amygdala is central in processing emotions, especially those related to fear and threat detection. "Its primary function is to regulate our fight, flight, or freeze response. When we perceive potential danger at any time during our day, the amygdala kicks in to assist in finding a solution. The subconscious notes the event and files it as "potentially dangerous." It remains there unless another similar event triggers an equal or elevated response; at this point, the subconscious mind files the events as "known to be dangerous."¹¹⁷ The amygdala forges emotional connections with sensory input, aiding our capacity to recognize and respond to potentially dangerous situations. However, the amygdala's response can become dysregulated, picturing the presence of trauma. This dysregulation manifests as heightened emotional reactivity, increased anxiety, and a greater tendency to interpret neutral stimuli as threatening. In children with toxic stress, the activity of the prefrontal cortex becomes inhibited in two ways. "Firstly, the overactive amygdala sends messages to the prefrontal cortex (PFC), instructing it to decrease its functioning because something scary is happening; reasoning should not interfere with survival. Secondly, the locus coeruleus floods the brain with noradrenaline, compromising the ability to override instincts and impulses."¹¹⁸ These alterations in the functioning of the amygdala can significantly contribute to the endurance and intensity of traumatic emotional memories.

At any stage of life, when individuals encounter a frightening situation, their brains gradually deactivate their higher cortical regions. Functions such as Planning and even the sensation of hunger become temporarily less accessible as they are not immediately relevant to our survival in the face of immediate danger. Often, the ability to engage in deliberate "thinking"

¹¹⁷ McKean and McKean, The Metanoia Method, 103.

¹¹⁸ Harris, *The Deepest Well*, 68.

or verbal communication may also become impaired during an acute threat. During trauma, the speech center and the medial prefrontal cortex, both responsible for present-moment experience, shut down. This shutdown results in a feeling of speechless terror, where individuals grapple with finding words. Experiencing hindrance in memory-related brain pathways is a common occurrence in threatening situations. When people revisit their traumatic experiences, the frontal lobes become impaired, making it difficult to think and speak.¹¹⁹

However, there is still a form of expression: words, images, and impulses that fragment after a trauma resurface, creating a silent language of our suffering that we carry with us. Nothing gets lost; the pieces just get redirected.¹²⁰ In such situations, the responses are primarily reactive and spontaneous. The mind and body strive to safeguard the individual. In many instances, a child may be physically incapable of fleeing or too small to defend themselves against their abuser. In response, they retreat psychologically into their inner world as a means of self-preservation. In cases of prolonged fear, there is the potential for chronic or near-permanent changes to occur in the brain. The alterations in brain function that stem from enduring fear, particularly when experienced early in life, can lead to a lasting shift towards more impulsive, aggressive, less reflective, and less compassionate ways of interacting with the world.

The hippocampus plays a vital role in memory formation and consolidation, particularly concerning episodic and contextual memories. It serves as the brain's organizer, helping us structure and contextualize information, which is essential for creating a coherent narrative of our experiences. Both Sigmund Freud and his contemporary Carl Jung shared the belief that

¹¹⁹Mark Wolyn, *It Didn't Start with You: How Inherited Family Trauma Shapes Who We Are and How to End the Cycle* S.l.: Vermilion, 2022, 16.

¹²⁰ Mark Wolyn, *It Didn't Start with You: How Inherited Family Trauma Shapes Who We Are and How to End the Cycle* S.1.: Vermilion, 2022, 16.

what remains hidden in our unconscious mind does not disappear but reemerges in our lives as fate or fortune. Essentially, we repeat unconscious patterns until we bring them into conscious awareness. They observed how experiences that are too challenging to process do not fade away on their own but instead remain stored in our unconscious. Freud and Jung noticed how fragments of previously blocked or suppressed life experiences manifest in their patients' words, gestures, and behaviors.¹²¹ In cases where individuals become exposed to severe stress or trauma, the hippocampus may undergo structural changes. "When we experience trauma, our brain becomes laser-focused on the stressful or traumatic details of that experience. But…because of the stress and influence of the various neurotransmitters being released, we will store the memory with less accuracy than how we experienced it."¹²² When these memories resurface, they tend to emphasize the most distressing aspects of the event, triggering the release of the same stress hormones initially associated with it. In essence, the act of remembering can induce a state of stress.

Paradoxically, this process further reinforces and intensifies the memory. The more we revisit and rehearse it, the more ingrained it becomes in our memory. Consequently, it is reasonable to infer that our most traumatic memories will likely be the least accurate representations of the actual events. These alterations in memory can give rise to difficulties in accurately processing and placing traumatic memories within their appropriate context, resulting in fragmented and intrusive recollections that disrupt cognitive and emotional well-being. In this state, a person's reactions tend to be excessive, making broad generalizations, and they may even envision worst-case scenarios. The individual quickly falls into thinking patterns that magnify

¹²¹Mark Wolyn, *It Didn't Start with You: How Inherited Family Trauma Shapes Who We Are and How to End the Cycle S.l.: Vermilion, 2022, 16.*

¹²² McKean and McKean, *The Metanoia Method*, 180.

past issues, place an extreme focus on the future, and underestimate the significance of the present moment and one's capacity to effect change. Unfortunately, this can lead to a misdirection of energy within the brain's internal networks, stored as energy vibrations within proteins along the neural branches, resulting in memories beginning to rattle like an earthquake.¹²³ However, one can break free from this detrimental cycle through effective mind management and support.

As elaborated on by Dr. Bruce Perry, memory represents our capability to carry elements of an experience forward in time. Even our muscles exhibit memory, which is evident in the changes they undergo due to exercise. However, fundamentally, memory is a function of the brain; it defines our identity, allowing our past experiences to shape our future choices and actions.¹²⁴ An illustration of this phenomenon is when a female has experienced physical or sexual abuse from her father. In such cases, her brain establishes associations between men and feelings of threat, anger, and fear, which leads to the formation of a worldview that regards men as inherently dangerous and menacing, with the expectation that they will cause harm to both oneself and loved ones. This deeply ingrained perception of the world can significantly influence how she perceives male figures like teachers or coaches as she encounters non-abusive men through various relationships, whether with her mother or in her own romantic experiences; her perception becomes colored by this pre-existing worldview.

The brain reduces the impact of one's heightened, trauma-related memories by encouraging them to engage in repetitive, controlled "recollection sessions" to regain balance.

¹²³ Caroline Leaf, Cleaning up Your Mental Mess: 5 Simple, Scientifically Proven Steps to Reduce Anxiety, Stress, and Toxic Thinking (Grand Rapids, MI: Baker Books, 2021), Kindle, loc. 118.

¹²⁴ Bruce D. Perry and Maia Szalavitz, *The Boy Who Was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook: What Traumatized Children Can Teach Us about Loss, Love, and Healing* (New York, NY: Basic Books, 2017), Kindle, loc. 31-32.

This process aims to build a degree of tolerance within a sensitized system. In the immediate aftermath of a distressing or traumatic incident, a person often grapples with intrusive thoughts: they repeatedly dwell on the event, it infiltrates their dreams, and it occupies their minds when they would rather it did not.¹²⁵ The individual frequently shares and revisits the experience with trusted friends or loved ones. Some clients have a compulsion to replay their early, damaging relationships. Several know this reenactment, while others bury it deep within their unconscious. When harmful patterns are deeply ingrained but not readily apparent, a considerable portion of therapy is dedicated to bringing these patterns into conscious awareness.¹²⁶ This process often involves facing and working through uncomfortable and sometimes prolonged adverse reactions and impasses in treatment. However, the enduring attachment to these destructive patterns reflects the severity of their past abuse. It serves as a protective mechanism because the scars from traumatic experiences and violations of one's subjectivity in early relationships become ingrained in one's identity.

As a result, their attachment to these harmful patterns is enduring and indicates that their sense of self may become contingent on relationships in adulthood. Regarding reenactment, children may reenact such events through play, drawings, and everyday interactions. "Findings revealed that younger children (i.e., 3- to 4-year-olds) provided less correct information during free recall and made more mistakes (omissions and commissions) compared with 5- to 6-year-olds and 7- to 10-year-olds. Children's postprocedural emotional state predicted children's

¹²⁵ Zhu, Yashuo, et al., "Emotion Regulation of Hippocampus Using Real-Time fMRI Neurofeedback in Healthy Human," *Frontiers in Human Neuroscience* 13, (2019): 242. Accessed September 2, 2022. doi:10.3389/fnhum.2019.00242.

¹²⁶ Ales Zivkovic, "Developmental Trauma and the Bad Object: Attachment, Identity, Reenactments," *Transactional Analysis Journal* 50, no. 3 (2020): 251-265, accessed November 3, 2023, DOI: 10.1080/03621537.2020.1771033.

memory accuracy."¹²⁷ The more intense and overwhelming the experience, the more challenging it becomes to successfully "desensitize" all trauma-related memories.

Many assume that their memory works well and that they accurately remember things without questioning it. The role of the hippocampus in the misinformation effect remains a topic of investigation, and the exact nature of hippocampal involvement across stages still needs to be fully understood. In the classic three-stage misinformation paradigm, individuals first witness the original event, then receive post-event misinformation, and finally undergo a memory test regarding the original event.¹²⁸ Three theoretical perspectives attempt to explain the misinformation effect: The non-retention model suggests that original event representations were either never formed or lost before the misinformation, replacing the original event with misinformation. The memory trace-alteration model proposes that hippocampal representations of the original event are retained during the post-event stage but are subsequently overwritten by misinformation, thus not influencing the memory-test stage. Lastly, the multiple-trace memory model posits that hippocampal representations of the original event persist across all three stages, competing with misinformation representations during the memory-test stage.¹²⁹

Events are stored in brains using one or more of the five senses; however, the fallacy lies in believing that the memories, as one retrieves and recalls them, precisely mirror how they were

¹²⁷ Melanie Noel, Maria Pavlova, Lauren McCallum, and Jillian Vinall, "Remembering the Hurt of Childhood: A Psychological Review and Call for Future Research," *Canadian Psychology* 58, no. 1 (2017): 58-68, accessed September 2, 2022,

https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/remembering-hurt-childhood-psychological-review/docview/1877753306/se-2.

¹²⁸X. Shao, A. Li, C. Chen, E. F. Loftus, and B. Zhu, "Cross-stage neural pattern similarity in the hippocampus predicts false memory derived from post-event inaccurate information," *Nature Communications* 14, no. 1 (2023): 2299, accessed November 3, 2023, doi: 10.1038/s41467-023-38046-y.

initially encoded. "Memory research reveals that we don't access and utilize all our stored memories when creating personal narratives. Without realizing it consciously, we pick and choose what we remember, filtering out anything that does not align with the current idea that we have of ourselves. For instance, if we believe we are "unlucky," we filter out any memories that might contradict that belief."¹³⁰ McKean alludes that a person's memory recall process resembles the Telephone game. Like in the game, a sentence whispered around a circle often changes drastically by the end, reflecting how our memory can distort information over time. Hence, individuals must acquire the skill of identifying and modifying their thoughts and responses before they transform into harmful neural patterns and ingrained behaviors.

Navigating the Depths of Trauma: Insights into the Mind

The mind operates through the brain, the physical apparatus that interprets and responds to mental stimuli. Simply accumulating information without processing and applying it contradicts the brain's structure and can harm our mental and physical health, resulting in cognitive clutter and physical stress. Mental health has often been assimilated into a medical perspective, fostering fear and stigma, which can, in turn, negatively impact the brain and body.¹³¹ Our experiences are not objects to diagnose or categorize. Conditions like depression and anxiety are not labels but signals indicating a need for attention. "Anxiety, depression, burnout, frustration, angst, anger, grief, and so on are emotional and physical warning signals telling us we need to face and deal with something that's happened or is happening in our life. This pain, which is very real, is a sign that there's something wrong: you are in a state of

¹³⁰Kent McKean and Heather McKean, *The Metanoia Method: How the Brain, Body, and Bible Work* (Port St. Lucie, FL: Mind Change, 2021), Kindle, loc. 174.

¹³¹Caroline Leaf, *Cleaning up Your Mental Mess: 5 Simple, Scientifically Proven Steps to Reduce Anxiety, Stress, and Toxic Thinking* (Grand Rapids, MI: Baker Books, 2021), Kindle, loc. 17.

disequilibrium. It's not a sign of a defective brain. Your experience doesn't need to be validated by a medical label. Mental health struggles are not your identity. They're normal and need to be addressed, not suppressed, or things will get worse."¹³² The signs of depression and anxiety, regardless of age, should be recognized and given attention. Leaf observed that when individuals engage with these indicators, such as depression, anxiety, restlessness, frustration, tension, and the like, they often realize that these emotions stem from typical responses to life's challenges, including deeply buried traumatic events like childhood abuse.

The mind comprises three key components: the conscious mind (active during wakefulness), the nonconscious mind (constantly operational), and the subconscious mind (a level of awareness just below the surface). The subconscious mind plays a pivotal role in governing all the physiological systems within the body. It has been overseeing and shaping these systems since the embryonic stage.¹³³ The subconscious mind is attuned to any health issues or conditions the body may face and is responsible for the progression and manifestation of these ailments, including allergies. It serves as the master controller of the body's various systems.¹³⁴ The primary role of the subconscious mind is to uphold and execute the beliefs held by the conscious mind. The subconscious, situated within the mental/phenomenal domain, characterizes a segment of the mind that currently eludes our conscious focus but possesses the potential to emerge into awareness suddenly.¹³⁵ The subconscious mind lacks reasoning, logic, or

¹³²Ibid.

¹³³ Nidhi Tomar, "Subconscious Mind and Health," *Asian Journal of Nursing Education and Research* 12, no. 2 (Apr, 2022): 245-6, accessed November 3, 2023, <u>https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/subconscious-mind-health/docview/2665173557/se-2</u>.

¹³⁴ Zhu, Yashuo, et al., "Emotion Regulation of Hippocampus Using Real-Time fMRI Neurofeedback in Healthy Human," *Frontiers in Human Neuroscience*, 13, (2019): 242, Accessed September 2, 2022. doi:10.3389/fnhum.2019.00242.

rationalization abilities; it essentially "outputs" stored information. Amidst the constant influx of sensory data, the subconscious mind acts as your internal organizer, sorting and storing vital information for your safety. Neurologists suggest that a mere 2% of the human brain's energy is devoted to conscious activities, indicating that roughly 98% of a person's thoughts and actions originate in the subconscious.¹³⁶

Consequently, it became crucial to devise methods for detecting people's responses before their conscious minds initiate the process of filtering. Consequently, your brain accumulates countless "file folders" filled with lifelong knowledge. The primary mission of your subconscious mind is to safeguard you, often reacting to triggers from past negative experiences with feelings like anxiety, fear, or anger. These reactions occur without conscious memory recall. McKean gives an example as she states, "To "keep me safe," my subconscious mind had blocked off most of my positive childhood moments...In my mind, the way to keep me safe was to be as far away from my family as possible. This was done subconsciously, of course. Consciously, I loved my family and felt enormous guilt about leaving home and not wanting to be around them. To support my "safety," my subconscious mind began sorting, editing, and blocking memories that would make it more difficult to keep my distance." The subconscious mind, rooted in early memories and experiences, shapes your core beliefs, influencing your

¹³⁵ A. A. Fingelkurts and A. A. Fingelkurts, "Patients with Disorders of Consciousness: Are They Nonconscious, Unconscious, or Subconscious? Expanding the Discussion," *Brain Sciences* 13, no. 5 (2023), https://doi.org/10.3390/brainsci13050814.

¹³⁶Adrian Gherasim and Daniel Gherasim, "From Subliminal Perception to Neuromarketing," *Economy Transdisciplinarity Cognition* 23, no. 2 (2020): 40-6, accessed November 3, 2023, https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/subliminal-perception-neuromarketing/docview/2479811488/se-2.

conscious thoughts and behaviors and leading to unexplained emotional responses to external stimuli.¹³⁷

Despite consciously avoiding negative memories, they persist subconsciously. Ultimately, the subconscious mind drives your daily thoughts, attitudes, and behaviors based on accumulated input over time, often evading conscious scrutiny. Oprah Winfrey, when recalling the effects of her childhood on her mindset, adds, "As I explained earlier, traumatic events in my childhood, including an uprooted family, sexual abuse, and regular beatings, had conditioned me to be a skilled people pleaser, even if it meant completely depleting my own energy."¹³⁸

Each person possesses a distinct way of thinking, feeling, and making choices that shape their unique identity. However, when these mental and emotional processes deviate from their norm due to factors, it can disrupt one's self-perception. The human mind tends to gravitate towards familiar patterns, even harmful ones.¹³⁹ The mind often gravitates toward familiar patterns because doing so is more efficient and requires less cognitive effort. Familiar patterns and routines provide comfort and predictability, reducing the need for constant decision-making and problem-solving. The brain's preference for the familiar stems from its innate drive to conserve mental energy and resources, making it easier to navigate daily life. Familiarity is associated with a sense of safety, which can be reassuring, and it can also stem from past

¹³⁷Yashuo Zhu et al., "Emotion Regulation of Hippocampus Using Real-Time fMRI Neurofeedback in Healthy Human," *Frontiers in Human Neuroscience* 13 (2019): 242, accessed September 2, 2022, doi:10.3389/fnhum.2019.00242.

¹³⁸Bruce Perry and Oprah Winfrey, *What Happened to You?: Conversations on Trauma, Resilience, and Healing* (New York, NY: Flatiron Books, 2021), Kindle, loc. 45.

¹³⁹ M. S. Levy, "A Helpful Way to Conceptualize and Understand Reenactments," *The Journal of Psychotherapy Practice and Research* 7, no. 3 (1998): 227-235, accessed November 3, 2023, https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3330499/.

experiences that have proven successful, further reinforcing the tendency to gravitate toward what is known and recognized.

Individuals frequently repeat maladaptive behaviors without recognizing them, while those close may have a clearer view of the situation. Interestingly, when involved in a relationship devoid of mistreatment, one might feel unsettled and unconsciously provoke familiar adverse reactions.¹⁴⁰ Despite ensuing turmoil and discord, this odd comfort in familiarity validates their established worldview. It is imperative to comprehend that what occurs in the mind also impacts the brain and body. Unaddressed toxic thoughts accumulate and can eventually erupt, exerting an uncontrolled influence on our thoughts, emotions, and choices. These toxic thoughts can originate from various sources, including trauma or unhealthy habits. "Uncontrolled, toxic thinking has the potential to create a state of low-grade inflammation across the body and brain, adversely affecting cortisol levels, hormones, brain functionality, and even the telomeres on the chromosomes."¹⁴¹

As a neural pathway becomes established in your brain, thinking or taking action can shift from being quite challenging to becoming exceptionally effortless. With sufficient repetition, these patterns become automatic. Recently, a field within modern psychology, cognitive behavioral therapy, has emerged. This innovative approach highlights numerous issues, ranging from eating disorders to relational difficulties, addictions, and even specific forms of depression and anxiety, which have their origins in flawed and negative thought patterns.

¹⁴⁰ Jillian Vinall, "Remembering the Hurt of Childhood" *A Psychological Review and Call for Future Research*, Canadian Psychology 58, no. 1 (2017): 58–68. Accessed September 2, 2022. https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/remembering-hurt-childhood-psychological-review/docview/1877753306/se-2.

¹⁴¹ Caroline Leaf, *Cleaning up Your Mental Mess* (Grand Rapids, MI: Baker Books, 2021), Kindle, loc.105.

Addressing these problems necessitates a transformation of these thought patterns.¹⁴² On a typical day, the average individual generates over thirty thousand thoughts. Researchers propose that many health issues in contemporary society directly correlate with negative thinking patterns, with a sizable portion of these patterns being negative.¹⁴³

Individuals need not be prisoners of their thoughts; instead, they should recognize that they have the power to control them.¹⁴⁴ The contents of one's mind, including anxious thoughts, depressive feelings, or painful memories, need not hold them captive. Rumination is a common aspect of a person's thought processes and involves the repetitive cycling of thoughts, replaying past experiences to make sense of them. Children who have experienced maltreatment produce a reduced number of positively oriented thoughts.¹⁴⁵ These thoughts may surface in the conscious awareness or reside in the subconscious. Regardless, they form the foundation of one's belief systems. Whether it is called the "inner voice," a "broken record," or a recurring mental image or sound, these are all instances of rumination. Often, a person engages in these repetitive thoughts so frequently that they seem deeply ingrained in their thinking patterns. It is important to note that ruminations are neither good nor bad; they are merely thoughts.¹⁴⁶

¹⁴²Craig Groeschel and Yiwen Lin, *Winning the War in Your Mind: Change Your Thinking, Change Your Life* Gaoxiong shi: Ge zi wai mian, 2022, 70.

¹⁴³ Jennie Allen, *Get Out of Your Head: Stopping the Spiral of Toxic Thoughts* Colorado Springs, CO: WaterBrook, 2020, 242.

¹⁴⁴ MacArthur, John, "Matthew," *The Macarthur Bible Commentary: Unleashing God's Truth, One Verse at a Time*, (Nashville, TN: Nelson Reference, 2006)

¹⁴⁵ F. Hoffmann, R. Linz, N. Steinbeis, M. Bauer, F. Dammering, C. Lazarides, H. Klawitter, L. Bentz, S. Entringer, S. M. Winter, C. Buss, and C. Heim, "Children with Maltreatment Exposure Exhibit Rumination-Like Spontaneous Thought Patterns: Association with Symptoms of Depression, Subcallosal Cingulate Cortex Thickness, and Cortisol Levels," *Journal of Child Psychology and Psychiatry*, accessed November 3, 2023. https://doi.org/10.1111/jcpp.13853.

¹⁴⁶Leaf, *Cleaning up Your Mental Mess*, 47.

Simply put, one must learn to intercept and modify their thoughts and reactions before they trigger destructive chain reactions and establish neural networks, commonly referred to as bad habits. Allowing negative thoughts to persist without intervention leads to their interconnectedness. However, while people cannot control events and circumstances, they can control their responses. As individuals learn the art of practicing mind management, it results in improved lifestyles. Leaf adds, "We also have to learn how to embrace, process, and reconceptualize thoughts that have already become enmeshed in the networks of our minds as trauma and negative thinking patterns. This is a lifelong journey, a lifestyle, and a well worth the effort."¹⁴⁷

The Profound Significance of Forgiveness

Parenting is challenging and demanding, and even the most adept parents may occasionally err in ways that require them to apologize to their child.¹⁴⁸ Forgiveness is a complex and multifaceted concept that plays a pivotal role in human experience across various stages of life. Whether in childhood, adolescence, adulthood, or old age, forgiveness holds the power to shape one's perspectives, attitudes, and emotional well-being.¹⁴⁹ Research studies have demonstrated the impact of forgiveness interventions on enhancing participants' forgiveness, hope, and self-esteem while reducing levels of anger, anxiety, and depression.¹⁵⁰ People often

¹⁴⁷ Caroline Leaf, *Cleaning up Your Mental Mess: 5 Simple, Scientifically Proven Steps to Reduce Anxiety, Stress, and Toxic Thinking* (Grand Rapids, MI: Baker Books, 2021), Kindle, loc. 118.

¹⁴⁸ Alexis A. Adams-Clark, Angela H. Lee, Christina Gamache Martin, Arianna Zarosinski, and Maureen Zalewski, "Characterizing Maternal Apology Attitudes and Behaviors," *Journal of Child and Family Studies* 30, no. 10 (2021): 2379-2391.

¹⁴⁹Lysa Terkeurst, "Forgiving What You Can't Forget Study Guide with DVD: Discover How to Move on, Make Peace with... Painful Memories, and Create a Life That's Beautiful" (Amazon, 2022), accessed November 3, 2022, https://www.amazon.com/Forgiving-What-Forget-Study-Guide/dp/0310104866.

¹⁵⁰J.J. Kim, E.L. Tracy, and R.D. Enright, "Motivations for Forgiving an Offender with Practical Implications for Those in the Helping Professions: A Qualitative Study," *J Relig Health* 104 (2022), accessed September 13, 2022, https://doi-org.ezproxy.liberty.edu/10.1007/s10943-022-01505-9.

plant the seeds of forgiveness in early experiences, especially within the family unit. Witnessing family members engage in acts of forgiveness can set a foundational understanding of forgiveness for individuals as they progress through life. These formative moments establish the groundwork for how individuals perceive and practice forgiveness in their later years. As people journey through life, these early lessons continue to influence their capacity for forgiveness and how they navigate conflicts and grievances.

Forgiveness entails decreasing negative (and possibly enhancing positive) thoughts, feelings, and intentions toward an offender. These shifts frequently result in positive alterations in behavior. Consequently, it is essential to note that forgiveness is distinct from excusing, justifying, absolving, embracing, progressing, pursuing justice, enduring, forgetting, or reconciliation.¹⁵¹ Forgiveness encompasses not only the act itself but also the cognitive content and motivations behind it. Quantitative studies have shed light on how dispositional forgiveness, one's propensity to forgive across time, people, and situations, impacts one's perceptions of forgiveness. For instance, Gull and Rana (2013) conducted in-depth semi-structured interviews with well-educated Pakistani participants in various professions. The study participants noted the benefits of forgiveness in the following areas: increased tolerance, happiness/positive feelings, contentment/satisfaction, confidence, reduction in negative thoughts, relaxation, spiritual development, positive social interactions, and prevention of disease."¹⁵²

¹⁵¹ M. Fetscherin and A. Sampedro, "Brand forgiveness," *Journal of Product & Brand Management* 28, no. 5 (2019): 633-652, accessed November 3, 2023. <u>https://doi.org/10.1108/JPBM-04-2018-1845</u>.

¹⁵² J.J. Kim, E.L. Tracy, and R.D. Enright, "Motivations for Forgiving an Offender with Practical Implications for Those in the Helping Professions: A Qualitative Study," *J Relig Health* 104 (2022), accessed September 13, 2022, <u>https://doi-org.ezproxy.liberty.edu/10.1007/s10943-022-01505-9</u>.

Research has shown that individuals with higher levels of dispositional forgiveness tend to prioritize forgiveness as the right course of action, recognizing its mental and physical benefits. Therefore, it suggests that forgiveness is not merely an emotional response but a cognitive process that aligns with personal growth and well-being.¹⁵³ Research findings also indicate: (1) Victims who embrace unconditional forgiveness tend to be less inclined to avoid an offender, whereas those who lean towards conditional forgiveness are more prone to avoidance. (2) Forgiveness is an intermediary factor in the links between unconditional and conditional forgiveness beliefs and the tendency to avoid an offender. (3) The explanation provided by the offender serves as a moderating factor in the associations between belief in conditional forgiveness, the act of forgiveness, and the likelihood of avoiding an offender.¹⁵⁴

Forgiveness can usher in a transformational change in one's mindset. Individuals engage in forgiveness, influenced by an internal context that includes (1) Cultivating a loving, outward focus that nurtures qualities like empathy, compassion, humility, and other virtues crucial for self-forgiveness; (2) employing implicit thought processes (alongside the relatively minor influences of logic and willpower) to facilitate self-forgiveness; (3) considering one's personality; and (4) emulating heroes driven by admiration who serve as forgiveness exemplars.¹⁵⁵ When individuals choose to forgive, they shift their focus away from dwelling on

¹⁵³Ibid.

¹⁵⁵Everett L. Worthington Jr., Sandra Yu Rueger, Edward B. Davis, and Jennifer Wortham, "'Mere" Christian Forgiveness: An Ecumenical Christian Conceptualization of Forgiveness through the Lens of Stress-and-Coping Theory," *Religions* 10, no. 1 (2019): 44, accessed September 14, 2022, https://go.openathens.net/redirector/liberty.edu?url=https://www-proquest-com.ezproxy.liberty.edu/scholarlyjournals/mere-christian-forgiveness-ecumenical/docview/2326927184/se-2.

¹⁵⁴ Z. Yi, D. Wu, and M. Deng, "Beliefs about the Nature of Forgiveness and Avoidance of an Offender among Chinese College Students," *Behavioral Sciences* 13, no. 9 (2023), accessed November 3, 2023. https://doi.org/10.3390/bs13090747.

past failures and grievances. This change in perspective enables them to embrace a more positive outlook on life. Scientific evidence has long indicated that stress, anxiety, and worry can harm one's health, while a life of peace, connection, and satisfaction leads to a more fulfilling existence. Forgiveness can catalyze this positive transformation by freeing individuals from resentment and anger.

Forgiveness is a multifaceted concept that defies simple definition. Theorists often describe forgiveness as "wiping the slate clean" concerning the offender's moral transgressions. Individuals with stronger incremental beliefs tend to perceive past and future actions as distinct, making them more open to cues indicating an offender's potential for change. Apologies can serve as such cues by conveying a readiness to acknowledge one's wrongdoing and the harm it has inflicted. An apology can effectively split the offender into two components: one responsible for the transgression and one dedicated to making improvements in the future. Individuals with a stronger inclination toward incremental thinking may see an apology as the start of a journey toward personal transformation.¹⁵⁶ Not everyone forgives the offense or the offender promptly, and generally, forgiveness doesn't happen immediately with each transgression. For most small offenses, people tend to forgive quickly.¹⁵⁷ However, this raises questions about how the wrongdoing affects the forgiver's thoughts, attitudes, and actions post-forgiveness. It is essential to understand that forgiveness does not negate the wrongdoer's accountability nor imply a return

¹⁵⁶ K. Schumann, "Apologies as signals for change? Implicit theories of personality and reactions to apologies during the #MeToo movement," *PLoS ONE* 14, no. 12 (2019), accessed November 3, 2023. https://doi.org/10.1371/journal.pone.0226047.

¹⁵⁷ Kim, J.J., E.L Tracy, and R.D. Enright, "Motivations for Forgiving an Offender with Practical Implications for Those in the Helping Professions: A Qualitative Study," *J Relig Health*, 104, (2022). Accessed September 13, 2022. https://doi-org.ezproxy.liberty.edu/10.1007/s10943-022-01505-9.

to the status quo before the offense. Forgiveness is about personal healing and growth, not erasing the past.

The decision to forgive is profoundly personal and carries both anxiety and relief. Forgiveness does not offer a panacea for all life's problems but alleviates the cognitive tensions that often accompany them. By choosing forgiveness, individuals can bridge the "injustice gap" created by wrongdoing. This gap signifies how someone desires to resolve an issue and its current state. In its myriad forms, forgiveness provides a constructive pathway for addressing this gap, ultimately fostering personal agency in the healing process.¹⁵⁸ Numerous authors have criticized the conventional view of forgiveness as a morally commendable and desirable act. Some argue in favor of holding onto resentment and seeking retribution. It is worth noting that while religious individuals tend to exhibit a higher propensity for forgiveness compared to their non-religious counterparts, there is currently a lack of scientific research assessing the efficacy of religiously rooted interventions, such as prayer for the wrongdoer, confessional practices, exposure to forgiveness-themed sermons, or participation in spiritual exercises.

The study administered in "The Reflections on Forgiveness Framework: A Framework to Understand Older Adults' Forgiveness Development over the Life Course" adds to the discussion, referring to their studies where participants primarily acquired their understanding of forgiveness through religious teachings and personal life experiences. While religion served as the sole formal channel for learning about forgiveness, in numerous instances, participants

¹⁵⁸ Everett L. Worthington Jr., Sandra Yu Rueger, Edward B. Davis, and Jennifer Wortham, "Mere" Christian Forgiveness: An Ecumenical Christian Conceptualization of Forgiveness through the Lens of Stress-and-Coping Theory," *Religions* 10, no. 1 (2019): 44, accessed September 14, 2022, <u>https://go.openathens.net/redirector/liberty.edu?url=https://www-proquest-com.ezproxy.liberty.edu/scholarly-</u> journals/mere-christian-forgiveness-ecumenical/docview/2326927184/se-2.

informally learned about forgiveness through their life experiences."¹⁵⁹ Forgiveness should not be confined solely to religious aspects of an individual's life or the human community; it should be an integral part of a society's public life. However, biblical examples offer models for forgiveness, both in the Old Testament and the New Testament.¹⁶⁰ Forgiveness is an enduring and transformative force that transcends the boundaries of age and experience. Its importance lies not only in the act itself but in its cognitive and emotional dimensions. Forgiveness can shape our lives, free people from resentment, and promote personal growth and well-being. Forgiveness acts as a beacon as people go through life, showing the way toward healing, reconciliation, and a more promising future.

Theological Foundations

The DMIN action research project aims to implement biblical forgiveness for childhood trauma, resulting in physical, mental, and emotional healing. Nevertheless, first, one must understand how the Bible defines and teaches biblical forgiveness.¹⁶¹ In the Old Testament, the Hebrew words for 'forgiveness' and their fundamental meanings include: 'slh' (meaning to forgive, pardon, or send away), 'nś' (signifying to bear or take away), 'kpr' (associated with covering), 'mhh' (to wipe away), and 'ksh' (related to covering. However, when the Septuagint translators addressed this concept, they expanded the vocabulary considerably, employing nearly

¹⁵⁹ A.E. Ermer, K.N. Matera, and S. Raymond, "The Reflections on Forgiveness Framework: A Framework to Understand Older Adults' Forgiveness Development over the Life Course," *J Adult Dev* 29 (2022): 255–264, accessed September 7, 2022, https://doi-org.ezproxy.liberty.edu/10.1007/s10804-022-09400-z.

¹⁶⁰D. G. Oprean, "Biblical Models for the Practice of Forgiveness in Public Life," *Journal of Humanistic and Social Studies XI*, no. 1(21) (2020): 131-142, accessed November 3, 2023. https://doaj.org/article/0a8b535dec374d99b7505b8ba2b2152b.

¹⁶¹ Toussaint, L. L., B.J. Griffin, E.L. Worthington Jr., M. Zoelzer, and F. Luskin, "Promoting Forgiveness at a Christian College: A Comparison of the REACH Forgiveness and Forgive for Good Methods," *Journal of Psychology and Theology*, 48(2), (2020): 154–165. Accessed September 13, 2022. https://doi.org/10.1177/0091647120911109.

twenty words and expressions. For instance, they used 'aphiēmi' to convey forgiveness (Gen. 50:17, NLT), 'dechomai' for receiving or pardoning (Gen. 50:17, NLT), 'prosdechomai' for accepting or pardoning (Exod. 10:17, NLT), 'aphaireō' to indicate taking away (Exod. 34:7, NLT), 'hileos einai' to denote being favorably inclined or propitious (e.g., Num. 14:20), 'exhiloskomai' for propitiation and making atonement (Num. 15:28, NLT), 'euilateuo' for showing mercy (Deut. 29:20, NLT), 'aniēmi' to signify forgiveness (Josh. 24:19, NLT), 'airō' to express forgiveness (1 Sam. 15:25, NLT), 'hilaskomai' for pardoning and being merciful (2 Kgs. 5:18, NLT), 'katharizō' indicating cleansing (Ps. 19:12, NLT), 'euilatos ginesthai' for being merciful (Ps. 99:8, NLT), 'hilasmos' for expiation and atonement (Ps. 130:4, NLT), 'athooo' to convey letting go unpunished or holding guiltless (Jer. 18:23, NLT), 'hilateuō' for being gracious (Dan. 9:19, NLT), 'lambanō' for removing (Hos. 14:2, NLT), 'hyperbainō' for intentionally overlooking (Mic. 7:18, NLT), and 'apoluo' for acquitting or removing, although this last word was used with this connotation only in the Old Testament apocrypha (3 Maccabees 7:7, NLT).¹⁶²In the Strong's Expanded Exhaustive Concordance of the Bible, the Greek word aphiemi occurs 146 times, with its English translation being 'forgive.' Of those 146 times, 39 are in the four Gospels. The prefix 'apo' in the word *aphiem* means to separate or to create distance from something.¹⁶³ While '*hiemi*.' means to send forth or put in motion. '*Aphiemi*' translates as forgive (47x), forsake (6x), let alone (6x), suffer (14x), let (8x), and most often translated as leave (52x). It is an action word requiring one to send, forsake, put off, yield up, expire,

¹⁶²R. W. Yarbrough, "Forgiveness and Reconciliation," in *New Dictionary of Biblical Theology*, ed. T. Desmond Alexander and Brian S. Rosner, electronic ed. (Downers Grove, IL: InterVarsity Press, 2000), 498–499.

¹⁶³ James Strong, *New Strong's Expanded Exhaustive Concordance of the Bible*, (Nashville, TN: Thomas Nelson Publishers, 2010) 48.

disregard, remove, or utterly separate from oneself. '*Aphiemi*' means letting go of or leaving something behind.

In 1 Corinthians 7, Paul discusses the topic of divorce. He emphasizes that a man should not 'divorce' ($\dot{\alpha}\phi$ íημι, aphiēmi) his wife, and similarly, he advises that a woman should not 'separate' ($\chi \omega \rho$ íζ ω , chōrizō) from her husband. From this, one might infer that forgiveness involves a form of separation or distancing oneself from the offense.¹⁶⁴ Easier said than done; leaving childhood trauma in the past is essential for one's progress in adulthood. The story of Joseph and his brothers exemplifies the purpose of action research. However, providing more clarity on biblical forgiveness before diving into the account of Joseph's childhood trauma at the hands of his siblings is suggested.

In the Gospel of John, Jesus uses the analogy of sheep and shepherds, identifying Himself as the Good Shepherd. Unlike a hired hand, a good shepherd would sacrifice his life for the sheep (John 10:11, NLT). The Messiah explains his death as voluntary, declaring, "The Father loves me because I sacrifice my life so I may take it back again. No one can take my life from me. I sacrifice it voluntarily. For I have the authority to lay it down when I want to and also to take it up again. For this is what my Father has commanded" (John 10:17-18, NLT). The statement unequivocally and boldly conveys the absolute voluntariness of Christ's death, a voluntariness that allowed him to predict and confirm his death.¹⁶⁵ Therefore, when we use the Greek word *aphiemi* in Matthew 27:50, where Jesus 'yielded up' or 'released,' we understand that

¹⁶⁴ Michelle J. Morris, "Divorce," ed. John D. Barry et al., *The Lexham Bible Dictionary* (Bellingham, WA: Lexham Press, 2016).

¹⁶⁵Robert Jamieson, A. R. Fausset, and David Brown, *Commentary Critical and Explanatory on the Whole Bible* (Oak Harbor, WA: Logos Research Systems, Inc., 1997), eBook, n.p.

he voluntarily chose to let go.¹⁶⁶ The phrase "Yielded up the ghost" ($\dot{\alpha}\phi\eta\kappa\epsilon\tau\dot{\sigma}\pi\nu\epsilon\tilde{\upsilon}\mu\alpha$) translates as "Dismissed his spirit" or, as per the Revised Version, "Yielded up his spirit." The evangelists' choice of words when describing the death of our Lord is notable, as they do not use the neutral verb "he died" (ἔθανεν) but instead express it as "he breathed out his life" (ἐξέπνευσε, Mark 15:37) or "he gave up his spirit" (παρέδωκε τὸ πνεῦμα, John 19:30, NLT). The terminology chosen indicates a deliberate act of surrendering his life, aligning with John 10:18, which states that Jesus willingly gave up his life at the exact time and in the manner of his choosing, as Augustine highlights.¹⁶⁷ The term 'verb' here denotes sending away or dismissing something. It finds usage in various contexts, such as forgiving offenses (Matt. 6:34; Jas. 5:15, NLT), yielding up (Matt. 27:50, NLT), letting alone (Matt. 19:14, NLT), and allowing or permitting (Luke 6:12, NLT).¹⁶⁸ The information becomes relevant to childhood trauma because many have difficulty letting go of the hurt associated with the offense; they mistakenly believe that forgiveness implies accepting or approving the offense. Molestation is an evil, inexcusable act committed against another. That being said, forgiveness is essential for victims to heal from their trauma. Due to the horrific nature of the offense, victims often struggle to forgive both the actions of the offender and the trauma that was committed against them. They will usually hold onto their trauma instead of seeking ways to heal, fearing that forgiveness might be perceived as accepting or even condoning the perpetrator's actions. It's essential for Christians to forgive both the offense and the offender, even in cases where the offender does not repent of their actions.

¹⁶⁶ Zuck, Roy B., and John F. Walvoord, "Matthew" *The Bible Knowledge Commentary: New Testament*, (Wheaton, IL: Victor Books, 1983)

¹⁶⁷ Marvin Richardson Vincent, *Word Studies in the New Testament*, Vol. 1 (New York: Charles Scribner's Sons, 1887), 145.

Forgiveness is a source of inner peace, while unforgiveness disrupts one's sense of peace. "The most frequently reported reason why one would forgive another was the idea that forgiveness helps the one wronged move on and restore peace in his or her life."¹⁶⁹ When Jesus appears to his disciples in John 20:19-23, two times, Jesus states, "I give you peace." Billy Graham emphasizes the profound truth that forgiveness and the inner peace it brings can be a transformative experience. He underscores the idea that one can shed one's old, sinful self and emerge as a renewed individual, free from the burden of sin, radiating a sense of purity and serenity. In the book "How to Be Born Again," the author elucidates that atonement mends a broken relationship between God and the sinner, resulting in divine forgiveness.¹⁷⁰ In Christ, we find the assurance of forgiveness and, consequently, obtain a lasting inner peace. The genuine gospel message includes lifting the weight of guilt as an integral part.¹⁷¹ The death of Jesus made it possible for all those who believed in Him to receive peace because he took the punishment for everyone's sins.¹⁷² According to Easton's Bible Dictionary, sin is defined as "any want of conformity unto or transgression of the law of God" (1 John 3:4; Rom. 4:15, NLT), in the inward state and habit of the soul, and the outward conduct of the life, whether by omission or commission (Rom. 6:12-17; 7:5-24, NLT).¹⁷³

¹⁶⁹ J.J. Kim, E.L Tracy, and R.D. Enright. "Motivations for Forgiving an Offender with Practical Implications for Those in the Helping Professions: A Qualitative Study." *J Relig Health*, 104, (2022). Accessed September 13, 2022. <u>https://doi-org.ezproxy.liberty.edu/10.1007/s10943-022-01505-9</u>

¹⁷⁰Garth M. Rosell, *Surprising Work of God* (Eugene, OR: Wipf & Stock Pub, 2020).

¹⁷¹ Lewis A. Drummond, *The Evangelist* (Thomas Nelson, 2018), 45-46.

¹⁷² Marion Adams, "The Author," *John's Gospel - Free Bible Commentary in easy English*, (2006): accessed November 10, 2022, https://www.easyenglish.bible/bible-commentary/john-ma-lbw.htm.

¹⁷³M. G. Easton, *Illustrated Bible Dictionary and Treasury of Biblical History, Biography, Geography, Doctrine, and Literature* (New York, NY: Harper & Brothers, 1893), 632.

Commonly recited amongst Christians is the Lord's prayer (also known as the disciples' prayer), which includes "and forgive us our sins, as we have forgiven those who sin against us." (Matt. 6:12, NLT) As one partition the Father in Heaven to let go of sins they committed, whether by omission or commission, they must first release others from the offense committed against them. To attain God's forgiveness, we must be willing to grant forgiveness to "everyone who sins against us." Jesus is not implying that God's forgiveness should be contingent on our forgiveness of others who have wronged us. None of us possess such an abundance of forgiveness that we can earn or deserve God's patience and grace. Instead, Jesus employs a logical argument from the smaller to the more significant. If even flawed individuals like us can forgive others, we can confidently request forgiveness from a merciful God.

Withholding forgiveness from others indicates that we have not truly embraced God's forgiveness. When we have experienced this greater forgiveness, we naturally exhibit lesser forgiveness towards those in our lives, no matter how challenging or costly.¹⁷⁴ When one releases a person from the offense committed against them, they are exonerating them of the offense even if they are guilty and have not repented. God's forgiveness is not dependent on a person's ability to forgive another person's sin; however, a believer's forgiveness becomes dependent on realizing the countless times God has forgiven them for their transgressions (Matt 6:14-15; Eph 4:32, NLT). ¹⁷⁵ Unfortunately, releasing a person from an offense committed is not easily granted, mainly when the actions occur in a time of vulnerability.

¹⁷⁴ Mike McKinley, *Luke 1–12 for You*, ed. Carl Laferton, *God's Word for You* (The Good Book Company, 2016), 166–167.

¹⁷⁵Roy B. Zuck and John F. Walvoord, "Matthew" *The Bible Knowledge Commentary: New Testament* (Wheaton, IL: Victor Books, 1983), 32.

In various verses throughout the Bible, a common theme emerges, highlighting the profound concept of forgiveness. Psalm 65:3 speaks of God's forgiveness for our multitude of sins, emphasizing the magnitude of His grace. Divine forgiveness is not conditional but flows from God's love for us, as noted in Psalm 86:5. Isaiah 1:18 vividly paints the imagery of renewal and purification, likening God's forgiveness to making us as clean as freshly fallen snow.¹⁷⁶ Ezekiel 36:25 further illustrates that God takes it upon Himself to remove our impurities. After receiving instruction on how to address and handle corrections among fellow believers, Peter asked Jesus a question: Then Peter came to him and asked, "Lord, how often should I forgive someone who sins against me? Seven times?" (Matt 18:21, NLT).

Among the Jews, the forgiveness of an offense beyond three times is uncommon. The rabbis taught that since God forgave Israel only three times, extending forgiveness past the third offense was unnecessary (Amos 1:3, 6, 9, 11, 13, NLT).¹⁷⁷ Therefore, Peter assumed increasing the time to more than one-half would suffice.¹⁷⁸ Some scholars believe Peter did not denote a specific number of seven but asked if he would be proper in frequently forgiving offenders. The number seven has significance; the force of the adverb ($\dot{\epsilon}\pi\tau\dot{\alpha}\kappa\iota\varsigma$) seven times is the equivalent of saying, "How long, Lord, do you wish that offenders be received into favor? For it is unreasonable, and by no means advantageous, that they should, in every case, find us willing to be reconciled."¹⁷⁹ Matthew 6:14–15 calls us to extend forgiveness to others, reflecting the

¹⁷⁶ Rydelnik, Michael, John Hart, John Jelinek, John M. Koessler, Walter McCord, John McMath, William H. Marty, et al., "The Moody Bible Commentary" S.I.: Moody Publishers, 2014.

¹⁷⁷ John MacArthur, "Matthew," *The Macarthur Bible Commentary: Unleashing God's Truth, One Verse at a Time* (Nashville, TN: Nelson Reference, 2006), 1158.

¹⁷⁸ Adam Clarke, "Commentary on Matthew 18:21," *The Adam Clarke Commentary*, (2022): accessed November 10, 2022. https://www.studylight.org/commentaries/acc/matthew-18.html, 1832.

¹⁷⁹ John Calvin, "Commentary on Matthew 18:21" *Calvin's Commentary on the Bible*, (2022) accessed November 10, 2022. https://www.studylight.org/commentaries/cal/matthew-18.html, 1840-57.

forgiveness we receive from God. Notably, in Matthew 18:21–35, we are urged not to keep a count of the times we forgive, underlining the boundless nature of forgiveness. Colossians 3:13 encourages us to generously forgive others just as God has forgiven us, embodying His grace. Lastly, 1 John 1:8–9 assures that when we confess our sins, God forgives us in His infinite mercy, emphasizing the significance of repentance and divine forgiveness in the journey of faith. Childhood trauma, including physical, mental, and sexual abuse, as well as witnessing domestic violence, frequently recurs. When a person applies forgiveness to their abuser, it is necessary to forgive individual events. These actions require forgiveness for every incident of being thrown into the television and beaten with a broomstick.

Christ asserts that there are no limitations on the number of times one should forgive a person, whether the number seven is literal or metaphorical. "No, not seven times," Jesus replied, "but seventy times seven! (Matt 18:22, NLT). However, the understanding of the verse is 490; it was a figurative way of saying "indefinitely." Unforgiveness grieves the Holy Spirit, as it breeds "bitterness, rage, anger, harsh words, and slander, as well as all types of evil behavior" (Eph 4:31-32, NLT). Bitterness reflects smoldering resentment. Rage comes in the passion of a moment. Anger derives from deep hostility. A harsh word, translated in Scripture as clamor, is a cry of strife out of control. Slander is speaking evil of a person. Each is the outcome of one refusing to forgive a person of an offense.¹⁸⁰ Ultimately, Scripture teaches that believers whom God has forgiven much should, in turn, forgive transgressions committed against them by others. The issue arises when individuals struggle to extend forgiveness for long-standing hurts and

¹⁸⁰ MacArthur, The Macarthur Bible Commentary, 1697.

pains from their childhood. This bitterness, anger, and hostile behavior create obstacles in life, hindering healthy relationships with others and God.

While forgiveness might have been implicitly recognized and applied before and during the patriarchal era, Joseph's story finds the earliest explicit mention of forgiveness in the Old Testament. In this narrative, Joseph's brothers, truthfully or not, convey that their father Jacob's dying request was for Joseph to grant them forgiveness (Genesis 50:17, NLT). What is particularly remarkable is that Joseph not only renounces any desire for revenge but also demonstrates love and goodwill towards his brothers (Genesis 50:19–21, NLT). These actions exemplify the essential qualities of genuine forgiveness.¹⁸¹ This action research examines trauma experienced before the age of 18. The term "child" in the Scriptures encompasses a wide range of meanings. For example, Joseph is described as a "child" as he was likely around sixteen during the events recounted in Genesis 37:3.¹⁸² Joseph is a perfect candidate to explore the application of biblical forgiveness to childhood trauma. Joseph's conflict with his siblings resembles that between his father and uncle. Jacob and Joseph's narrative includes deceptions of the fathers and the brothers being treacherous (Gen 27, 37, NLT). A 20-year separation resulted in both younger siblings living in a foreign land (for Jacob read Gen 31:38, Joseph Gen 37:2, 41:46, NLT). The stories of the sibling rivalry ended in a reunion and reconciliation of the brothers (Gen 33:1-15; 45:1-15, NLT).¹⁸³

¹⁸¹R. W. Yarbrough, "Forgiveness and Reconciliation," in *New Dictionary of Biblical Theology*, ed. T. Desmond Alexander and Brian S. Rosner, electronic ed. (Downers Grove, IL: InterVarsity Press, 2000), 498–499.

¹⁸² M. G. Easton, *Illustrated Bible Dictionary and Treasury of Biblical History, Biography, Geography, Doctrine, and Literature* (New York: Harper & Brothers, 1893), 141.

¹⁸³ Roy B. Zuck and John F. Walvoord, "Genesis" *The Bible Knowledge Commentary: New Testament* (Wheaton, IL: Victor Books, 1983), 86.

Envy and hatred brewed among Joseph's siblings when he revealed a dream from the Lord that foretold his elevation to prominence over them. In Genesis 37:19, the phrase "Behold, this dreamer cometh" carries a bitter and mocking tone, meaning "master of dreams." People viewed dreams as divine messages, so making false claims of receiving such messages was strongly condemned as blasphemy. Joseph's brothers regarded him as a cunning deceiver because of this. They even considered a plot to assassinate Joseph. However, Reuben suggested throwing him into one of the dry wells, typically devoid of water, especially during summer.¹⁸⁴ Jacob enacted the same jealousy upon his children that he endured from having a father who favored his other sibling. Isaac's prayer to God resulted in his wife Rebekah giving birth to twins, as recounted in Genesis 25:21. These twins, while still in the womb, struggled, prompting Rebekah to seek guidance from the Lord. In response, God revealed that the twins would become leaders of two opposing nations, with the younger one ultimately prevailing (Genesis 25:21–23, NLT). Esau was the firstborn and developed into an outdoorsman with a strong affinity for hunting. Jacob was more reserved and domestic, often staying within the family's tents (Genesis 25:27, NLT).¹⁸⁵ Both parents had their preferences, with Isaac favoring the elder son and Rebekah favoring Jacob (Genesis 25:28, NLT). ¹⁸⁶As a result, Jacob favored Joseph over his other children. "But his brothers hated Joseph because their father loved him more than the rest of them. They couldn't say a kind word to him" (Gen 37:4, NLT).¹⁸⁷ Because of their hatred, Jacob

¹⁸⁴ Robert Jamieson, A. R. Fausset, and David Brown, *Commentary Critical and Explanatory on the Whole Bible*, vol. 1 (Oak Harbor, WA: Logos Research Systems, Inc., 1997), 38.

¹⁸⁵ Roy B. Zuck and John F. Walvoord, "Genesis" *The Bible Knowledge Commentary: New Testament* (Wheaton, IL: Victor Books, 1983), 86.

¹⁸⁶ Trent C. Butler, "Isaac, Son of Abraham," in *The Lexham Bible Dictionary*, ed. John D. Barry et al. (Bellingham, WA: Lexham Press, 2016).

endured years of verbal abuse from siblings who were incapable of saying kind words to their younger brothers. Unfortunately, Joseph's story of sibling rivalry out of jealousy continues to tear apart families as they struggle to forgive the pain endured by those living under the same roof. Joseph's siblings eventually plot to kill him; however, he escapes this fate when they sell him into slavery.

The traumatic events in Joseph's life persist as he endures imprisonment for an offense he did not commit. Eventually, the family reunites, and after their father's death, the brothers predict that Joseph will unleash his wrath upon them. In their father's name, they attempt to deceive Joseph. So, they send this message to Joseph: "Before your father died, he instructed us to say to you: 'Please forgive your brothers for the great wrong they did to you, for their sin in treating you so cruelly.' So, we, the servants of the God of your father, beg you to forgive our sin." When Joseph received the message, he broke down and wept" (Gen 50:16-17, NLT).¹⁸⁸ Joseph did not speak harshly to his brothers; instead, he wept and reassured them twice not to be afraid, for he would continue to care for them. Despite knowing their malicious intentions to harm him, he chose not to seek revenge or harbor resentment towards them. "But Joseph replied, "Don't be afraid of me. Am I God that I can punish you? You intended to harm me, but God intended it all for good. He brought me to this position so I could save the lives of many people" (Gen 50:19-20, NLT). Long before this 46 conversation, Joseph had already forgiven his brothers for the childhood trauma they caused him. He did not wait for them to come and repent; the forgiveness occurred around the birth of his first son, Manasseh. "Joseph named his older son Manasseh, for he said, "God has made me forget all my troubles and everyone in my father's family" (Gen

¹⁸⁸ Roy B. Zuck and John F. Walvoord, "Genesis" *The Bible Knowledge Commentary: New Testament* (Wheaton, IL: Victor Books, 1983), 86.

41:51, NLT).¹⁸⁹ In a manner consistent with the patterns often seen in the Old Testament, the family lineage continues with favoritism as Jacob adopts Joseph's son. Jacob did not bestow the traditional firstborn blessing upon Manasseh, the elder brother, as detailed in Genesis 48:13–20 on his deathbed. Instead, Jacob crossed his hands and granted this significant blessing to Ephraim.¹⁹⁰

Due to human nature and the conditions of this world, offenses are inevitable (Luke 17:1-4, NLT). In life, even for Christians, there is the danger of offending others and harboring grudges, of refusing to forgive when an offending person apologizes. Nevertheless, no matter how often one sins against God, the assurance remains that if they confess their sins to God, He is faithful and righteous to forgive (1 Jn. 1:9, NLT).¹⁹¹ Christians must have a forgiving spirit, be willing to make the best of everything and live in peace. They should strive to show they have forgiven an offense, even if the offender does not repent. Forgiveness of the transgression is still a requirement to prevent one from bearing malice or seeking revenge.

Theoretical Foundations

The concept of "soul wounds" is gaining traction among military psychologists and professionals as a way to articulate the spiritual distress stemming from combat trauma. Similar to how physical injuries can affect the body, soul wounds have the potential to hinder an individual's ability to find significance in their combat encounters and move forward with a sense of purpose.¹⁹² Soul wounds develop as past emotional injuries manifest pain-based

¹⁸⁹ Ibid

¹⁹⁰ Chad Brand, Charles Draper, et al., eds., "Manasseh," *Holman Illustrated Bible Dictionary* (Nashville, TN: Holman Bible Publishers, 2003), 1073.

¹⁹¹ William MacDonald and Arthur L. Farstad, "1 John," *Believer's Bible Commentary* (Nashville: T. Nelson Publishers, 1992), 1384.

identities. The inability to move past painful experiences eventually shapes a person's identity through recurring themes in their conscious and subconscious minds. They may see themselves as victims, broken or shameful, defining themselves by these narratives.¹⁹³

When the soul carries a wound from childhood trauma, it affects one's ability to both give and receive love from God. Reflecting on the question of the most crucial commandment, Jesus replied, "You must love the Lord your God with all your heart, all your soul, and all your mind." (Matt 22:37, NLT) The first component of loving the Lord starts 'with all our heart,' where the Hebrew word *leb* means the inner man, mind, or will. The subsequent directive is to love the Lord 'with all our soul,' employing the Hebrew word "*nephesh*," meaning the life force, desire, passion, appetite, and emotional drive.¹⁹⁴ Harboring unforgiveness makes the command difficult because the soul has an infection caused by trauma. Therefore, not only does loving God become challenging, but loving oneself and others also becomes an arduous task.

ACEs Survey

In recent times, medical researchers in primary care environments have started to explore the connections between childhood abuse, the adoption of health-risk behaviors, and the onset of diseases in adulthood. The importance of these connections lies in the apparent link between health-related behaviors, lifestyle choices, and the primary factors contributing to illness and death in the United States, known as the "real" determinants of mortality. Considering that childhood abuse and other potentially harmful early-life experiences contribute to the

¹⁹² Leanne K. Knobloch, Jenny L. Owens, and Robyn L. Gobin, "Soul Wounds among Combat Trauma Survivors: Experience, Effects, and Advice," *Traumatology (Tallahassee, Fla.)* 28, no. 1 (2022): 11-23.

¹⁹³ Candice Creasman, "Soul Wounds Launch Team - Creasman-Counseling.com," *Creasman Counseling*, (2018): accessed November 10, 2022, <u>https://www.creasman-</u>counseling.com/uploads/3/8/3/0/38303531/soul wounds launch team .pdf.

¹⁹⁴ McKean, *The Metanoia Method*, 6.

development of these risk factors, it becomes evident that these childhood exposures are fundamental factors influencing health issues and mortality in adult life.¹⁹⁵

In 1985, Dr. Vincent Felitti was perplexed by the high number of patients in his obesity clinic who would abandon their weight loss efforts each year, with over half discontinuing their journey.¹⁹⁶ "Felitti suspected that he might have glimpsed a hidden relationship between histories of abuse and obesity. To get a clearer picture of that potential relationship, when he conducted his normal checkups and patient interviews for the obesity program, he began asking people if they had a history of childhood sexual abuse. Shockingly, it seemed that nearly other patient acknowledged such a history."¹⁹⁷ After a 25-year research to discover the root cause, Dr. Felitti found that adverse experiences in childhood were very prevalent and linked to almost every major chronic illness and social problem. The patients who had dropped out of the program were born at an average weight, and their weight gain was abrupt. Eventually, they would stabilize; however, when they lost weight, eventually, they regained all of it or more over time. He first used a standard set of questions for a couple of hundred dropouts; however, nothing unusual struck out.

The revelation occurred accidentally; instead of asking, 'How old were you when you were first sexually active?' he asked, 'How much did you weigh when you were first sexually active?' Surprisingly, the patient responded with 40 pounds; however, the patient was only the

¹⁹⁷Harris, *The Deepest Well*, 36.

¹⁹⁵ Harris, *The Deepest Well*, 25.

¹⁹⁶V. J. Felitti, R. F. Anda, D. Nordenberg, et al., "REPRINT OF: Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study," *American Journal of Preventive Medicine* 56, no. 6 (2019): 774-786, accessed November 3, 2023, https://doi.org/10.1016/j.amepre.2019.04.001.

first of many to disclose disturbing news of childhood sexual abuse.¹⁹⁸ The patient did not perceive being 100 pounds overweight as the issue; instead, eating became their coping mechanism, soothing anxiety, fear, anger, or depression, like those with other substance abuse problems. Being obese provided a subconscious sense of safety, invisibility, and being ignored. Losing weight increased their anxiety, depression, and fear to an intolerable level, leading to their eventual departure from the program.

Many discredit his study, which only sampled several hundred people. Therefore, he conducted a mega-study of 50,000 individuals, which started in 1995 and lasted through 1997. They developed a questionnaire focusing on the eight major types of childhood trauma and later added emotional and physical neglect, totaling 10.¹⁹⁹ The questions elicited 'yes' or 'no' responses related to physical abuse, emotional abuse, sexual abuse, physical neglect, emotional neglect, and household dysfunction encompassing mental illness, domestic violence, divorce, an incarcerated relative, and substance abuse. The findings revealed that Adverse Childhood Experiences (ACEs) were common, and the individuals with higher ACE scores faced an elevated risk of developing chronic illnesses such as heart disease, COPD, depression, and cancer.²⁰⁰ However, they were more likely to engage in risky behaviors like smoking, attempted suicide, alcoholism, and illicit drug use. Individuals with high ACE scores are more likely to exhibit violent behavior, experience several marriages, suffer from broken bones, require drug

¹⁹⁸ Harris, *The Deepest Well*, 31.

¹⁹⁹Joyce R. Javier, Lucas R. Hoffman, and Shetal I. Shah, "Making the Case for Aces: Adverse Childhood Experiences, Obesity, and Long-Term Health," *Pediatric Research* 86, no. 4 (2019): 420–22, doi:10.1038/s41390-019-0509-2.

²⁰⁰V. J. Felitti, R. F. Anda, D. Nordenberg, et al., "REPRINT OF: Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study," *American Journal of Preventive Medicine* 56, no. 6 (2019): 774-786, accessed November 3, 2023, https://doi.org/10.1016/j.amepre.2019.04.001.

prescriptions, develop depression, have autoimmune diseases, and more. Ultimately, higher ACE numbers correlate with multiple health risk factors later in life, many of which are leading causes of death in adults.

While ACEs make a compelling case for the effects of childhood trauma, they do not provide a cure. Many physicians who employ the ACE survey incorporate treatment plans that mainly consist of medication, which may serve as little more than a coping mechanism to address the trauma. This approach targets the brain and often disregards the pain of the soul. Dr. Perry Bruce, in his reference to his treatment method for children who endured trauma, remarked, "They'd suffered trauma such as being raped or witnessing a murder that would have had most psychiatrists considering the diagnosis of post-traumatic stress disorder (PTSD) if they were adults with psychiatric problems. Nevertheless, these children were treated as though their histories of trauma were irrelevant, and they'd "coincidentally" developed symptoms, such as depression or attention problems that often required medication."²⁰¹

The role of the brain in relation to the body is a topic of contentious debate; as Dr. Perry Bruce suggests, it is the organ that mediates all emotions, thoughts, and behavior. However, biblically, the researcher disagrees and accredits the mediation of feelings, thoughts, and behavior to the soul. While the brain is crucial in the healing process, from a holistic standpoint, it is considered unacceptable to neglect the soul when healing from emotional trauma. The brain is an organ, a part of the body, distinct from the soul. Neurotransmitters in the brain store firsthand experiences, creating a historical organ that houses memories capable of carrying forward elements from previous incidents.²⁰²

²⁰¹Perry and Szalavitz. *The Boy Who Was Raised as a Dog.* 5-7.

²⁰² Perry, What Happened to You?, 31-32.

The brain, also classified as a muscle, like any other muscle, has memory and neurological pathways. The muscle memory within the brain shapes the individual, allowing the past to influence the future. Dr. Perry's perspective aligns with the idea that early adverse childhood experiences are primarily shaped by the adults in the child's environment, and these memories have a lasting influence on a person's present and future. Dr. Nadine Harris connected illnesses, diseases, and childhood trauma. Acknowledging childhood trauma as the root and healing the trauma through biblical forgiveness is not addressed in her or Dr. Perry's studies. The option of resorting to God in dealing with childhood trauma is not an option from the studies conducted by these physicians.

The Soul

The body indeed keeps the score, but the soul wounds still develop. Although the soul is impervious to physical objects, life circumstances can still inflict wounds upon the soul. Psalm 42 was written to the Chief Musician and is subject to debate among scholars, as some commentaries suggest penmanship belongs to the sons of Korah.²⁰³ At the same time, others accredit it to David as he wandered in exile during the rebellion of his son Absalom.²⁰⁴ In detail, the psalmist describes how their soul was in despair as they thirsted for God. The constant taunting by the psalmist's enemies offers no solace. Recalling moments of happiness can be deeply painful, akin to the sorrowful tone expressed by Jeremiah in Lamentations, conveying a profound lament. Pouring out one's soul or heart (Sam 1:15; Psalm 62:8; Lam 2:19, NLT)

²⁰³ Kevin D. Zuber, "Psalms," in *The Moody Bible Commentary*. General Editors, Michael Rydelnik and Michael Vanlaningham, (Chicago, IL: Moody, 2014), 796.

²⁰⁴ Matthew Henry and Leslie F. Church, "Psalms," *Commentary on the Whole Bible, Genesis to Revelation* (Grand Rapids, MI: Zondervan Pub. House, 1982), 619.

releases intolerable pain, grief, and agony.²⁰⁵ Pouring out the pain of the soul would require one to let go and release the hurt held captive in their heart.

The psalmist questions the state of their souls while simultaneously encouraging themselves, "Why am I discouraged? Why is my heart so sad? I will put my hope in God! I will praise him again, my Savior...." It is clear that the writer possesses strong faith and understands the importance of putting one's trust not in man but in God. Physically and mentally vulnerable children often place their trust in the hands of their caretakers and other adults. Paul's instruction for Christian households exhorts, "Fathers, do not provoke your children, lest they become discouraged" (Col 3:21 NKJV). Discouragement experienced in childhood can persist into adulthood. However, many believe children to be resilient, and the trauma that provokes a toxic mindset continues to impact the lives of many adults today.

As the psalmist struggles within their soul, possibly due to actions that occurred in adulthood, it becomes clear that they were severely discouraged. The depression described in verse 6 appears to be recurring in cycles, but faith strikes back with the confidence that no matter the location, their trust in God will remain.²⁰⁶ Mount Hermon, the source of the Jordan, and the land of Mount Mizar appear to symbolize three spiritual experiences, distant from the house of God in Jerusalem. Mount. Hermon and the Jordan reside in northern Palestine, an area of headwaters flowing southward. By mentioning these two locations, the psalmist implies he is about to move from drought to drowning.²⁰⁷ The cycle of despair continues to haunt a child who has experienced adverse childhood trauma. As they grow into adulthood, many go through

²⁰⁵MacArthur, *The Macarthur Bible Commentary*, 626.

²⁰⁶ MacDonald, Believer's Bible Commentary, 560.

²⁰⁷ MacArthur, *The Macarthur Bible Commentary*, 626.

recurring cycles of drought to drowning, without realizing that the unhealed wounds inflicted upon their soul in childhood are the root cause. As one's subconscious and conscious mind recycles negative emotions, one's identity can become pain-based. It requires renewing one's mind as one struggles to fixate one's "thoughts on what is true, and honorable, and right, and pure, and lovely, and admirable" (Phil 4:8, NLT).²⁰⁸

The Metanoia Method

Living as children of the Light means forsaking and leaving behind our old sinful nature and the former way of life that was previously taught to us (Eph 4: 17-31, NLT). Most of the teaching comes from one's guardians, and the perception of the world around them forms in a person's childhood. Adverse childhood experiences teach us how to perceive the world, ourselves, and others. Paul tells his readers, "Instead, let the Spirit renew your thoughts and attitudes. Put on your new nature, created to be like God truly righteous and holy" (Eph 4:23-24, NLT). While God is sovereign, He also forgives our offenses against Him. By embracing this forgiveness, we can find the transformative power to shed the old and embrace the new, living as children of the Light.²⁰⁹

The *Metanoia Method* is a healing method that integrates the Bible to transform one's mind. The basis of the teaching is Romans 12:2, which states, "Don't copy the behavior and customs of this world but let God transform you into a new person by changing the way you think. Then you will learn to know God's will for you, which is good and pleasing and perfect" (Rom 12:2, NLT). The Metanoia Method claims to create change instantaneously. However, it is

²⁰⁸ MacDonald, Believer's Bible Commentary, 560.

²⁰⁹ Wah, Tran John Chuen. *Authentic Forgiveness: A Biblical Approach*. Carlisle, Cumbria, UK: Langham Global Library, an imprint of Langham Publishing, 2020.

an ongoing process that one should continuously work through throughout life. They have the participants create a Metanoia Manifesto to help them envision where they want to see themselves. The Metanoia GPS consists of gratitude, positive affirmations, and a smile (happy memories) to begin creating new dreams.²¹⁰ McKean states, "Memory is a function of the mind. How you hold memories is unique to your perception. Memories are the building materials you use to construct your current and future realities. Ever wonder why you keep getting the same thing in your life over and over? You are building with the same building blocks! We do this by listing our Past Negative Experiences and Current Realities. Take the first letter(s) of those and we get the acronym PaNE CuRe."²¹¹ The PaNE CuRe List helps identify past negative experiences, limiting beliefs, and programs that keep the individual stuck in unpleasant patterns. Pattern Interrupts force the mind to think about things opposite of their past. The process includes working on these steps continuously until their mindset changes.

Although the *Metanoia Method* core is biblical principles, it was developed and taught by Kent and Heather McKean, who did not expound on the importance of forgiveness. As they focus on mind change, the teaching builds around the word "repentance" from the Greek word "metanoia," which means 'mind change' or 'changes in the inner self'; in their definition, the mind references the soul. The soul will not change if the practice of yielding trauma to God is absent in the healing process. In agreement with the research conducted on the project, the McKeans note that many believers talk about "being forgiven," "having faith," and being "in God's hands," but the fruit of the words spoken does not match up.²¹² When acknowledging the past,

²¹⁰ McKean, The Metanoia Method, 296.

²¹¹McKean, *The Metanoia Method*, 296.

²¹²McKean, *The Metanoia Method*, 190.

individuals often make statements such as "not feeling it" or "not thinking about it" and even statements such as "it does not bother me anymore." None of the phrases equate to forgiveness.

The researcher agrees with McKean to some extent that guilt, shame, baggage, and the wrong mode of thinking are the evil rooted in the mind. If one continues to allow it to hold them down as an enslaved person, it deprives the individual of their freedom in Jesus Christ. Another point that adds validity to the theoretical foundation of this research is the metanoia method; the experiences of enduring with early caregivers, in addition to an individual's internal images, become the lens through which one sees others. The Metanoia Method thrives on helping people change these images; however, they omit the importance of forgiveness in the process. The issue with many approaches to addressing childhood trauma is that they often overlook biblical forgiveness. Instead, they focus on teaching coping mechanisms for emotional pain. Coping means the individual is co-existing with the pain instead of forsaking the trauma altogether.

Combined Approach

The action research aims to use the ACE survey in Appendix A to identify childhood trauma. However, the healing process from childhood trauma will incorporate the Metanoia Method, with a stronger emphasis on biblical forgiveness. Fervently Creations is a virtual ministry. Therefore, the setting will be held virtually through the Zoom app. Due to the sensitivity of childhood trauma, the settings will be one-on-one interviews with the participants, allowing for more information gathering without presenting trust issues related to potentially

²¹³L. L. Toussaint, B. J. Griffin, E. L. Worthington Jr., M. Zoelzer, and F. Luskin, "Promoting Forgiveness at a Christian College: A Comparison of the Reach Forgiveness and Forgive for Good Methods," *Journal of Psychology and Theology* 48, no. 2 (2020): 154–165, accessed September 13, 2022, https://doi.org/10.1177/0091647120911109.

painful memories. The time constraint is one hour, allowing the researcher to hold sessions with 15 to 20 individuals weekly.

Summary

This chapter reviewed the literature on the effects of adverse childhood trauma on an individual's psychological, physical, and spiritual health. Childhood trauma becomes an issue when a person struggles to release negative emotions from their soul. Harboring unforgiveness affects the lens through which they see themselves and others. If childhood trauma hinders spiritual, mental, and physical health in adults, then implementing biblical forgiveness is necessary for the researchers'²¹⁴ *Mind Rejuvenation Intervention Program* (MRIP). The discovery of the omission of forgiveness in other methods, such as the ACEs survey and *Metanoia Method*, developed a need for a new interventive approach. Biblical principles on forgiveness form the theological foundation for this action research, aiming to result in physical and emotional healing.

²¹⁴Tim Murphy, *The Christ Cure: 10 Biblical Ways to Heal from Trauma, Tragedy, and PTSD* West Palm Beach, FL: Humanix Books, 2023.

CHAPTER 3: METHODOLOGY

The central aim of this action research project within the Doctor of Ministry (DMIN) program is to introduce the concept of biblical forgiveness to facilitate healing from childhood trauma, encompassing various dimensions such as physical, mental, and emotional well-being. The initiative is rooted in the fundamental principles of Christianity, which emphasize forgiveness as a central aspect of the faith's teachings.²¹⁵ By incorporating this biblical perspective on forgiveness, the research project aims to provide a pathway for individuals to embark on a journey of healing and self-discovery. We envision this healing process as biblical, where individuals can seek restoration and recovery for their emotional wounds, physical health, and mental well-being. The project recognizes that childhood trauma can leave lasting imprints on all aspects of an individual's well-being, and addressing these traumas is crucial for achieving complete healing.

Intervention Design

A profoundly spiritual objective drives the project. It seeks to instill within participants a profound love for God and their fellow human beings. The understanding here is that by fostering love and compassion, individuals can come to a more profound knowledge of their own identity within the context of their faith, particularly in their relationship with Christ.²¹⁶ Ultimately, one is cultivating a deeper connection with one's authentic and unique identity as a catalyst for healing and personal growth. At the core of this project, it exposes the far-reaching

²¹⁵Diane Smith, "Using Scripture as Affirmations to Promote Positive Religious Coping, Secure Attachment, and Posttraumatic Growth in Christian Clients in Psychotherapy" (PhD diss., Southern Connecticut State University, 2019), *ProQuest Dissertations & Theses Global*.

²¹⁶ Sarah McDugal and Kensley Behel, "Forgiveness and Loving Well in Cases of Abuse: A Biblical Perspective," *NAD Family Ministries*, 2021, accessed November 3, 2023, https://www.researchgate.net/publication/368602559.

implications of adverse childhood experiences (ACEs). These experiences, marked by exposure to toxic stress in early life, are recognized for their lasting effects on individuals. The project aims to convey the understanding that ACEs are not isolated incidents but represent a complex web of challenges that can shape a person's life trajectory in significant ways. ACEs are potent contributors to the intergenerational transmission of trauma, which means that the effects of childhood adversity can transcend individual experiences and influence the well-being of subsequent generations. This intergenerational aspect highlights the urgency of addressing ACEs since they not only affect the immediate individuals who have experienced them but can cast a shadow over the lives of their children and grandchildren.²¹⁷

The project operates on the premise that the consequences of early-life adversities extend beyond childhood or adolescence. Instead, these experiences profoundly influence adults' lives and overall health. The repercussions may manifest in various dimensions, including physical health, mental well-being, emotional stability, and the capacity to form healthy relationships. Considering this, the project takes a biblical approach to addressing the aftermath of childhood trauma to implement the intervention design of biblical forgiveness. It acknowledges these challenges' multifaceted and enduring nature and strives to provide a comprehensive solution. Integrating biblical principles of forgiveness is a vital component of this approach. By drawing on the wisdom of biblical forgiveness found in sacred texts, the project aims to offer individuals a path to healing that transcends the boundaries of traditional therapy and psychology. The

²¹⁷Alice Kosarkova, et al., "Childhood Trauma and Experience in Close Relationships Are Associated with the God Image: Does Religiosity Make a Difference?", *International Journal of Environmental Research and Public Health* 17 (2020): 8841, accessed September 13, 2022, doi:10.3390/ijerph17238841.

project acknowledges ACEs' profound and interconnected aspects and aspires to provide a biblically grounded approach to healing through forgiveness.²¹⁸

Through the integration of biblical forgiveness, it seeks to offer individuals a means to address the long-term consequences of childhood trauma, break the cycle of intergenerational trauma, and reclaim their well-being and identity. The approach taken in this project is distinctive in that it seeks to address not only the emotional and psychological scars left by childhood trauma but also recognize the physical dimension of these experiences. Childhood trauma, with its various forms and manifestations, can have a profound impact on an individual's overall well-being, encompassing not just their emotional and mental health but their physical health as well.

The multifaceted approach aims to provide a comprehensive solution to the complex consequences of early-life trauma. By incorporating the principles of biblical forgiveness, the project empowers participants to embark on a transformative journey toward healing.²¹⁹ The process is not limited solely to emotional and psychological recovery; it extends to physical wellbeing. The recognition that trauma can manifest physically, leading to stress-related health issues, chronic conditions, and a compromised immune system, is a vital component of this approach. By addressing the physical aspect of trauma, participants offer a more biblical and all-encompassing path to healing.

²¹⁸Alice Kosarkova, et al., "Childhood Trauma and Experience in Close Relationships Are Associated with the God Image: Does Religiosity Make a Difference?", *International Journal of Environmental Research and Public Health* 17 (2020): 8841, accessed September 13, 2022, doi:10.3390/ijerph17238841.

²¹⁹ Alice Kosarkova, Klara Malinakova, Jitse van Dijk P., and Peter Tavel, "Anxiety and Avoidance in Adults and Childhood Trauma are Associated with Negative Religious Coping," *International Journal of Environmental Research and Public Health* 17, no. 14 (2020): 5147, accessed September 14, 2022, https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/anxiety-avoidance-adults-childhood-trauma-are/docview/2425638474/se-2.

The project is deeply rooted in the belief that biblical forgiveness can serve as a guiding light on this journey.²²⁰ Participants are encouraged to draw from these timeless principles to find a path toward healing and restoration. Biblical forgiveness is not merely about absolving oneself and others of past wrongs but obtaining inner peace and a renewed sense of purpose. This approach aligns with the participant's faith journey, emphasizing the importance of forgiveness as a central tenet of Christian beliefs.

To recruit participants for the action research project, the researcher will utilize the Clubhouse social media app, primarily targeting individuals within her ministry, Fervently Creations. Participation in the action research project is entirely voluntary, meaning individuals are not obligated or compelled to participate in the study regardless of their relationship with the researcher. This fundamental aspect of the research design underscores the principle of free will and personal choice. By making participation voluntary, the project respects the autonomy of potential participants. It acknowledges that individuals should be free to decide whether to engage in research activities. This approach is rooted in ethical considerations that prioritize informed and uncoerced consent. Voluntary participation guarantees that individuals willingly choose to take part in the research, free from any pressure or coercion. They have the agency to make an independent and informed decision about whether the project aligns with their beliefs, values, and willingness to share their experiences. The voluntary aspect fosters a sense of trust and transparency in the research process. Participants can actively engage in the research with a sense of agency and control, understanding that their choices and convictions drive their involvement.

²²⁰J. Horowski and M. Kowalski, "Human Health and Christianity in the Context of the Dilemma of Forgiveness," PhD diss., *Liberty Baptist Theological Seminary*, 2013, ProQuest Dissertations & Thesis Global.

The researcher will introduce potential candidates to the project via a telephone conversation. If they express interest in participating, the researcher will request their email address to send them an electronic consent form. This consent form serves as a crucial document, providing a comprehensive understanding of the research project's objectives and the confidentiality of the participants. It also explicitly states that no monetary contributions are associated with their participation in the research project. The consent form, found in Appendix B, outlines the two-month duration of the research. Once the candidate has completed and submitted the consent form, they can proceed to the screening process for the research project. This method ensures that participants are well-informed and willing and have given their informed consent before becoming actively involved in the study.

In the context of this research project, screening participants holds significant importance. This project, focused on healing individuals who have experienced childhood trauma through biblical forgiveness, necessitates carefully and deliberately selecting participants. Screening ensures that individuals who engage with the research are well-suited to its specific objectives and criteria. The research maintains its relevance and effectiveness by identifying eligible participants with adverse childhood experiences and aligning with the study's age and demographic parameters. The screening process serves an essential ethical purpose. It ensures that potential participants are fully informed about the research's requirements, possible risks, and time commitments. This commitment to transparency and informed consent is fundamental to the research's ethical foundation, respecting the autonomy and choices of those participating.

By screening participants, the research project can maintain the quality and reliability of the data collected. This precision in participant selection helps produce more relevant and accurate data, enhancing the validity and credibility of the study's findings.²²¹ It also allows the researcher to allocate resources effectively, optimizing the use of time, funding, and personnel while ensuring that the project remains focused on its specific goals. The screening process in this research project is instrumental in safeguarding the well-being of participants. It helps identify potential risks or contraindications, ensuring participation does not harm individuals. This consideration of participant safety is of utmost importance, especially in a study focused on healing from trauma. The screening process to determine a participant's eligibility for the study or their ineligibility will rely on their responses to the ACEs Survey in Appendix A of the research project. To qualify for participation, individuals must answer "yes" to at least one of the ten questions presented in the survey. In other words, meeting this minimum criterion is the key to becoming an eligible participant.

The researcher will approach thirty individuals, including men and women, to conduct this screening process. The research participation opportunity will extend to individuals between 18 and 60. Encouraging men to take part in research focusing on trauma and emotional healing can be a formidable task due to various societal and individual factors. Traditional gender roles often dictate that men should maintain emotional stoicism and strength, discouraging open discussions about their emotional well-being. Socialization processes from an early age teach boys to suppress their emotions, making it challenging for men to confront past traumatic experiences and engage in conversations about their emotional needs.²²² Fear of stigmatization, privacy concerns, and worries about the confidentiality of personal information further deter men

²²¹ Tim Sensing, <u>*Qualitative Research: A Multi-Methods Approach to Projects for Doctor of Ministry Theses*</u> (Eugene, OR: Wipf & Stock, 2011), 129.

²²² Sam de Boise and Jeff Hearn. "Are Men Getting More Emotional? Critical Sociological Perspectives on Men, Masculinities and Emotions." *The Sociological Review*. 65, no. 4 (2017): 779–796, accessed November 28, 2023.

from participating. Many men may not fully recognize the potential benefits of such research and could underestimate its relevance to their well-being.

Some men may believe in their self-sufficiency in overcoming emotional challenges independently, contributing to their reluctance to seek external support. The enduring stigma around mental health issues, including trauma and emotional healing, disproportionately affects men and discourages them from admitting their need for assistance.²²³ Addressing these challenges requires targeted outreach, educational efforts, and the creation of inclusive and non-judgmental spaces that emphasize the potential personal growth and well-being that can result from research involvement. That said, the researcher understands that no males may volunteer to participate in the research.

Women may be more likely to participate in this research for several compelling reasons. A key factor may be their greater willingness to seek help and support when faced with emotional and psychological challenges, making them more open to sharing their experiences in a study focused on healing from childhood trauma.²²⁴ Women tend to be more expressive of their emotions on average, which can facilitate discussions related to traumatic experiences. Their broader social support networks may provide encouragement and motivation to engage in research that enhances their well-being. Women may also view participation in such research as a therapeutic process, finding value in sharing their stories and engaging in discussions related to healing. Given their typically heightened interest in emotional and psychological well-being, they might discover research on recovering from childhood trauma particularly appealing as it

²²³ Sam de Boise and Jeff Hearn. "Are Men Getting More Emotional? Critical Sociological Perspectives on Men, Masculinities and Emotions." *The Sociological Review*. 65, no. 4 (2017): 779–796, accessed November 28, 2023.

²²⁴Catherine Clark Kroeger, *Women, Abuse, and the Bible: How Scripture Can Be Used to Hurt or Heal* (Eugene, OR: Wipf & Stock Publishers, 2019).

relates to these aspects. The higher prevalence of trauma experienced by women, including forms such as abuse, neglect, or household dysfunction, could drive their interest in addressing these issues through research participation. While individual motivations may vary, cultural and societal factors, community influences, and the desire for empowerment through research may further encourage women to engage in this study. The researchers need to ensure that the project remains inclusive and accessible to individuals of all genders, recognizing that men may also benefit from healing experiences related to childhood trauma.

Nonetheless, the expectation is that this distribution should result in a group of approximately 15 eligible participants who meet the necessary criteria for the study. By using the ACEs Survey and setting clear eligibility criteria, the research project aims to ensure that participants have experienced adverse childhood experiences (as indicated by their 'yes' responses) and that the study's sample is representative of the intended population. This screening process helps establish a pool of participants whose experiences align with the research objectives, thereby contributing to the study's overall accuracy and relevance.

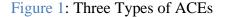
The entry survey used in this study will focus on evaluating three categories of adverse childhood experiences: abuse, neglect, and household dysfunctions, as illustrated in Figure 1.²²⁵ These experiences significantly shape individuals' long-term emotional well-being and overall mental health. By examining these aspects, the study aims to gain insights into the participants' early life experiences and how they may have contributed to their current emotional state. Addressing and healing from past emotional wounds, particularly those associated with adverse childhood experiences (ACEs), is a complex and delicate journey for many individuals. The

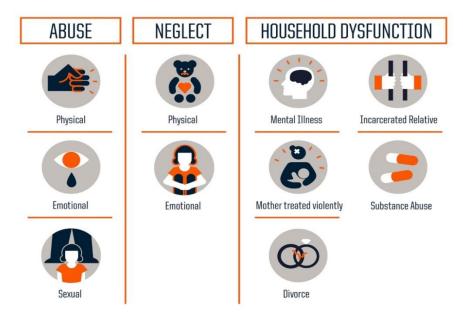
²²⁵ L. Starecheski, "Take the ace quiz - and learn what it does and doesn't mean." *NPR*, (2015): accessed December 4, 2022, https://www.npr.org/sections/health-shots/2015/03/02/387007941/take-the-ace-quiz-and-learn-what-it-does-and-doesnt-mean.

researcher acknowledges that delving into these traumatic memories can be emotionally challenging and potentially distressing. This recognition of the emotional depth and sensitivity of the topic is essential to the research process.

The anticipation is that as participants engage in the research and begin to explore their past experiences in greater detail, some may encounter a range of emotions, including pain, sadness, anger, or even anxiety. These emotions can surface as they confront and discuss their traumatic past. For some, this process may stir up difficult memories and feelings they have long buried. As a result of these emotional challenges, participants may decide to withdraw from the study. The decision to withdraw is a valid response to the emotional distress that may arise during the research process. The researcher fully respects and supports participants' autonomy in making such a decision. It is essential to prioritize the emotional well-being of participants throughout the research journey. To mitigate the potential impact of emotional challenges, the researcher has taken proactive steps to provide support and resources for participants.

All participants will receive a list of three resources and referrals to ensure they can access additional emotional support. The researcher has designed this support network to help individuals cope with the emotional aspects of the research and address any distress that may arise. These resources are made available to each participant, serving as a safety net to ensure they have access to emotional support if needed, both during their participation in the research and the period following their involvement. This proactive approach acknowledges the potential emotional impact of the study and underscores the researcher's commitment to the participants' overall well-being. It aims to create a safe and supportive environment for individuals who may be revisiting painful memories in the pursuit of healing and research participation.





Source: Centers for Disease Control and Prevention Credit: Robert Wood Johnson Foundations

The screening process will begin on August 15, 2023, and conclude on September 15, 2023. This timeframe gives the researcher a window of approximately 15 days to administer and collect the surveys and evaluate the results to identify eligible candidates. The allotted time allows for a comprehensive assessment of potential participants' eligibility based on their responses to the ACEs survey.²²⁶

The ACE survey generates an overall score, providing a broad overview of participants' experiences with adverse childhood events. The ACE survey score indicates the likelihood of experiencing various health issues later in life. A higher score on the survey indicates a greater

²²⁶ L. Starecheski, "Take the ace quiz - and learn what it does and doesn't mean." *NPR*, (2015): accessed December 4, 2022, <u>https://www.npr.org/sections/health-shots/2015/03/02/387007941/take-the-ace-quiz-and-learn-what-it-does-and-doesnt-mean</u>.

risk of developing a range of health problems because of adverse childhood experiences.²²⁷ This insight is crucial in understanding the potential long-term effects of childhood trauma on individuals' health and well-being, further underscoring the significance of this research endeavor.

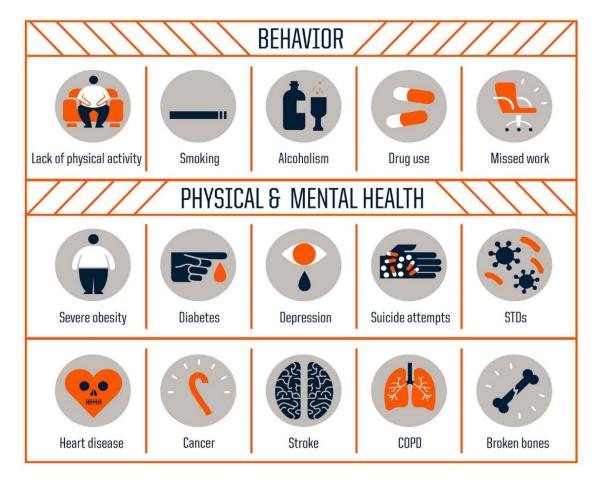


Figure 2: ACEs Increase Health Risks

Source: Centers for Disease Control and Prevention

Credit: Robert Wood Johnson Foundation.

²²⁷ L. Starecheski, "Take the ace quiz - and learn what it does and doesn't mean." *NPR*, (2015): accessed December 4, 2022, https://www.npr.org/sections/health-shots/2015/03/02/387007941/take-the-ace-quiz-and-learn-what-it-does-and-doesnt-mean.

In Michael F. Royer's research intervention, the focus is on using physical activity to potentially mitigate the connection between adverse childhood experiences (ACEs) and the occurrence of depression among adults in the United States.²²⁸ This research involved a substantial number of participants, a total of 117,204 individuals, allowing for robust data analysis. Figure 3 in Royer's study highlights a critical distinction between individuals with ACE scores greater than four and those with ACE scores less than four. This differentiation is vital in understanding how varying degrees of adverse childhood experiences might correlate with the risk of depression in adulthood.²²⁹ The data provided in Royer's study sheds light on the extent to which ACEs can affect a person's mental health later in life, offering valuable insights into this complex relationship.

The additional survey proposed in the current research project, as illustrated in Figure 4, is essential as it seeks to gain a more specific understanding of how childhood experiences have affected the participants involved. By employing this survey, the researcher aims to divide the group into two distinct categories: those who have encountered more significant life challenges stemming from ACEs and those who have experienced little to no discernible impact from these early-life adversities in their adulthood. This division is pivotal for the research, as it will allow for a deeper examination of the experiences and potential consequences of ACEs. By comparing these two groups, the study can pinpoint the specific factors or characteristics that may contribute to different outcomes in adulthood, helping to refine the understanding of the impact of ACEs on mental health and emotional well-being.

²²⁸ MF Royer and C. Wharton, "Physical Activity Mitigates the Link Between Adverse Childhood Experiences and Depression Among U.S. Adults," PLoS One. (2022):17(10): e0275185, accessed December 4, 2022. doi: 10.1371/journal.pone.0275185. PMID: 36223342; PMCID: PMC9555628.

²²⁹Ibid.

	Black women (<i>N</i> = 4059)	Black men (<i>N</i> = 2202)				
Variable	Unweighted count (weighted percent)	Unweighted count (weighted percent)				
Age						
20-39 years of age	1405 (40.2%)	717 (41.5%)				
40-64 years of age	1914 (44.9%)	1107 (46.4%)				
65+ years of age	740 (14.9%)	378 (12.1%)				
Education						
At least some college	2132 (54.7%)	1080 (49.8%)				
Less than high school	722 (16.0%)	453 (19.3%)				
High school	1205 (29.3%)	669 (30.8%)				
Adverse childhood experiences						
Childhood psychological abuse	359 (8.8%)	183 (8.0%)				
Childhood physical abuse	749 (18.0%)	476 (20.8%)				
Childhood sexual abuse	618 (15.9%)	156 (7.7%)				
Childhood emotional neglect	526 (12.3%)	232 (10.4%)				
Childhood physical neglect	352 (8.1%)	146 (6.8%)				
Parents divorced	798 (20.1%)	423 (19.7%)				
Witnessed maternal battering	523 (12.2%)	243 (10.2%)				

Figure 3: Royer's Research Study

	Black women (<i>N</i> = 4059)	Black men (<i>N</i> = 2202)	
Household substance abuse	932 (22.1%) 468 (21.4%)		
Household mental illness	235 (5.6%)	104 (4.6%)	
Household incarceration	351 (8.3%)	213 (10.3%)	
Any child abuse or neglect	1484 (36.4%)	797 (35.5%)	
Any household dysfunction	1281 (30.6%)	920 (42.1%)	
ACE score			
0	2046 (51.2%)	917 (41.2%)	
1	901 (22.2%)	633 (29.2%)	
2	418 (10.2%)	309 (14.2%)	
3	307 (7.2%)	163 (7.8%)	
4+	387 (9.2%)	180 (7.5%)	
Ever intimate partner violence victimization	507 (11.9%) 58 (2.5%)		
Past year gender discrimination	472 (11.9%)	154 (7.1%)	
Past year racial discrimination	924 (23.4%)	551 (26.0%)	
Ethnic identity			
Low	1315 (33.7%) 686 (32.3%)		
Moderate	1470 (36.2%)	808 (36.2%)	
High	1274 (30.1%)	708 (31.6%)	
Currently attends religious services	3071 (74.9)	1396 (61.7%)	
PY-MDE	396 (10.1%)	95 (4.2%)	

Figure 4: Phase 2 Screening Survey

Please rate your overall childhood experiences.

^{...}1 ^{...}2 ^{...}3 ^{...}4 ^{...}5

How often do you think of negative childhood experiences?

^{..}1 ^{..}2 ^{..}3 ^{..}4 ^{..}5

	99
Freque	ently

Disappointing	Exceptional	Not at all	Frequently
Please rate how your childhoo your adulthood.	d affects you in	Please rate the forgiveness who hurt you in your child	-
1 2 3	4 5	1 2 3	4 5
Not at all	Frequently	Completely	Not at all
Do you consider yourself mos	<u>tly</u>	Do you view other individ	luals <u>mostly</u>
Happy person?	" Yes " No	Trustworthy?	" Yes " No
Forgiving?	" Yes " No	Forgiving?	" Yes " No
Easily to get along with?	" Yes " No	Dependable?	" Yes " No
Please rate the quality of the re your mother.	elationship with	Please rate how satisfied y you are in life.	you are with where
"1 "2 "3 "	4 5	1 2 3	4 5
Disappointing	Exceptional	Disappointing	Exceptional
Please rate the quality of the re	elationship with	Please rate your overall pl	nysical health.
your father. 123	4 ··· -	1 2 3	4 5
-	-	Disappointing	Exceptional
Disappointing	Exceptional	Please rate your overall en	notional health
Please rate the quality of the re your family overall.	elationship with	"1 "2 "3	
··· 1 ··· 2 ··· 3 ···	4 5	Disappointing	Exceptional
Disappointing	Exceptional	Please rate your overall sp	piritual health.
Please rate your overall relation	nshin with	1 2 3	4 5
your significant others.	insinp with	Disappointing	Exceptional
1 2 3	4 "5	Please select your ethnicit	V
Disappointing	Exceptional	" American	"Afro-American
Which age bracket do you fall	under?	" Hispanic	"Asian "
" 19-30 years " 3	31-40 years	Other	
" 41-50 years " 5	51 or above		

Continued

Please select your marital status.

"Single "Married" Separated "Divorced

" Living with Partner

Do you think your childhood effect you in adulthood?

" Yes | " No

Why, or why not?

How has your childhood affected your perception of others?

What is an area in your life that you struggle with the most?

What is an area in your life that you feel is the most successful?

Please share any additional comments or suggestions.

Continued

Do you have kids?

" Yes | " No

Do you believe there are some things in life that are unforgivable?

"Yes | "No

Why, or why not?

List characteristics that best describe you as a person.

Please list medical conditions common in your family.

Please list your known medical conditions. (past and present)

Please share any additional comments or suggestions.

Figure 5: Intervention Design

Corresponding Week Intervention Plan/Task

Week One	 Virtual interviews with participants and the researcher will be conducted one-on-one on their adverse childhood experiences. Verbal Discussion: How have negative experiences of childhood impacted your adulthood? Discuss participants' ACEs Survey. Homework: Which experience one experience do you wish to work through during the research? Why?
Week Two	Virtual interviews will be conducted one-on-one with participants
	and the researcher discussing individual homework.
	Verbal Discussion: What perceptions or beliefs have you formed
	about yourself, others, or events due to the adverse childhood

experience you selected to work on? Discuss participant's ACEs Survey.

Homework: Make a detailed list of all the negative perceptions you feel about yourself that are potentially related to the ACE in one column. In the second column, write the opposite of the negative perception. Example: Column 1: I am unworthy of unconditional love. Column 2: I am worthy of being loved unconditionally.

Week ThreeVirtual interviews will be conducted one-on-one with participantsand the researcher discussing individual homework.

Verbal Discussion: Defining biblical forgiveness. Discuss the importance of forgiving the action and the person—a detailed explanation of homework assignments. Discuss biblical forgiveness.

Homework: The Week Two homework lists the application of forgiveness and letting go of negative emotions. Example 1: Tameika made me feel unworthy of unconditional love when she repeatedly beat me for mistakes made in my childhood. Today, I forgive Tameika for making me feel unworthy of unconditional love and no longer hold it against Tameika. Example 2: I forgive Tameika for repeatedly beating me as a child. I no longer desire to hold these actions against her and give them to God. (Repeat

	verbally or silently as often as needed) Be mindful of which
	emotions or experiences are more challenging to forgive.
Week Four	Virtual interviews will be conducted one-on-one with participants
	and the researcher discussing individual homework.
	Verbal Discussion: Being mindful of one's verbal and non-verbal
	words communicated. Discuss biblical forgiveness.
	Homework: Take accountability or inventory of one's negative
	thoughts or "I am" statements verbally released through daily
	journal writing for seven days.
Week Five	Virtual interviews will be conducted one-on-one with participants
	and the researcher discussing individual homework.
	Verbal Discussion: Renew the mind to think positively and speak
	positive affirmations instead of releasing negative words. Discuss
	applying forgiveness.
	Homework: List at least ten positive affirmations opposite the
	negative thoughts or "I am" statements in Week Four. Set the
	alarm and speak or write the positive affirmation three times
	daily. Continue to journal, taking an inventory of your thoughts.
	Continue forgiveness statements in problematic areas.
Week Six	Virtual interviews will be conducted one-on-one with participants
	and the researcher discussing individual homework.

	Verbal Discussion: Discover pattern interruptions suitable for
	participants when faced with a problematic area of forgiveness
	and negative thoughts. Discuss applying forgiveness.
	Homework: Continue to work on homework given in week five.
Week Seven	Virtual interviews will be conducted one-on-one with participants
	and the researcher discussing individual homework.
	Verbal Discussion: Adjusting individual pattern interruptions as
	needed for participants when faced with a problematic area of
	forgiveness and negative thoughts. Discuss the participant's
	willingness to forgive.
	Homework: Continue to work on homework given in week five.
Week Eight	The final virtual interview will be conducted with participants to
	assess their changes in mindset towards the adverse childhood
	experience, others, and individuals after three weeks of speaking
	positively. The participant will also identify any additional
	physical, emotional, or spiritual changes in their health they may
	have noticed. Participants will be provided with a suggestion of
	an individual plan to renew their minds.

Implementation of the Intervention Design

The primary aim of this intervention is to provide participants with practical steps to integrate into their daily lives. These steps revolve around daily release, forgiveness, and the

renewal of one's mindset. The ultimate objective is to guide participants in adopting a mindset that consistently focuses on thoughts that align with qualities such as truth, nobility, righteousness, purity, love, admiration, excellence, and praiseworthy things instead of dwelling on negative or detrimental thoughts.²³⁰ A foundational aspect of this intervention is grounded in the teachings of the Apostle Paul, who had a significant role in the early Christian church. The Apostle Paul emphasizes, " Don't copy the behavior and customs of this world, but let God transform you into a new person by changing the way you think. Then you will learn to know God's will for you, which is good and pleasing and perfect" (Rom. 12:2, NLT). Notably, this highlights that transformation is not contingent on external actions such as contributing more money or attending church more often. Instead, it underscores the transformative power of renewing one's mind. The intervention aims to apply this biblical wisdom to help participants cultivate a positive and spiritually aligned mindset, enabling them to navigate life's challenges and decisions in line with God's will. "The body and mind are integral parts of one's Christian life, and for one's faith to be strong and effective, there must be a transformation in the way they think and see the world."²³¹

A robust and effective Christian faith is not limited to spiritual beliefs alone but should also encompass the well-being of the body and the mind. In other words, faith is not detached from one's mental and physical health. This perspective aligns with the understanding that trauma can have a profound impact on an individual's thought processes. Trauma is one of the most intricate and challenging patterns of thought to address. Many therapists and counselors

²³⁰Diane Smith, "Using Scripture as Affirmations to Promote Positive Religious Coping, Secure Attachment, and Posttraumatic Growth in Christian Clients in Psychotherapy" (PhD diss., Southern Connecticut State University, 2019), *ProQuest Dissertations & Theses Global*.

²³¹ Gary C. Reynolds, "Building the Confidence of the Local Church by Renewing the Mind," PhD diss., (Biola University, 2014), ProQuest Dissertations & Theses Global, 36.

acknowledge that working with clients who have experienced trauma can be a lengthy and complicated process, often extending over several years.

The reason for this complexity lies in the deep-seated and enduring effects of trauma on an individual's mental and emotional well-being. Trauma can shape thought patterns, often leading to harmful or distressing cognitive frameworks that affect various aspects of a person's life. As a result, addressing trauma and its associated thought patterns necessitates a thorough and patient approach by mental health professionals. These practitioners work diligently to guide their clients through healing, recovery and transforming their thought patterns.²³² The journey towards mental and emotional healing is considered essential to fostering a strong and effective Christian faith, which, as mentioned earlier, should encompass the entire person, body, mind, and spirit.

Participants in this study have developed specific thought patterns and belief systems through repetitive experiences, often marked by negative self-perceptions. A deliberate strategy based on repetition facilitates renewing their minds and transforming these negative beliefs. The method comprises several essential steps to guide participants toward a more positive and affirming mindset. Firstly, participants are encouraged to engage in introspection and selfawareness, leading them to create a comprehensive list of the negative thoughts and emotions they hold about themselves. This initial step is a critical self-assessment to pinpoint the areas where they grapple with self-doubt and negativity.

Participants then record the opposite, positive affirmations on the other side of their list to counter these negative beliefs. These affirmations function as counterstatements, helping

²³² Caroline Leaf, *Cleaning up Your Mental Mess: 5 Simple, Scientifically Proven Steps to Reduce Anxiety, Stress, and Toxic Thinking* (Grand Rapids, MI: Baker Books, 2021), Kindle, loc. 236.

challenge and replace the detrimental thought patterns that have become deeply ingrained. An introduction into daily practice, wherein participants commit to speaking only the positive affirmations from their list each morning. The exercise aims to set a constructive and affirming tone for the day, gradually replacing the negative thought patterns with more positive and empowering ones. Acknowledging that moments of self-doubt and negative thinking may resurface throughout the day, participants are encouraged to revisit their positive affirmations during these challenging times. This repetition during difficult moments reinforces the new thought patterns and helps participants integrate them into their daily lives.

The researcher assumes a supportive role in this process. Each morning, participants receive a reminder text from the researcher, prompting them to practice speaking their list of positive affirmations. Regular contact offers accountability and ongoing motivation to help participants establish and maintain this transformative habit. The goal is to reshape participants' thought patterns and mindsets gradually. Participants aspire to cultivate a more positive, constructive, and empowering self-perception through consistent repetition and deliberately replacing negative beliefs with positive affirmations. The guidance and support offered by the researcher play a pivotal role in ensuring the success of this transformative process. A study explored the effectiveness of integrating positive affect and self-affirmation strategies with motivational interviewing in the pursuit of blood pressure control among African-American hypertensive individuals in comparison to a control group of African-American hypertensive individuals who received education alone.

While outside the scope of this research project, the study's results also shed light on the potential benefits of positive affirmations in enhancing physical health. The analysis involved examining numerous factors to identify predictors of blood pressure control at the one-year

mark, focusing on assessing their interrelationships. The study found several factors, including gender, baseline depressive symptoms, and perceived stress scores, played significant roles in this context (Figure 6). The results unveiled that those female participants exhibited significantly higher odds (OR=2.46, CI=1.14-5.29, P=.021) of attaining blood pressure control. Heightened levels of depressive symptoms (OR=.92, CI=.87-.98, P=.005) and increased perceived stress scores (OR=.95, CI=.90-.99, P=.027) are associated with reduced odds of achieving blood pressure control during the 12-month follow-up period. These findings underscore the relevance of factors such as gender and depressive symptoms in the pursuit of blood pressure control, emphasizing their importance in the context of the study.²³³

Characteristics Sociodemographic	Unadjusted OR	Confidence Interval	Р
Age (increase by 1 year)	1.04	1.00-1.08	.051
Sex (female)	2.46	1.14-5.29	.021
Marital status (married)	.52	.22-1.20	.126
Education (> high school)	.28	.26-1.47	.280
Clinical			
Charlson comorbidity index (CCI>3)	1.89	.72-4.99	.196
BMI	.97	.90-1.05	.470
Hypertension duration	.80	.96-1.03	.797

Figure 6: Univariate predictors of success

²³³C. Boutin-Foster, E. Offidani, B. Kanna, G. Ogedegbe, J. Ravenell, E. Scott, A. Rodriguez, R. Ramos, W. Michelen, L. M. Gerber, and M. Charlson, "Results from the Trial Using Motivational Interviewing, Positive Affect, and Self-Affirmation in African Americans with Hypertension (TRIUMPH)," *Ethnicity & Disease* 26, no. 1 (2016): 51-60, accessed November 3, 2023, <u>https://doi.org/10.18865/ed.26.1.51</u>.

Presence of symptoms	1.04	.46-2.36	.935	
Family history	.69	.22-2.14	.516	

The implementation of the intervention design will take place in virtual settings, creating a digital space for the research activities to occur. The virtual environment offers several advantages, primarily the ability to conduct interviews while maintaining a personal and intimate atmosphere. Importantly, this can be achieved even when the participants and the researcher are physically separated, possibly residing in different locations or states. Virtual settings allow for a safe and comfortable space for participants to share their experiences and thoughts with the researcher. It also offers the flexibility and convenience of remote participation, reducing logistical barriers and increasing accessibility for a broader range of individuals. During the research process, the researcher will keep a personal journal to record the observations of each participant. Journaling is a valuable tool for the researcher to document their insights, impressions, and notes on each participant's progress and experiences throughout the intervention.

In addition to the researcher's journal, the participants will be encouraged to maintain their journals. The purpose of these journals is to allow participants to record their thoughts, reflections, and subjective experiences during the intervention. Sharing information about the journal's contents with the participants during each session is essential to the research process. Communication ensures that the participants understand the importance of their journal and how it contributes to the research. Participants are not obligated to surrender their journals to the researcher. The journals serve as personal tools for self-reflection and expression, and participants can decide whether they want to share the contents. This approach respects the participants' privacy and autonomy while still enabling them to contribute to the research in a meaningful way.

In this research project, the implementation of a structured approach engages participants actively. The researcher assigns weekly homework to participants to facilitate deep reflection and thoughtful responses. These assignments encourage participants to reflect on specific questions and topics related to their experiences. Distributing this homework a week before the subsequent interview ensures that participants have ample time to contemplate and carefully formulate their responses. It ensures that the interviews proceed at a pace that allows participants to process their thoughts and feelings without rushing.

Efficiency and consideration of participants' time are pivotal principles that guide this research project. Consequently, the duration of each interview is intentionally limited to one-hour intervals. The measured time constraint serves various valuable purposes within the research process. It creates an environment where interviews are focused and highly productive, ensuring that the discussions delve deep into the relevant subjects and questions without unnecessary delays. It considers the participants' schedules and commitments, allowing them to plan for and allocate a manageable time slot for each interview. This predictability is crucial in balancing in-depth exploration and participants' other responsibilities without creating a burden. Furthermore, this adherence to the one-hour limit communicates a profound respect for the value of participants' time, underlining the commitment to conducting interviews efficiently. Lastly, by upholding a consistent one-hour duration for all interviews, the research project promotes fairness, uniformity, and accuracy in data analysis and participant comparisons. Ultimately, this deliberate choice is a cornerstone for maintaining efficiency and ensuring high engagement and quality throughout the research process.

The researcher offers flexibility in terms of availability. Interviews can be scheduled in the morning, afternoon, or evening, accommodating the diverse schedules and preferences of the participants. Flexibility is crucial in ensuring that participation is accessible and convenient for many individuals. There is a practical constraint considering the limitations of the research project, particularly the constraints on personnel conducting the research. The evaluation process in this project centers around one specific adverse childhood experience that each participant endured during the research. The approach is deliberate and practical, upholding the study's feasibility given the available resources and time constraints. By focusing on a single significant adverse childhood experience, the research can deeply understand its impact on the participants' lives. The targeted approach allows for thoroughly examining the chosen experience, ensuring that the research maintains its quality and depth. It also enables the research to provide valuable insights into the long-lasting effects of such experiences, contributing to a nuanced understanding of the interplay between childhood trauma and adult well-being.

Summary

In reviewing the intervention design aimed at applying Biblical forgiveness to the issues surrounding childhood trauma, this chapter highlights the research project's fundamental problem: that the impacts of early-life adversities are far-reaching, extending well beyond childhood and adolescence. The influence of these experiences is evident in various facets of adults' lives, encompassing physical health, mental well-being, emotional stability, and the ability to establish healthy relationships. As the researcher recognizes the multifaceted and enduring nature of these challenges, the development of a research study implementing an intervention design to comprehensively adopt a biblical approach to address the aftermath of childhood trauma occurred. A critical aspect of this approach is the integration of biblical principles of forgiveness, acknowledging the spiritual and emotional healing that forgiveness can catalyze. By doing so, the intervention design aims to provide a Bible-based solution that considers the intricate interplay of factors contributing to the repercussions of childhood trauma.

Within the framework of the intervention design, the process of renewing one's mindset, particularly addressing toxic thought patterns resulting from trauma, is a vital addition to the intervention design. The intervention recognizes that these negative thought patterns can persist and significantly impact an individual's mental and emotional well-being. In counteraction to this, the mindset renewal intervention is implemented through a deliberate process of repetition, aiming to replace destructive thought patterns with healthier alternatives. By targeting the cognitive aspects of trauma's aftermath, the intervention seeks to empower individuals to reshape their thinking and promote positive mental health outcomes while releasing the unforgiveness of past offenses. The chapter elucidates how the intervention design goes beyond surface-level solutions, delving into the intricate psychological dimensions of childhood trauma and offering a transformative approach grounded in biblical principles and the renewal of one's mindset.

CHAPTER 4: RESULTS

Collective Results

The researcher initially extended the opportunity to males and females to participate in this research through the Clubhouse app, an audio-based social platform. However, throughout the research project, the dynamics of the app underwent significant changes, leading to a noticeable decline in usage. The decrease in the target audience that frequented Clubhouse rooms is disheartening. Faced with these challenges and a shifting landscape, the researcher needed to adapt and seek an alternative approach to attract participants. As a solution, the researcher transitioned to a different social media platform, Facebook, to extend the invitation to a broader and more diverse audience. This approach aimed to include more male participants, recognizing the importance of a balanced representation in the research project.

Despite the extended outreach and the genuine intent to foster mixed-gender participation, no male participants expressed willingness to partake in a research project that required revisiting and addressing memories from their past. Several factors contributed to this reluctance in the research project amongst both genders as potential participants. Some believed that they had already forgiven the individuals involved in their past traumas, feeling that there was no need to revisit these memories. Others were hesitant to embark on the journey of forgiveness, possibly viewing it as a challenging or emotionally taxing process. There was also the possibility that some potential participants had genuinely forgiven the individuals connected to their past experiences, indicating that they had already undergone their healing process. Another contributing element was the time necessary to fully engage in the research program. The lack of willingness to participate in the research project highlights the complexity of addressing past traumas and individuals' varying responses and readiness to engage in forgiveness and self-reflection. It serves as a reminder that personal healing and forgiveness journeys are profoundly personal and influenced by various factors, including past experiences and individual perspectives.

Despite persistent and earnest outreach efforts conducted over an extended period, the researcher encountered a significant challenge in meeting the target of fifteen participants for the research project. Ultimately, only fourteen individuals were willing to participate; interestingly, everyone was female. Out of the fourteen participants, only seven were fully committed to the research process, which was a notable drop from the initial interest; the decline is due to various known and unknown factors. First, one individual needed to meet the necessary criteria for participation, leading to their exclusion from the study. Two participants faced scheduling conflicts, which made their full participation in the research project unfeasible. The behavior of the remaining six participants who opted to withdraw from the research adds intrigue to the situation. Remarkably, none of these participants provided reasons for their decisions, and they remained unresponsive to all forms of communication attempts after initially completing the Ace intake survey. This lack of communication posed a challenge for the research process, as it hindered efforts to understand the motivations behind their withdrawal and explore the factors that influenced their decisions.

Several of the participants who decided to withdraw from the research project initially showed a degree of interest by scheduling interview sessions. However, when the scheduled time arrived, they failed to attend these sessions, and even after repeated attempts to reschedule, they remained unresponsive. The lack of engagement created a significant obstacle in the research process. The absence of communication and the failure to attend or reschedule interviews made it quite challenging to discern the underlying reasons for their withdrawal. It left the researcher

114

with a considerable gap in understanding the factors that influenced these participants' decisions to step back from the research project. The silence of these individuals regarding their motivations and reservations created uncertainty and complexity, making it challenging to draw comprehensive conclusions about their experiences. The researcher can only make assumptions and not gain solid data or facts about the nature of the withdrawal. The situation underscores the intricate nature of research, mainly when sensitive topics are involved. The research dramatically affected participants' willingness and ability to engage in a research project due to many factors, including their firsthand experiences, emotions, and circumstances. Researchers must navigate these complexities with sensitivity and adaptability to ensure that the research process respects participants' needs and experiences. It also serves as a reminder of the importance of open and effective communication in research, as it allows for a more comprehensive understanding of participants' perspectives and experiences.

This scenario underscores the intricate and often unpredictable process of assembling a diverse and representative sample for research in these emotionally charged domains. Moreover, it highlights the evolving landscape of social media platforms and their impact on the research process. One key takeaway is the potential influence of the mode of presentation and the platform on participant response. For instance, the researcher assumes that the results would differ if the study's administration were in a traditional, physical setting, such as a brick-and-mortar church, with a presenter holding titles like Pastor or Doctor. The assumption raises questions about the role of authority figures and the in-person environment in shaping participants' decisions to engage in sensitive research. Nevertheless, what initially seemed like a disadvantage – the predominance of female participants and the lower-than-expected numbers – ultimately revealed advantages in the context of the research's focus, timeline, and objectives.

The gender composition of the participants may have influenced the depth and nature of the discussions related to forgiveness, childhood trauma, and personal growth. The smaller group size allowed for more in-depth and personalized engagement with each participant, contributing to a richer exploration of their experiences.

Data Analysis

The Ace survey form designed for the interviews garnered thirty views and received fourteen responses, resulting in a conversion rate of 47%. On average, it took each participant approximately 2 minutes and 55 seconds to complete the survey. Participants completed the Ace Survey anonymously. While this anonymity served its purpose, it posed a unique challenge when distinguishing between participants who were fully committed to the research and those who only proceeded beyond the survey stage. The results obtained from all fourteen participants who completed the survey are included in this section of the study.

Out of the fourteen participants who completed the survey, only one individual responded with a "no" to all the questions, rendering them ineligible to meet the research criteria. Interestingly, none of the participants answered "yes" to all the questions, underscoring the diversity and intricacy of their subjective experiences. It was somewhat disheartening to observe the numerous "yes" responses on the forms, and the researcher could empathize with those, as she answered "yes" to all but one of the questions. The researcher's personal information is not incorporated into the research process, as she had undergone a similar self-examination journey and was now investigating whether the strategies that worked for her could benefit others who have encountered adverse childhood experiences. These insights offer a valuable understanding of the range of adverse childhood experiences and their potential impact, rendering them a significant and informative research component.

The Ace Survey encompasses a series of probing questions to uncover participants' experiences related to adverse childhood experiences (Aces). The responses from the fourteen participants provide a glimpse into the prevalence of these experiences among them. The first question on the ACE Survey is regarding the emotional well-being of the participants, "Did a parent or other adult in the household often or very often... a) Swear at you, insult you, put you down, or humiliate you? or b) Act in a way that made you afraid that you might be physically hurt?" Out of the fourteen respondents, a substantial majority, nine participants, responded affirmatively to this question.

The second question within the survey investigates the prevalence of physical abuse within the household by asking, "Did a parent or other adult in the household often or very often... a) Push, grab, slap, or throw something at you? or b) Ever hit you so hard that you had marks or were injured?" The participants were evenly divided, with half answering "yes" and the other half responding with a "no." The third question addresses experiences of sexual abuse, questioning, "Did an adult or person at least five years older than you ever... a) Touch or fondle you or have you touched their body in a sexual way? or b) Attempt or have oral, anal, or vaginal intercourse with you?" Of these, nine of the fourteen participants admitted to experiencing such events. The following question inquires of the feelings of neglect within the family dynamic, asking, "Did you often or very often feel that ... a) No one in your family loved you or thought you were important or special? or b) Your family did not look out for each other, feel close to each other, or support each other?" In response, ten of the fourteen participants answered "yes."

Another question aimed to gauge whether the participants frequently felt deprived of essentials, "Did you often or very often feel that ... a) You did not have enough to eat, had to wear dirty clothes, and had no one to protect you? or b) Your parents were too drunk or high to

take care of you or take you to the doctor if you needed it?" In this instance, only one out of the fourteen participants responded "yes." When asked, "Were your parents ever separated or divorced?" Ten out of the fourteen participants disclosed that their parents had been separated or divorced at some point. To the questions "Was your parent/caregiver: a) Often or very often pushed, grabbed, slapped, or had something thrown at her? or b) Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? or c) Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?" When exploring the issue of domestic violence, six out of fourteen participants shared that they had witnessed their parent or caregiver subject to physical aggression or threats. "Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?" Six out of fourteen participants disclosed that they lived with someone who had issues with alcohol or drug misuse; this was also the same result for the question, "Was a household member depressed or mentally ill, or did a household member attempt suicide?" Lastly, five participants out of the fourteen answered "yes" to "Did a household member go to prison?" For a comprehensive examination of the participants' questions and responses, please refer to the chart below (Figure 7).

Swearing, insulting, or humiliation with fear of physical harm	64.29%.
Physical abuse with injury or marks	50%
Sexual abuse or inappropriate touching/fondling	64.29%
Feeling unloved or unimportant in the family with a lack of support and closeness	71.43%

Figure 7: ACE Survey Question Data

ACE SURVEY QUESTION

PERCENTAGES

Insufficient basic needs, parents too intoxicated to provide care	7.14%
Parents separated or divorced	71.43%
Witness domestic violence against parent/caregiver	42.86%
Living with a problematic drinker, alcoholic, or drug user	42.86%
Household members struggling with depression, mental illness, or attempted suicide	42.86%
Living with a household member who went to prison	35.71%

These percentages offer insight into the prevalence of adverse childhood experiences within the group of participants and provide an understanding of the distribution of their experiences across various categories.

In the second phase of our survey, thirteen participants who qualified based on their responses to the Ace Survey completed Phase Two Survey upon signing their consent form. The research participants in phase two of the survey provided valuable insights through their responses to sixteen questions, which now identified all remaining participants. All except two were in the southern region of the United States, one being in California and the other in Washington. These questions carefully explored various dimensions of their experiences, emotions, and perspectives.

An interesting demographic note is that all but two participants' locations are in the southern region of the United States, with one residing in California and the other in Washington. The age distribution of the participants ranged from 28 to 59, with a mean age of approximately 44.3 years and a median age of 45 years, showing a broad age spectrum among the respondents. For the first question, participants were to rate their overall childhood experiences on a scale of one to five, with one signifying 'very poor' and five signifying 'very

good.' The most common response was three-fair, provided by eleven participants, reflecting a range of perceptions regarding their childhood. The second question asked how often participants think of adverse childhood experiences, with response options ranging from one (rarely) to four (frequently). The most common response was three - sometimes, which was selected by all thirteen participants, suggesting that these experiences are not forgotten and occasionally resurface in their thoughts.

In the third question, participants rated how their childhood experiences affected their adulthood, with response options from one, not at all, to four, extremely. The responses varied, with most participants indicating moderate effects, while one person selected one for extreme, signifying a significant impact. The subsequent questions inquired about participants' views on forgiveness, personal characteristics, and their perspectives on others. These responses provide valuable data for the research project, allowing for a deeper understanding of how childhood experiences relate to various aspects of adulthood and personal well-being. For a comprehensive examination of the participants' questions and responses, please refer to the chart below (Figure 8).

Survey Question	1	2	3	4	5
	Percentage	Percentage	Percentage	Percentage	Percentage
Please rate your overall childhood experiences.	7.69%	23.08%	53.85%	15.38%	0%
How often do you think of negative childhood experiences?	0%	7.69%	84.62%	7.69%	0%
Please rate how your overall childhood affects you in your adulthood.	30.77%	23.08%	30.77%	23.08%	0%

Please rate the forgiveness granted to those who hurt you in your childhood.	0%	7.69%	53.85%	30.77%	7.69%
Do you consider yourself MOSTLY a happy person?	0%	7.69%	30.77%	46.15%	15.38%
Do you consider yourself MOSTLY a forgiving person?	0%	0%	30.77%	46.15%	23.08%
Do you consider yourself MOSTLY easily to get along with?	0%	0%	7.69%	53.85%	30.77%
Do you view other individuals USUALLY as trustworthy?	0%	30.77%	30.77%	38.46%	0%
Do you view other individuals USUALLY as forgiving?	0%	15.38%	84.62%	0%	0%
Do you view other individuals USUALLY as dependable?	0%	30.77%	53.85%	15.38%	0%
Please rate the quality of the relationship you have/had with your mother.	15.38%	0%	38.46%	23.08%	23.08%
Please rate the quality of the relationship you have/had with your father.	38.46%	23.08%	15.38%	7.69%	15.38%
Please rate the quality of the relationship you have with your family overall.	7.69%	0%	69.23%	15.38%	7.69%
Please rate how satisfied you are with where you are in life.	7.69%	23.08%	23.08%	46.15%	0%
Please rate your overall physical health.	0%	15.38%	76.92%	0%	7.69%

Please rate your overall	15.38%	0%	38.46%	38.46%	7.69%
emotional health.					

The two surveys administered during the research project reinforced its significance, highlighting the relevance of exploring the issues. However, these surveys could have explained why only seven participants proceeded with the research. The observation underscores the importance of recognizing that not all individuals may be prepared or willing to explore deeper into their healing process. Some participants may acknowledge the existence of a problem but may not be emotionally or mentally ready to address and resolve it actively. The research project allowed participants to select convenient times for their involvement, aiming to accommodate their schedules and preferences. While this individualized approach benefited those participants who chose to engage, it posed a disadvantage to the researcher in managing the research process. However, the smaller number of participants in this research project ultimately turned out to be advantageous for the researcher. This smaller group size allowed for more in-depth and personalized engagement with each participant. It permitted the researcher to establish a deeper understanding of the participants' experiences and a closer connection with their narratives.

During the initial interview phase, the primary goal was to gain insight into the participants' childhood experiences and how these experiences had left an impact on their lives. To achieve this, the researcher reviewed the participant's responses to the Phase 2 Survey and encouraged them to provide more detailed explanations for each answer. This approach helped uncover a more comprehensive understanding of the participants' personal histories and perspectives on how these experiences shaped their lives. It facilitated a richer exploration of their emotional and psychological responses to these experiences. This thorough approach to the

initial interviews laid the foundation for a deeper exploration of participants' intricate emotional and psychological responses toward their childhood experiences.

During phase two of the study, it became clear that most participants, except for one, experienced intense emotions as they shared the reasons behind their survey responses. The process of self-exploration led them to confront emotions that they believed to be healed or buried deep within. As each participant was encouraged to elaborate on their answers, it became clear that they were tapping into a reservoir of unresolved emotions and memories. The revelation was particularly intriguing because the questions triggering these emotional responses varied from person to person. No consistent pattern indicated which specific question elicited such intense emotional reactions. The diversity of triggers highlighted the complexity and unique nature of each participant's experiences, underscoring that the emotional scars of their past were deeply personal and individualized.

Participants approached this process seriously, investing profound thought and introspection into their answers. Their commitment to reflecting on their past experiences and willingness to share the resulting emotions highlighted the profound significance of the research project. It revealed the depth of emotions that lay just beneath the surface for many participants, suggesting that these experiences had a lasting impact on their lives. One of the unique aspects of the study was the striking similarity in responses between two participants who, as it happened, were siblings with a significant age gap. Despite not living under the same roof at the same time for an extended period of their childhood, their shared experiences and responses exhibited a remarkable overlap regarding their past traumas and the enduring effects of those traumas. This observation accentuated the pervasive impact of their shared experiences and hinted at the potential ripple effects of trauma within families.

123

Concluding the initial interview phase, the researcher introduced a pivotal element into the study, requiring all participants to engage in a week-long deep reflection. During this time, each participant's challenge was to identify a specific event from their past and the person associated with it whom they felt compelled to forgive as an integral part of their healing journey. They were further encouraged to ponder why they believed the individual and event should be the central focus of our study. It was crucial to emphasize that due to time constraints and the rigorous examination required for each traumatic event, the study necessitated delving deeply into a single incident.

Almost all participants, with only one exception, successfully pinpointed a specific individual in their lives who warranted forgiveness by the conclusion of the first interview, providing a revelation of the profound self-awareness that they had developed and underscoring the significance of this particular aspect of their healing process before or during the initial interview. It demonstrated their commitment to confronting the past and taking steps toward forgiveness. However, during the interval between the first and second interviews, some participants opted to revise their initial choice concerning the person or incident they needed to forgive. The researcher observed this as a dynamic and evolving understanding of their own experiences, emphasizing the complex nature of the forgiveness journey by the participants. Revising their choice showed that they took time to process what was about to take place and the importance of working through some of the more difficult challenges with someone versus on their own. One participant indicated during the first interview that they needed to forgive God; however, they were among those who altered their response in the second interview. Each participant, in their own way, sheds light on the intricate and deeply personal nature of the forgiveness journey, where perspectives and understandings can evolve and allow the process to develop in a way uniquely tailored to everyone's experiences and emotions.

Five of the seven participants needed to forgive either their mother or father. The remaining two participants presented diverse responses, one stating the need to forgive themselves and the other their sibling. It became evident that the individuals who had caused them the most harm during their childhood were those with the expectation of being their protectors and caregivers. The breach of trust and role reversal were recurring themes in the narratives. One participant admitted to contemplating dropping out of the forgiveness process, finding it exceptionally challenging to confront and release painful childhood memories and emotions that seemed to carry over into her adulthood and marrying someone almost identical to her childhood abuser. For this individual, the act of forgiveness seemed particularly daunting, undesirable, and confusing, as she did not know whether to start with her father, God, or herself and, at the same time, wanted to add in her ex-husband. While some participants described incidents that involved physical harm, it was the impact of hurtful words that seemed to leave the most profound scars. Participants spoke passionately about how these past incidents still resonated with them emotionally. Some of them believed that they had already forgiven the actions themselves. Still, the words that accompanied these actions and the lingering emotions associated with them continued to affect them profoundly. Two participants had gone through a similar process of forgiveness, but it only touched the surface of the action, not the emotions.

A particularly poignant observation in the case of the two sisters revealed they both endured physical, mental, and sexual abuse during their formative years from the same individual, and the trauma they experienced continued to cast a long shadow not only on their relationship with each other but also with their other siblings. The ripple effect of trauma illustrates how its consequences extend beyond the individual, permeating family dynamics and creating a cycle of suffering and strained relationships. It underscored the profound and lasting impact such experiences can have on the child and those around them, shaping the family's dynamics and interactions.

To guide the participants through the forgiveness process, the researcher clarified the concept of biblical forgiveness, emphasizing the idea of letting go and completely absolving the person responsible for their past offenses. The reiteration of forgiveness to the participants, a conscious choice they must make daily throughout the study, was made frequently. Participants were allowed to verbally express their forgiveness or write it down each day, providing a tangible and personal outlet for their emotions. Participants were encouraged to understand that some parts of their stories might be easier to forgive than others while encouraging them to remain persistent with the forgiveness process. Therefore, this allows them to navigate the complexities of their emotional journey and gradually work towards a more complete sense of healing and reconciliation. It emphasized the ongoing commitment required to forgive the person, the actions, and the associated emotions, signifying a comprehensive approach to the healing process.

Participants compile a comprehensive list encompassing every negative emotion and detrimental thought they had come to believe about themselves, mainly stemming from the specific incident in question. Some participants found it necessary to include additional negative thoughts that were not directly related to that incident but were weighing heavily on their minds and required reversal. On one side of this list, they wrote down the negative thoughts and emotions they had been carrying. On the other hand, they were encouraged to document the positive aspects of how they wanted to feel and perceive themselves. During this phase,

participants maintain a journal to record any shifts in their perspective regarding the individuals involved in the incident and their self-image. The journal was a valuable tool for tracking their progress and fostering self-reflection. As part of their daily routine, the researcher contacted the participants to inquire whether they had actively spoken positive affirmations about themselves. It was heartening to observe that some participants were proactively reaching out to share their experiences. The practice of speaking positive words over themselves brought joy and empowerment to each of them.

However, at one point, one of the participants struggled in the initial days, struggling to speak positively about herself because she felt the opposite of her list. The researcher reassured her that such challenges were natural and expected. The process of self-affirmation and selftransformation was a gradual one. Remaining consistent in speaking positive words over oneself was emphasized as a key to eventually making this practice feel more natural and empowering. The negative thoughts and beliefs they held about themselves did not develop overnight, and, as such, they would not disappear overnight either. These beliefs had been ingrained through repetition and required the counteraction to develop through a similar process of repetition and self-affirmation. The importance of persistence and patience in their journey toward healing and self-empowerment required frequent reinforcement.

Summary of the Results

Upon concluding the research project, participants provided feedback on how the process of forgiveness and the renewal of their minds with positive affirmations had impacted them. The unanimous sentiment among all participants was that they found the process exceptionally beneficial and intended to continue applying it. They revealed how this journey had led to a profound self-awareness, illuminating aspects they believed they had already overcome. While many participants initially associated forgiveness with pardoning others, this experience made them realize the importance of forgiving themselves. For some, speaking positive affirmations about themselves had a noticeable positive impact on their daily lives, providing a valuable tool for personal growth that influenced their self-perception and interactions within their families and workplaces. Some participants recognized that moments of frustration often masked deeper issues that required forgiveness, either toward themselves or regarding their past experiences. This newfound awareness allowed them to address these issues, preventing them from negatively affecting their present and future.

One participant enjoyed participating in the research project and acknowledged the ongoing nature of forgiveness. They highlighted the value of introspection, especially during unexpected times, affirming that the method used for applying biblical forgiveness and renewing one's mind had been beneficial. They stressed that understanding biblical forgiveness gave them the freedom to move forward despite the initial discomfort. Renewing their mind to align with their original state, as intended by God, enabled them to close doors to resentment and bitterness, safeguarding their physical and emotional well-being. When asked about their likes and dislikes regarding the process, one participant noted discomfort in revisiting forgotten or unrealized memories. However, they appreciated that this process had brought hidden issues to the surface, allowing them to address these concerns and leading to closure and personal growth.

When asked about their plans to apply the steps of the research process to other areas of their lives, all participants expressed an unwavering commitment to continue using this transformative journey to address various aspects of their lives and deal with other traumatic incidents of the past, and also in different areas where forgiveness is warranted. This unwavering dedication underscored the profound and lasting impact of the research project on their personal growth and healing journey. Participants were also encouraged to share how the research had made them feel and its effects on them. One participant offered a powerful and deeply personal response, focusing on their experience with verbal abuse from their mother. They shared that despite the famous saying, "Sticks and stones may break my bones, but words may never hurt," verbal abuse had left a profound impact on their life. The hurtful words inflicted by their mother had seared deep into their psyche, leaving invisible scars. The power of words had made them feel inferior, unworthy, inadequate, and filled with negative emotions, as these words came from a parent, someone expected to provide love, upliftment, encouragement, motivation, and support, not emotional destruction.

The effects of this verbal abuse extended into almost every facet of their life, affecting their self-esteem, relationships, and personal ambitions. The negative words had become deeply embedded in their self-perception, causing them to internalize feelings of inadequacy and a pervasive sense of failure- profoundly impacting their interactions with others, as they expected others to view them in a similar demeaning light. However, through the research process, this individual experienced a profound transformation. They could now fully forgive, communicate positively, and express themselves effectively. They had learned to replace negative self-talk with positive affirmations, casting aside the dark cloud of past words. Their newfound ability to reject negative influences and replace them with faith, prayer, and a sense of purpose had allowed them to rebuild relationships, express love, and share their testimony for the glory of God.²³⁴ Essentially, they had broken generational curses, becoming a beacon of motivation and encouragement, firmly grounded in their faith and inner strength.

²³⁴ Duvall, J. Scott, and J. Daniel Hays, "Grasping God's Word," *A Hands-on Approach to Reading, Interpreting, and Applying the Bible*, Grand Rapids, MI: Zondervan Academic, 2020.

Another participant appreciated the method used to apply biblical forgiveness and renew their mind, finding it incredibly beneficial. They described how this process facilitated a profound self-examination, enabling them to confront their inner self and take personal accountability. They found inspiration in the concept that if God could extend forgiveness to them, they, too, could extend forgiveness to others. This transformative process encouraged selfforgiveness and offered a way to release the burden of negative experiences.

The participants realized they no longer needed to be weighed down by past trauma, verbal abuse, rejection, or feelings of being unloved or overlooked. They realized they possessed the power to bear these burdens, not as identities, but as experiences that had shaped their journey. The participant spoke passionately about the importance of continually speaking positive affirmations over their life, becoming a source of light and positivity in every situation. They emphasized the need to remain humble and resist the temptation to react contrary to their spiritual beliefs. Instead, they advocated taking moments to step away and gather themselves when faced with challenging situations, preventing backward steps and actions inconsistent with their values and God's teachings. This perspective reflects a profound transformation in their approach to life, fostering personal growth and resilience.

Another participant expressed gratitude for the opportunity to engage in this healing journey and extended appreciation for the guidance provided during the research project. They emphasized that the project had been a valuable resource for applying biblical forgiveness and renewing their mind. This process had been instrumental in helping them identify the origins of negative self-talk and recognize the pivotal moments in their life that had contributed to this downward spiral. This individual highlighted their appreciation for speaking positive affirmations, even though they initially found it challenging. They confessed that they had difficulty believing the affirmations they initially uttered about themselves. This struggle reflected the depth of their self-doubt and the impact of past experiences on their self-image.

The participant's commitment to persist with this transformative process indicated a significant shift in their self-perception. They had realized the power of this approach to self-forgiveness and renewal, as it had already started to reshape how they viewed themselves and their place in the world. This transformation marked the beginning of a life-long journey toward forgiveness, which they were determined to undertake regardless of the circumstances or challenges they may face. It was a powerful testament to their resilience and dedication to personal growth and healing.

The research project had achieved its primary goal of providing a framework for biblical forgiveness and renewing the mind. However, it had gone beyond that by leaving a profound and lasting impact on the participants. They had found the project helpful and were enthusiastic about continuing to apply the methods they had learned. They recognized the substantial value of this process and how it had brought about positive changes in their lives. This enduring commitment illustrated the lasting influence of the research project, demonstrating its potential to serve as a catalyst for lasting personal transformation and healing, inspiring participants to embrace a path of forgiveness and self-renewal.

CHAPTER 5: CONCLUSION

This research examines psychological rejuvenation by investigating the potential therapeutic effects of Biblical forgiveness and daily affirmations combined. The study specifically aimed to address the emotional and psychological ramifications stemming from Adverse Childhood Experiences (ACE), thereby contributing to the recovery and transformation of survivors. Adverse Childhood Experiences encompass a wide array of traumatic events during childhood, including but not limited to physical, emotional, or sexual abuse, neglect, exposure to marital violence, parental substance abuse, familial mental illness, or the incarceration of a family member. The profound and enduring psychological and emotional consequences associated with ACEs pose a significant threat to public health. The researcher initiated this research project upon recognizing that many survivors of ACEs continue to bear the weight of childhood trauma into adulthood. This persistence of childhood trauma contributes to a range of challenges, including emotional distress, struggles in establishing and sustaining relationships, mental health issues, and a reduction in self-esteem; the researcher also personally experienced these challenges.

The study seeks to establish a foundational framework for the spiritual and psychological growth and rehabilitation of individuals affected by ACEs. The core elements of this research revolve around exploring the synergistic effects of Biblical forgiveness and the daily practice of positive affirmations as a method for achieving a Biblically grounded process of forgiving childhood wounds. Ultimately, the primary objective of this survey is to provide individuals with the tools necessary to embark on a journey of self-discovery, forgiveness, and personal revitalization. Rebirth, mercy, and forgiveness hold profound significance in the Christian faith, intertwined with emotional healing and self-affirmation. This framework encouraged individuals

to embrace forgiveness and renew their minds. The study has the potential to substantially contribute to trauma recovery and personal development within the Christian community. The impact could be particularly notable in aiding believers in cultivating a mindset aligned with the teachings of Christ. In comprehending the theological and scriptural underpinnings of forgiveness, an exhaustive exploration is investigating the depths of the Greek and Hebrew terms employed for forgiveness within the Bible. Through forgiveness, individuals become empowered to release pent-up resentment, anger, and emotional burdens resulting from transgressions committed against them. However, the enduring psychological consequences of childhood traumas, including repetitive offenses, tend to mold toxic and detrimental cognitive patterns. In this context, positive self-affirmations are a valuable tool for countering negative thought patterns, ultimately facilitating emotional resilience and recovery.

The study emphasizes the significant impact on survivors of Adverse Childhood Experiences (ACEs), suggesting that while some initiation in progress in healing, sustained utilization of these techniques is imperative. The primary objective of the research was to equip participants with the necessary resources to perpetuate their healing journey, gradually liberating them from the shackles of trauma and guiding them towards assuming an identity rooted in the positive affirmations articulated by their Creator. The overarching aspiration is to empower a multitude of individuals to surmount emotional and psychological trauma, thereby fostering personal development and rejuvenation. The tools dispensed through this endeavor hold the potential to extend their positive influence far beyond the immediate scope, resonating on a broader national scale. The study sought to underline the profound importance of comprehending the enduring consequences of Adverse Childhood Experiences, presenting a framework that integrates healing and personal transformation through the empirical exploration of a select test sample group. If ministries, therapeutic interventions, educational initiatives, and trauma support groups were to collaboratively expand their outreach and facilitate a research study investigating the effectiveness of faith-based therapy across diverse cultural contexts, a transformative impact could reverberate globally. Adverse childhood experiences exert a profound influence not only on individuals' mental and spiritual well-being but also on one's physical health.

The biblical approach adopted to bolster the recovery and flourishing of ACE survivors within a well-defined theoretical framework necessitated the examination of implications, applicability, limitations, and potential avenues for future research. While drawing from relevant literature and the theoretical framework, this study assessed the efficacy of employing biblical forgiveness and self-affirmations as therapeutic modalities for mitigating the emotional and psychological repercussions of adverse childhood experiences. This endeavor was not without its challenges, yet it ultimately yielded positive outcomes for the select sample group. The evaluation was instrumental in establishing a robust correlation between the research findings and the theoretical underpinnings upon which this study rests. This connection serves as a testament to the significance of the research within the boundaries defined by the theological and theoretical foundations.

The Bible places significant emphasis on the virtue of forgiveness towards oneself and others. According to the findings of this study, incorporating biblical forgiveness principles proved instrumental in assisting individuals on their journey to forgiveness. A substantial portion of the participants in this study identified specific individuals to whom they were motivated to extend forgiveness, thereby underscoring the efficacy of this process in enhancing self-awareness and acknowledging past traumas. It is essential to recognize that biblical forgiveness is pivotal in alleviating the burdens of harboring unforgiveness. The integration of positive affirmations within the study's framework purportedly catalyzed the revitalization of the mental faculties of the participants. As revealed by the research, this approach influenced not only the participants' self-perception but also their cognitive processes. Throughout this study, it became evident that the participants experienced a sense of empowerment as they diligently substituted negative selfaffirmations with positive counterparts. This transformative process contributed to the healing and restructuring of their emotional landscapes. The comprehensive examination of the research outcomes considered a wide array of existing literature encompassing themes related to Adverse Childhood Experiences (ACEs) and trauma recovery through an intervention design using biblical forgiveness and self-affirmation to renew one's mind. Additionally, this body of literature encompasses studies investigating the therapeutic efficacy concerning trauma and forgiveness, further enriching the contextual backdrop for the present research.

Research findings confirm the enduring psychological and emotional ramifications associated with ACEs. The study contributes substantiating evidence to the existing corpus of literature in this domain. The study identifies a spectrum of consequences encompassing psychological distress, challenges within marital relationships, and issues of self-esteem. The thesis thoroughly analyzes these complex effects and proposes potential remedial measures. It highlights that forgiveness has proven to be an effective mechanism within therapeutic interventions. Pervasive in the literature is that extending forgiveness to transgressors reduces stress levels and enhances mental well-being. Significantly, the present study advances the evidence concerning the beneficial impact of structured interventions to facilitate biblical forgiveness.

A discerning examination of the study's outcomes underscores the profound impact on recovery, self-awareness, and the cultivation of forgiveness among the participants. The incorporation of self-affirmation strategies is demonstrated to be instrumental in the alteration of detrimental thought patterns, ultimately culminating in the augmentation of self-esteem. The research findings accentuate the transformative potential of positive affirmations as participants embark on personal development and growth. The study revolves around faith-based trauma recovery approaches seamlessly merging psychological and theological facets. The biblical approach is indicative of the comprehensive nature of the research, which encapsulates both therapeutic and faith-based dimensions in the quest for healing and restoration.

By integrating these methodologies, a noticeable transformation in maladaptive behaviors leads to reduced emotional burdens. This process potentially paves the way for a comprehensive assimilation of the faith-based healing paradigm. The researcher accentuated the unique merits of this integrated framework, emphasizing the empirical efficacy of employing biblical forgiveness in addressing the impact of childhood trauma. Nevertheless, it is essential to acknowledge that early intervention would have been ideal, depending on identifying and assessing various pertinent variables. These inquiries can collectively contribute to a more biblical comprehension of the overall well-being of survivors of adverse childhood experiences, reflecting the trajectory of trauma recovery and the applicability of evidence-grounded therapeutic modalities.

Research Implications

The research has significant implications for various aspects, encompassing elements of self-affirmation, ministerial practices, biblical forgiveness, and trauma recovery, all of which

have the potential to influence the process of inner healing concurrently. Therapeutic practitioners and faith-based organizations can play a pivotal role in expediting the recuperative journey of trauma survivors by embracing the methodology in the study. Consequently, spiritual communities and trauma recovery ministries stand to derive substantial benefits from these insights. The self-affirmation and biblical-based forgiveness principles espoused in this study hold applicability across diverse cultural and religious contexts.

Adaptability is an asset across civilizations and religious systems. Cross-cultural ministry emerges as a testament to the acknowledgment and appreciation of the cultural backgrounds of trauma survivors. It is imperative to recognize that many individuals grappling with the aftermath of trauma face a profound confluence of psychological, emotional, and spiritual distress. The research underlines the inherent limitations of a unidimensional approach to trauma rehabilitation. It suggests that a multifaceted methodology spanning various academic, religious, and psychological domains holds the potential to facilitate the process of trauma recovery. By harmonizing these diverse approaches, a comprehensive and highly effective framework for trauma recovery materializes, thereby allowing researchers and practice. Trauma survivors stand to gain substantial benefits from implementing these multifaceted strategies. Counseling services and faith-based ministries that actively embrace these approaches are well-prepared to collaboratively engage in the transformative process of aiding trauma survivors on their journey toward recovery and healing.

The body of knowledge resulting from this research has a significant implication for ministries and organizations, equipping them with the tools to educate and proactively mitigate the pervasive impact of trauma on individual victims and the broader communities in which they reside. The empirical investigation conducted by the researcher and participants revealed a compelling narrative that accentuated the transformative potential of forgiveness in the restoration of emotions that once languished in the depths of one's soul. The researcher astutely advocates for a synergistic partnership between mental health specialists and faith-based communities, recognizing the nuanced and intricate nature of trauma. Such collaboration lays the foundation for the implementation of mindfulness-based trauma recovery strategies, mainly when overseen by mental health professionals well-versed in the intricacies of trauma-informed care. The multi-dimensional approach, encompassing the emotional, spiritual, and psychological dimensions of trauma research, has profound implications for the biblical-based rehabilitation of the individual. By addressing trauma through this comprehensive lens, the rehabilitation process addresses the person's totality, providing an opportunity for comprehensive healing and restoration.

Research Applications

The findings of this study have profound implications for a wide range of stakeholders, including faith-based organizations, trauma rehabilitation ministries, counselors, and specialists. These conclusions serve as a testament to the potential applications of the research within ministerial contexts, highlighting the opportunity for further development to address similar issues affecting individuals in these settings. Professionals specializing in trauma recovery and psychology can play a pivotal role in assisting religious organizations and congregations to create and implement comprehensive programs grounded in biblical forgiveness and selfaffirmation principles. These programs are most effective through structured sessions, which encompass various components contributing collectively to the extensive rehabilitation of trauma survivors. Core elements of such comprehensive rehabilitation programs may include individual counseling, group therapy, and educational seminars, providing participants with various tools and support mechanisms to aid their recovery journey. These programs emphasize integrating divine love, biblical forgiveness, and grace, recognizing the transformative potential of spiritual guidance, prayer, and scriptural study in the healing process.

Offering training initiatives that equip ministers, counselors, pastors, and volunteers with the necessary knowledge and skills is crucial. Such programs are instrumental in defining trauma, identifying unresolved trauma, and implementing the principles of biblical forgiveness within faith communities. It is evident that the act of forgiving childhood hurt, as prescribed in biblical doctrine, has the potential for profound impact within any denomination that adheres to the principles of the resurrection of Jesus Christ and the atonement for one's sins. In catering to the unique demands of diverse contexts, agencies and ministries must craft specialized trauma rehabilitation programs that are attuned to the specific needs of their communities.

Considerations of geographical considerations, demographic characteristics, and cultural nuances are essential, as these variables broaden any research project's scope and adaptability. Urban and rural settings may necessitate distinct program structures, reflecting the cultural acceptability of approaches. An effective strategy, therefore, involves the integration of ministry personnel who hold certifications as mental health professionals. These individuals should have a rightful place within the framework of every local or virtual church community. The collaborative approach offers a multifaceted system of support that encompasses both psychological and spiritual dimensions. Faith-based organizations hold a unique position to provide spiritual and emotional comfort while also collaborating with mental health professionals to address clinical concerns. Educational initiatives aimed at prevention, such as seminars and training sessions on trauma awareness and prevention, can be orchestrated by

ministries, with an unwavering strong emphasis on the importance of early intervention and trauma resolution to mitigate the risk of long-term consequences. Community-based healing interventions take on heightened significance through active participation in support groups, family therapy, and seminars. These comprehensive programs not only serve to rehabilitate and restore communities and families but also provide vital support to trauma survivors, demonstrating a proactive and biblical approach to the multifaceted challenges of trauma recovery.

Ministries are responsible for imparting knowledge to their members regarding the advantages of daily self-affirmation. Implementing self-affirmation guidelines can be a practical tool for fostering constructive self-dialogue, promoting a healthier self-image, and boosting selfesteem. The ultimate goal of this practice is to inspire participants, instilling a forward-looking perspective and motivation to actively pursue a brighter future. It is essential to recognize that individuals who actively engage in forgiveness and self-affirmation can gauge their personal development by establishing measurable goals and systematically tracking their progress.

Furthermore, these individuals should seek out additional biblical truths that can contribute to their long-term recovery from the repercussions of adverse childhood experiences. The multifaceted journey to healing encompasses various modalities, including therapy, check-in sessions, and participation in group gatherings, each offering a distinct level of support in the ongoing process of inner healing and forgiveness. The researcher advocates intensively including biblical forgiveness in theological institutions and ministries, ensuring comprehensive coverage in lectures and sermons. Forgiveness is a cornerstone of the Christian faith. Nevertheless, there is often a gap between the doctrinal emphasis and the practical application of extending the same grace and forgiveness exemplified by Jesus Christ. To address this disparity, it becomes imperative to deeply explore the theological underpinnings and the theological significance of forgiveness.

In the development of trauma rehabilitation programs that prioritize the biblical forgiveness of childhood wounds, a fundamental requirement is forthright communication and active participation from the individuals involved. The initial stage requires an honest examination of one's emotions and thoughts, serving as the foundational groundwork for subsequent stages. Adaptations and modifications to meet the unique needs of each individual are integral, as the trajectory is not universally prescriptive and adheres to distinct phases. A flexible and adaptive approach is instrumental in ensuring rehabilitation programs remain effective, grounded in empirical evidence, and attuned to the full spectrum of healing possibilities. Ministries are well-positioned to guide survivors in taking accountability in their healing journeys, requiring ministries to be educated and have the proper equipment to deal with individuals who are grappling with fragile emotions. Exercising caution and mindfulness to avoid inadvertently causing more harm than good, as unskilled interventions may become a hindrance rather than a catalyst for the individual's journey toward soul healing, is critical.

Handling individuals who have experienced trauma with the utmost sensitivity is of paramount importance, as their well-being and emotional recovery depend on a climate of trust and confidentiality. Confidentiality is crucial to any therapeutic relationship, especially when providing emotional care. Stipulating confidentiality in writing and outlining specific circumstances under which it can be breached is essential for several reasons. It protects the rights and well-being of clients, supports trust in the therapeutic relationship, and ensures that mental health professionals can respond appropriately to situations that may pose a risk to the client or others. Any form of gossip or inadvertent disclosure regarding the traumatic experiences could exacerbate their emotional wounds and result in heightened levels of distress. Respecting the privacy of an individual's healing journey and safeguarding personal information is paramount, even within the shared space of fellow survivors at events, seminars, and support groups. Ministry workers must respect these boundaries and refrain from sharing or discussing such sensitive matters.

While the stories of survivors can serve as powerful catalysts for influencing and inspiring others, it is essential to recognize that the decision to share one's testimony lies exclusively with the survivor. Ministry workers should be mindful of this principle and serve as facilitators of a safe and supportive environment rather than divulging sensitive information. Their role should prioritize acquiring knowledge and skills, but wisdom and compassion are equally vital. Equipping ministers and religious leaders with the requisite expertise in providing faith-based trauma treatment and specialized training programs can play a pivotal role. These initiatives are instrumental in imparting the wisdom necessary for guiding religious leaders in counseling their congregations effectively, particularly in contexts where trauma and emotional healing are significant concerns.

Ministry endeavors should wholeheartedly promote inner healing and the practice of biblical forgiveness, recognizing the transformative potential of these endeavors. The efficacy of these programs necessitates ongoing evaluations and feedback mechanisms, as the dynamics of each ministry community are unique. Programs should customize their approach to cater to the specific requirements of the community they serve, considering regional disparities and the impact of cultural dynamics on the frequency and characteristics of trauma. Successfully implementing these research applications by ministries entails a substantial investment of time, resources, and unwavering commitment to trauma healing. Faith-based organizations and churches are in an ideal position to support trauma survivors by integrating evidence-based practices into their supportive frameworks. Ultimately, the goal is to empower individuals to enhance their lives, discover their purpose, and undergo a transformative healing process. It is sobering that unresolved issues and unaddressed traumas tend to resurface and profoundly impact an individual's life, making it imperative to embark on a journey of healing and restoration.

Research Limitations

While the findings of this study have valuable implications, it is crucial to recognize and address the inherent limitations of this research. Understanding this limitation is essential for comprehending the research's outcomes and charting the course for future investigations. One primary limitation that merits acknowledgment is the relatively small sample size of the study. The inclusion of only seven survivors of childhood trauma may not provide a comprehensive representation of the broader population grappling with similar experiences. Variations in responses and experiences may exist within a more extensive and diverse sample, potentially yielding findings distinct from those of the present study.

It is essential to recognize that the research participants in this study were predominantly individuals from the Southern United States, with only two exceptions. Furthermore, all demographic homogeneity may constrain the generalizability of the research findings to other cultural, situational, and geographical contexts. Therefore, it is imperative to broaden the spatial focus when applying these findings to diverse cultural and regional settings. Another limitation is the potential presence of self-selection bias among research participants. Individuals who voluntarily participated in the study may possess distinct motivations and perspectives compared to those who chose not to participate. The existence of such self-selection bias raises questions about the applicability of the research findings to a broader population and necessitates a cautious interpretation of the results.

The research primarily focused on trauma experiences explicitly occurring during childhood, a phase known for its significant variability. However, the limitation lies in the fact that the study does not explore trauma experienced during other life stages or under distinct circumstances. Trauma does not exclusively affect a specific age group, and adult trauma survivors or individuals facing extraordinary circumstances may have significantly different experiences and therapeutic requirements compared to those studied in this research. The research allocated a short duration for participants to engage in self-affirmation and forgiveness. While this period provides valuable insights, it may not comprehensively illustrate the sustained effects of these techniques when applied over an extended period or their potential impact when discontinued. Therefore, the study highlights the necessity for long-term investigations to assess these strategies' advantages and drawbacks.

Another crucial aspect pertains to the participants' reliance on self-reporting regarding their emotional states. The dependence on self-reporting introduces the potential for social desirability and recollection bias. Participants may be inclined to provide information that aligns with societal expectations or to recall events selectively, introducing elements of subjectivity into the data. The researcher's acquaintance with all the participants adds complexity to this dynamic.

While qualitative inquiry is well-suited to explore the thoughts and experiences of individuals, it cannot inherently quantify or measure specific outcomes. Incorporating standardized surveys, which are characteristic of quantitative research, may enhance objectivity in the research process. Participants in this study engaged in multiple interviews, and despite diligent efforts to ensure consistency and minimize bias, employing a single interviewer may inadvertently introduce subjectivity into the data collection process. This aspect is worth considering. The study's analysis may not comprehensively account for the potential influence of participants' cultural and religious backgrounds on their trauma experiences and recovery processes. The applicability of the findings to individuals from various religious or cultural backgrounds limits the research limitation to Christian theology. Understanding these limitations provides context for interpreting the study's outcomes. Despite these constraints, the research makes substantial contributions to understanding biblical forgiveness and self-affirmation's role in trauma recovery. Future research should consider several avenues for enhancement by addressing and transcending these limitations.

Further Research

Future research endeavors offer several promising avenues to explore the intricate dynamics of forgiveness and self-affirmation within the context of trauma recovery. A longitudinal study could provide invaluable insights into how these practices impact trauma survivors over an extended period. The in-depth analysis could reveal the enduring effects of forgiveness and self-affirmation on various aspects of one's life, such as emotional well-being, interpersonal relationships, and spiritual development. Researchers can better understand their long-term consequences by assessing these activities' positive and negative elements. Extending the scope of this research to encompass the perspectives of survivors of various forms of trauma, such as interpersonal abuse, military experiences, and natural disasters, in the adult population could broaden the applicability of the study's findings. Comparing the efficacy of forgiveness and self-affirmation techniques across these diverse trauma categories may unveil nuanced variations and commonalities, shedding light on the specific needs and preferences of survivors within each category. Future research should also examine how self-affirmation and forgiveness influence individuals from various faiths and cultural backgrounds. A comparative approach may elucidate these practices' universal and culturally specific dimensions, contributing to a richer understanding of their cross-cultural applicability. It would be beneficial to conduct comparative studies assessing the effectiveness of forgiveness and self-affirmation in contrast to other therapeutic modalities, such as cognitive-behavioral therapy, story therapy, and mindfulness, for trauma recovery. This comparative analysis can help discern the unique contributions of forgiveness and self-affirmation, guiding the selection of appropriate therapeutic approaches based on individual needs and preferences.

Another promising avenue for future research is exploring the impact of faith and community support on trauma recovery. Investigating how these elements intersect with forgiveness and self-affirmation may unveil the mechanisms through which healing, community support, and shared narratives facilitate these practices. The research could offer valuable insights into the broader context of trauma recovery and the role of faith-based and community interventions. Christian leaders play a pivotal role in fostering mindfulness and a profound understanding of individuals' unique preferences and requirements for trauma recovery. The approach aids in assessing and implementing adaptive therapies that align with the individual's background, experiences, and religious beliefs. It is imperative to tailor forgiveness and self-affirmation practices to accommodate these diverse factors while maintaining fidelity to fundamental biblical truths. In addition to a faith-based perspective, medical professionals can contribute significantly to understanding how self-affirmation and forgiveness impact mental and physical health. A comprehensive exploration evaluates their effects on an individual's well-being, immunity, and stress levels. It extends beyond the conventional reliance on

pharmaceutical interventions to a biblical approach that integrates medical investigations, which can provide valuable insights into the multifaceted aspects of trauma recovery.

Medical studies should investigate the influence of intersecting identities, such as race, gender, sexual orientation, and disability, on the recovery process concerning forgiveness and self-affirmation. Diverse marginalized groups often undergo unique and varied experiences when dealing with trauma, necessitating robust medical data to either substantiate or disprove the actual healing effects of these practices.²³⁵ A thorough inquiry can help identify different communities' specific needs and responses, ultimately leading to more targeted and effective trauma recovery strategies. While several studies have explored the impact of self-affirmation and forgiveness on children and adolescents who have experienced childhood trauma, pharmaceutical prescriptions have primarily constituted the primary treatment approach. It is essential to recognize that medications are beneficial in helping individuals manage and cope with daily life but may not provide a complete cure. The necessity for more in-depth and diversified treatments for trauma survivors, addressing their unique needs, and offering comprehensive healing pathways is imperative.

The researcher obtained valuable insights into the influence of theological practices and interpretations on forgiveness and self-affirmation by conducting a comparative denominational analysis. However, several adjustments and further research are warranted to provide more conclusive findings and establish the efficacy of these processes. A critical facet to consider is the implications of this research for mental health, healthcare, and public policy. It is imperative to thoroughly assess these practices' potential applications and limitations before advocating for

²³⁵ Lauren Fries Costello and Sacha Klein, "Racial/Ethnic Differences in Determinants of Trauma Symptomatology among Children in the U.S. Child Welfare System Exposed to Intimate Partner Violence," *Journal of Family Violence* 34, no. 1 (January 2019): 33, accessed November 28, 2023 <u>https://doi.org/10.1007/s10896-018-</u> <u>9976-1</u>.

their broader use. The underlying assumption is that self-affirmation and forgiveness, when employed in conjunction, can serve as complementary components to mental health therapies.

The initiation of training programs is essential to advance the understanding of this subject and develop a comprehensive, multi-dimensional study. These programs should harness the collective knowledge and wisdom of therapists, spiritual leaders, and counselors. By bringing together diverse perspectives and expertise, these programs can provide invaluable support to trauma survivors as they navigate the intricate processes of forgiveness and self-affirmation. Through this collaboration, researchers can rigorously assess the effectiveness of this approach, expanding into an aspect that the initial research project should have thoroughly investigated.

Conclusion

In conclusion, while the original research has yielded valuable insights, a pressing need exists for more essential data and continued investigation. The findings suggest a potential positive impact of embracing biblical forgiveness for childhood traumas across various life domains, including family, romance, business relationships, and mental and physical well-being. However, the researcher observes the necessity for further exploration and conclusive evidence to substantiate these assumptions, ensuring a robust foundation for applying these practices in diverse contexts. An avenue worthy of future research involves examining the influence of faith and community support on trauma recovery. Unraveling how these elements intersect with forgiveness and self-affirmation may unveil the mechanisms through which healing, communal support, and shared narratives facilitate these practices, offering invaluable insights into the broader landscape of trauma recovery and the role of faith-based and community interventions.

Christian leaders are pivotal in promoting mindfulness and a profound understanding of individuals' unique preferences and requirements for trauma recovery. This approach aids in

assessing and implementing adaptive therapies aligned with an individual's background, experiences, and religious beliefs. Tailoring forgiveness and self-affirmation practices to accommodate these diverse factors while adhering to fundamental biblical truths is crucial. Beyond a faith-based perspective, medical professionals can significantly contribute to understanding how self-affirmation and forgiveness impact mental and physical health. A comprehensive exploration evaluates their effects on well-being, immunity, and stress levels, extending beyond conventional reliance on pharmaceutical interventions to integrate a biblical approach. This integration with medical investigations can provide valuable insights into the multifaceted aspects of trauma recovery, broadening our understanding of the intersection between faith, psychological well-being, and physical health.

Bibliography

- Adams-Clark, Alexis A., Angela H. Lee, Christina Gamache Martin, Arianna Zarosinski, and Maureen Zalewski. "Characterizing Maternal Apology Attitudes and Behaviors." *Journal of Child and Family Studies* 30, no. 10 (2021): 2379-2391.
- Adams, Marion. "The Author." *John's Gospel Free Bible Commentary in easy English*, 2006. Accessed November 10, 2022. https://www.easyenglish.bible/bible-commentary/john-ma-lbw.htm.
- Adams, Deana. Christian and Faith-Based Counseling for Brain Injury: Techniques for Survivors and Families. Routledge, NY: Routledge, 2023.
- Ahirwar, Geeta, Gyanesh Kumar Tiwari, and Pramod Kumar Rai. "Exploring the Nature, Attributes and Consequences of Forgiveness in Children: A Qualitative Study." *Psychological Thought* 12, no. 2 (2019): 214–31. Accessed November 3, 2023. doi:10.5964/psyct.v12i2.347.
- Allen, Jennie. *Get Out of Your Head: Stopping The Spiral of Toxic Thoughts*. Colorado Springs, CO: WaterBrook, 2020.
- Amen, Daniel G. *Change Your Brain, Change Your Life*. New York: Harmony Books, 2015. Kindle.
- Andrews, Edward D. *Renew Your Mind: Surviving And Overcoming Childhood Trauma*. S.L.: Christian Publishing House, 2020.
- Andersson, Sven-Olof et al. "Adverse Childhood Experiences Are Associated with Choice of Partner, Both Partners' Relationship and Psychosocial Health as Reported One Year After Birth of a Common Child. A Cross-Sectional Study." *PloS* 16, (2021): e0244696. Accessed September 7, 2022. doi:10.1371/journal.pone.0244696.
- Anda, R.F., A. Butchart, and V.J. Felitti, et al., "Building a Framework for Global Surveillance of the Public Health Implications of Adverse Childhood Experiences." *American Journal* of Preventive Medicine 59, no. 3 (2020): 419-428. Accessed November 3, 2023. <u>https://cctasp.northwestern.edu/wp-content/uploads/Global-Surveillance-and-ACES.pdf</u>
- Arterburn, Stephen. 7 Ways To Choose Healing. S.L.: Aspire Pr, 2017.
- Atallah, Devin G., Jessica B. Koslouski, Kesha N. Perkins, Christine Marscio, Rhyann L. Robinson, Michelle G. Del Rio, and Michelle V. Porche. "The Trauma and Learning Policy Initiative (TLPI)'s Inquiry-based Process: Mapping Systems Change Toward Resilience." *Journal of Community Psychology* 51, no. 7 (2023): 2943–63. Accessed November 3, 2023. doi:10.1002/jcop.23067.
- Barnhart, Julie W. "Using Developmental Formational Prayer to Impact the Emotional Upheaval Resulting from Early Childhood Relational Trauma." PhD diss., Ashland University, 2021. OhioLINK.
- Baker, Amy. *Caring for the Souls of Children: A Biblical Counselor's Manual*. Greensboro, NC: New Growth Press, 2020.

- Bartlett, Jessica Dym, and Sheila Smith. "The Role of Early Care and Education in Addressing Early Childhood Trauma." *American Journal of Community Psychology* 64, no. 3–4 (2019): 359–72. Accessed November 3, 2023. doi:10.1002/ajcp.12380.
- "Body," *Encyclopedia Britannica*, Accessed October 10, 2023. https://www.britannica.com/dictionary/body.
- Brand, Chad, Charles Draper, et al., eds. "Manasseh." *Holman Illustrated Bible Dictionary*. Nashville, TN: Holman Bible Publishers, 2003.
- Briggs, Ernestine C., Lisa Amaya-Jackson, Karen T. Putnam, and Frank W. Putnam. "All Adverse Childhood Experiences Are Not Equal: The Contribution of Synergy to Adverse Childhood Experience Scores." American Psychologist 76, no. 2 (2021): 243–52. Accessed November 3, 2023.doi:10.1037/amp0000768.
- Boutin-Foster, C., Offidani, E., Kanna, B., Ogedegbe, G., Ravenell, J., Scott, E., Rodriguez, A., Ramos, R., Michelen, W., Gerber, L. M., & Charlson, M. (2016). Results from the Trial Using Motivational Interviewing, Positive Affect, and Self-Affirmation in African Americans with Hypertension (TRIUMPH). *Ethnicity & Disease*, 26(1), 51-60. Accessed November 3, 2023.<u>https://doi.org/10.18865/ed.26.1.51</u>
- Boulanger-Bertolus, J., White, A.M., & Debiec, J. "Enduring Neural and Behavioral Effects of Early Life Adversity in Infancy: Consequences of Maternal Abuse and Neglect, Trauma and Fear." *Current Behavioral Neuroscience Reports* 4 (2017): 107–116. Accessed November 3, 2023. <u>https://doi.org/10.1007/s40473-017-0112-y</u>.
- Butler, Trent C. "Isaac, Son of Abraham." In *The Lexham Bible Dictionary*, edited by John D. Barry et al. Bellingham, WA: Lexham Press, 2016.
- Cai, J., Li, J., Liu, D., Gao, S., Zhao, Y., Zhang, J., & Liu, Q. (2023). Long-term effects of childhood trauma subtypes on adult brain function. *Brain and Behavior*, 13(5). Accessed November 3, 2023. <u>https://doi.org/10.1002/brb3.2981</u>.
- Calvin, John. "Commentary on Matthew 18:21". "Calvin's Commentary on the Bible." Accessed November 10, 2022. <u>https://www.studylight.org/commentaries/cal/matthew-18.html</u>.
- Costello, Lauren Fries, and Sacha Klein. "Racial/Ethnic Differences in Determinants of Trauma Symptomatology among Children in the U.S. Child Welfare System Exposed to Intimate Partner Violence." *Journal of Family Violence* 34, no. 1 (January 2019): 33. Accessed November 28, 2023. <u>https://doi.org/10.1007/s10896-018-9976-1</u>.
- Chester, Tim and Steve Timmis. *Everyday Church: Gospel Communities on Mission*. Wheaton, IL: Crossway, 2012.
- Cheung, Pedro. "12 Ways Parents Provoke Children to Anger." *BibleSumo*. BibleSumo, (2021). Accessed September 15, 2021. https://www.biblesumo.com/ways-parents-provoke-children-anger/.
- Cook, Chris, Isabelle Hamley, and Justin Welby. *The Bible and Mental Health: Towards a Biblical Theology of Mental Health*. London, UK: SCM Press, 2020.

- Cook, Sonya. "Biblical Pastoral Counseling: An Integrative Approach to Healing." *Scholars Crossing*, (2022). Accessed November 3, 2023. https://digitalcommons.liberty.edu/doctoral/3493/.
- Cooper, Zachary W., and Terry A. Wolfer. "Conceptualizing the Biopsychosocial-Spiritual Health Influences of Adverse Childhood Experiences and the Application of Primary Care Behavioral Health for Their Treatment." *Journal of Religion and Health*, 2023, 1– 21. Accessed November 3, 2023. doi:10.1007/s10943-023-01928-y.
- Chesterfield, Rodgers. "Meanings of Forgiveness in Psychotherapy, A Hermeneutic Literature Review." PhD diss., Auckland University of Technology, 2022. ProQuest Dissertations & Theses Global.
- Crews, Rachael Marie. "A Theology of Trauma for Pastoral Ministers." PhD diss., Regent University, 2023.ProQuest Dissertations & Theses Global.
- Clarke, Adam. "Commentary on Matthew 18:21". "The Adam Clarke Commentary." Accessed November 10, 2022. <u>https://www.studylight.org/commentaries/acc/matthew-18.html</u>.
- Craigo-Snell, Shannon. "Generational Joy: Affections, Epigenetics, and Trauma." *Liturgy* 35, no. 4 (2020): 58-66. Accessed November 3, 2023. DOI: 10.1080/0458063X.2020.1832852.
- Crandall, Alice Ann, Jacob R. Miller, Aaron Cheung, Lynneth Kirsten Novilla, Rozalyn Glade, M. Lelinneth B. Novilla, Brianna M. Magnusson, Barbara L. Leavitt, Michael D. Barnes, and Carl L. Hanson. "ACEs and counter-ACEs: How positive and negative childhood experiences influence adult health." *Child Abuse & Neglect*, vol. 96 (2019): 104089. Accessed November 3, 2023. https://doi.org/10.1016/j.chiabu.2019.104089.
- Creasman, Candice. "Soul Wounds Launch Team Creasman-Counseling.com." *Creasman Counseling*, 2018. Accessed November 10, 2022. https://www.creasmancounseling.com/uploads/3/8/3/0/38303531/soul_wounds_launch_team_.pdf.
- Detria, Taylor Glenn Chontay, and Barbara A. Pieper. "Examining a Relationship between Forgiveness and Delinquent Behaviors in Adolescent Males Who Have Adverse Childhood Experiences (Aces)," PhD diss., Wayne State University, 2019.
- Doriani, Daniel M. "Take, Read," in *The Enduring Authority of the Christian Scriptures*, ed. D. A. Carson, Grand Rapids, MI; Cambridge, U.K.: William B. Eerdmans Publishing Company, 2016.
- Durst, Dennis "Soul," ed. John D. Barry et al., *The Lexham Bible Dictionary*. Bellingham, WA: Lexham Press, 2016.
- Duvall, J. Scott, and J. Daniel Hays. *Grasping God's Word: A Hands-on Approach to Reading, Interpreting, and Applying the Bible.* Grand Rapids, MI: Zondervan Academic, 2020.
- Easton, M.G. Illustrated Bible Dictionary and Treasury of Biblical History, Biography, Geography, Doctrine, and Literature. New York, NY: Harper & Brothers, 1893.
- Ellison, Douglas W., Jennifer L. Walton-Fisette, and Kevin Eckert. "Utilizing the Teaching Personal and Social Responsibility (TPSR) Model as a Trauma-Informed Practice (Tip)

Tool in Physical Education." *Journal of Physical Education, Recreation & Comp. Dance* 90, no. 9 (2019): 32–37. doi:10.1080/07303084.2019.1657531.

- Elmore, Tim. "The Story of the Carrot, the Egg, and the Coffee Bean." *Growing Leaders*, (2022): Accessed October 10, 2023. https://growingleaders.com/blog/the-story-of-the-carrot-the-egg-and-the-coffee-bean/.
- Engel, Beverly. *The Emotionally Abusive Relationship: How to Stop Being Abused and How to Stop Abusing*. Hoboken, NJ: Jossey-Bass, 2023.
- Engelmann, Jan, Harald Murck, Stefanie Wagner, Lea Zillich, Fabian Streit, David P. Herzog, Dieter F. Braus, Andre Tadic, Klaus Lieb, and Marianne B. Müller. "Routinely Accessible Parameters of Mineralocorticoid Receptor Function, Depression Subtypes and Response Prediction: A Post-Hoc Analysis from the Early Medication Change Trial in Major Depressive Disorder." *The World Journal of Biological Psychiatry* 23, no. 8 (2022): 631–42. Accessed November 3, 2023. doi:10.1080/15622975.2021.2020334.
- Ermer, A.E., Matera, K.N. and S. Raymond. "The Reflections on Forgiveness Framework: A Framework to Understand Older Adults' Forgiveness Development over the Life Course." J Adult Dev 29, (2022):255–264. Accessed September 7, 2022. https://doiorg.ezproxy.liberty.edu/10.1007/s10804-022-09400-z/.
- Enright, Robert D., and Jacqueline Y. Song. "The Development of Forgiveness." *The Oxford Handbook of Moral Development*, (2020): 401–18. Accessed November 3, 2023. doi:10.1093/oxfordhb/9780190676049.013.22.
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. "REPRINT OF: Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study." *American Journal of Preventive Medicine* 56, no. 6 (2019): 774-786. Accessed November 3, 2023. https://doi.org/10.1016/j.amepre.2019.04.001.
- Fekete, Orsolya Reka, Liv Grethe Kinn, Torill M. Larsen, and Eva Langeland. "Salutogenesis as a Theoretical Framework for Psychosocial Rehabilitation: The Case of the Clubhouse Model." *International Journal of Qualitative Studies on Health and Well-Being* 15, no. 1 (2020): 1748942. Accessed November 3, 2023. doi:10.1080/17482631.2020.1748942.
- Fetscherin, M. and Sampedro, A. (2019), "Brand forgiveness", Journal of Product & Brand Management, Vol. 28 No. 5, pp. 633-652. Accessed November 3, 2023. <u>https://doi.org/10.1108/JPBM-04-2018-1845</u>.
- Feurer, Cope, Constance L. Hammen, and Brandon E. Gibb. "Chronic and Episodic Stress in Children of Depressed Mothers." *Journal of Clinical Child & Adolescent Psychology* 45, no. 3 (2016): 270-278. Accessed November 3, 2023. DOI: 10.1080/15374416.2014.963859.
- Fingelkurts, A. A., & Fingelkurts, A. A. (2023). Patients with Disorders of Consciousness: Are They Nonconscious, Unconscious, or Subconscious? Expanding the Discussion. *Brain Sciences*, 13(5). Accessed November 4, 2023. <u>https://doi.org/10.3390/brainsci13050814</u>

- Gill, John. "Commentary on Matthew 10:28," *Gill's Exposition of the Entire Bible*, (1999): Accessed October 10, 2023. <u>https://www.studylight.org/commentaries/geb/matthew-10.html</u>
- Gherasim, Adrian and Daniel Gherasim. "From Subliminal Perception to Neuromarketing." *Economy Transdisciplinarity Cognition* 23, no. 2 (2020): 40-6. Accessed November 3, 2023. <u>https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/subliminal-perception-neuromarketing/docview/2479811488/se-2.</u>
- Groeschel, Craig, and Yiwen Lin. *Winning the War in Your Mind: Change Your Thinking, Change Your Life*. Gaoxiong shi: Ge zi wai mian, 2022.
- Grogan, J. "The Myth of Resilient Children." *Psychology Today*. (2013). Accessed November 3, 2023. https://www.psychologytoday.com/us/blog/encountering-america/201302/the-myth-resilient-children.
- Harris, Burke Nadine. *The Deepest Well: Healing the Long-Term Effects of Childhood Adversity*. Boston: Mariner Books/HarperCollins, 2021. Kindle.
- Hayes, Steven C., and Stefan G. Hofmann. 'Third-wave' Cognitive and Behavioral Therapies and the Emergence of a Process-based Approach to Intervention in Psychiatry." World Psychiatry 20, no. 3 (2021): 363–75. Accessed November 3, 2023. doi:10.1002/wps.20884.
- Henry, Matthew and Leslie F. Church. "Psalms." *Commentary on the Whole Bible, Genesis to Revelation*, Grand Rapids, MI: Zondervan Pub. House, 1982.
- Hoffmann, F., Linz, R., Steinbeis, N., Bauer, M., Dammering, F., Lazarides, C., Klawitter, H., Bentz, L., Entringer, S., Winter, S. M., Buss, C., & Heim, C. "Children with Maltreatment Exposure Exhibit Rumination-Like Spontaneous Thought Patterns: Association with Symptoms of Depression, Subcallosal Cingulate Cortex Thickness, and Cortisol Levels." *Journal of Child Psychology and Psychiatry*. Accessed November 3, 2023.<u>https://doi.org/10.1111/jcpp.13853</u>.
- Horowski, J., & M. Kowalski. "Human Health and Christianity in the Context of the Dilemma of Forgiveness." PhD diss., Liberty Baptist Theological Seminary, 2013. ProQuest Dissertations & Thesis Global.
- Hughes, Shannon, Mary Rondeau, Scott Shannon, Julia Sharp, Grace Ivins, JeongJin Lee, Ian Taylor, and Brianna Bendixsen. "A Holistic Self-Learning Approach for Young Adult Depression and Anxiety Compared to Medication-Based Treatment-as-Usual." *Community Mental Health Journal* 57, no. 2 (2020): 392–402. Accessed November 3, 2023. doi:10.1007/s10597-020-00666-9.
- Jamieson, Robert, A. R. Fausset, and David Brown, *Commentary Critical and Explanatory on the Whole Bible*. Oak Harbor, WA: Logos Research Systems, Inc., 1997.
- Javier, Joyce R., Lucas R. Hoffman, and Shetal I. Shah. "Making the Case for Aces: Adverse Childhood Experiences, Obesity, and Long-Term Health." *Pediatric Research* 86, no. 4 (2019): 420–22. Accessed November 3, 2023. doi:10.1038/s41390-019-0509-2.

- Jones CM, Merrick MT, Houry DE. Identifying and Preventing Adverse Childhood Experiences: Implications for Clinical Practice. *JAMA* 323, no. 1 (2020):25–26.
- Jones Ross, Rachel W., Susan D. Boon, and Madelynn R. Stackhouse. "Redefining Unforgiveness: Exploring Victims' Experiences in the Wake of Unforgiven Interpersonal Transgressions." *Deviant Behavior* 39, no. 8 (2017): 1069–81. Accessed September 14, 2022. https://doi.org/10.1080/01639625.2017.1399747.
- Kaser-Boyd, Nancy. "The Rorschach and Trauma An Update." *Rorschachiana, The Rorschach Test Today: An Update on the Research* 42, no. 2 (2021): 118–38. Accessed November 3, 2023. doi:10.1027/1192-5604/a000133.
- Kelley, Allyson, and Dolores Subia BigFoot. "Spiritual Healing for Trauma and Addiction." *Discussions of Mental Health, Recovery, and Faith*, 2023. doi:10.4324/9781003274018.
- Kendall-Tackett, Kathleen. "Psychological Trauma and Physical Health: A Psychoneuroimmunology Approach to Etiology of Negative Health Effects and Possible Interventions." *Psychological Trauma: Theory, Research, Practice, and Policy* 1, no. 1 (2009): 35–48. Accessed November 28, 2023.
- Kerlin, Ann Marie, and Lisa S. Sosin. "Recovery from Childhood Sexual Abuse: A Spiritually Integrated Qualitative Exploration of 10 Women's Journeys." *Journal of Spirituality in Mental Health* 19, no. 3 (2016): 189–209. Accessed November 3, 2023. doi:10.1080/19349637.2016.1247411.
- Kim, J.J., E.L Tracy, and R.D. Enright. "Motivations for Forgiving an Offender with Practical Implications for Those in the Helping Professions: A Qualitative Study." *J Relig Health*, 104, (2022). Accessed September 13, 2022. https://doiorg.ezproxy.liberty.edu/10.1007/s10943-022-01505-9.
- Kroeger, Catherine Clark. Women, Abuse, and the Bible: How Scripture Can Be Used to Hurt or Heal. Eugene, OR: Wipf & Stock Publishers, 2019.
- Kosarkova, Alice, et al. "Childhood Trauma and Experience in Close Relationships Are Associated with the God Image: Does Religiosity Make a Difference?" *International Journal of Environmental Research and Public Health* 17, (2020): 8841. Accessed September 13, 2022. doi:10.3390/ijerph17238841.
- Kosarkova, Alice, Klara Malinakova, Jitse van Dijk P., and Peter Tavel. "Anxiety and Avoidance in Adults and Childhood Trauma are Associated with Negative Religious Coping." *International Journal of Environmental Research and Public Health* 17, no. 14 (2020): 5147, Accessed September 14, 2022.
 <u>https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/anxiety-avoidance-adults-childhood-trauma-are/docview/2425638474/se-2.</u>
- Knobloch, Leanne K., Jenny L. Owens, and Robyn L. Gobin. "Soul Wounds among Combat Trauma Survivors: Experience, Effects, and Advice." *Traumatology (Tallahassee, Fla.)* 28, no. 1 (2022): 11-23.
- Kumari, Rachana, and Anjana Mukhopadhyay. "Psychological Trauma and Resulting Physical Illness: A Review." SIS Journal of Projective Psychology & Mental Health 27, no. 2

(July 2020): 98-104. Accessed November 3, 2023.

https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/psychological-trauma-resulting-physical-illness/docview/2423817704/se-2.

- Larsen, Emmett M., Luz H. Ospina, Armando Cuesta-Diaz, Antonio Vian-Lains, George C. Nitzburg, Sandra Mulaimovic, Asya Latifoglu, Rosarito Clari, and Katherine E. Burdick. "Effects of childhood trauma on adult moral decision-making: Clinical correlates and insights from bipolar disorder." *Journal of Affective Disorders*, vol. 244 (2019): 180-186. Accessed November 3, 2023. <u>https://doi.org/10.1016/j.jad.2018.10.002</u>.
- Lawler, Tia Leanne. "A Phenomenological Study Exploring the Experiences of Adult Survivors of Interpersonal Childhood Trauma Have with Forgiveness in Their Healing Journey," PhD diss., *Liberty University*, 2023. ProQuest Dissertations & Theses Global.
- Leaf, Caroline. Cleaning up Your Mental Mess: 5 Simple, Scientifically Proven Steps to Reduce Anxiety, Stress, and Toxic Thinking. Grand Rapids, MI: Baker Books, 2021. Kindle.
- Levy, M. S. "A Helpful Way to Conceptualize and Understand Reenactments." *The Journal of Psychotherapy Practice and Research* 7, no. 3 (1998): 227-235. Accessed November 3, 2023. <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3330499/</u>.
- Linda, Mefford C, Kenneth D Phillips, and Misook L Chung. "Childhood Loss Experiences, Religiousness/Spirituality, and Hope as Predictors of Adult Life Satisfaction." *Mental Health Nursing*. 42, no. 7 (2021): 649-659. Accessed November 3, 2023. https://pubmed.ncbi.nlm.nih.gov/33052730/.
- Low, Maggie. God, I'm Angry! Anger, Forgiveness, and the Psalms of Vengeance. Carlisle, CA: Langham Global Library, 2023.
- MacArthur, John. "Matthew." *The Macarthur Bible Commentary: Unleashing God's Truth, One Verse at a Time*, Nashville, TN: Nelson Reference, 2006.
- MacDonald, William, and Arthur L. Farstad. "1 John." *Believer's Bible Commentary*, Nashville: T. Nelson Publishers, 1992.
- McLennan, John D., Harriet L. MacMillan, and Tracie O. Afifi. "Questioning the Use of Adverse Childhood Experiences (Aces) Questionnaires." *Child Abuse & Child Abuse & Childhood Experiences* (Aces) Questionnaires." *Child Abuse & Child Abuse & Child Abuse & Childhood Experiences* (Aces) Questionnaires." *Child Abuse & Child Abuse & Childhood Experiences* (Aces) Questionnaires." *Child Abuse & Childhood Experiences* (Aces) Questionnaires." *Childhood Experiences* (Aces
- McDugal, Sarah, and Kensley Behel. "Forgiveness and Loving Well in Cases of Abuse: A Biblical Perspective." *NAD Family Ministries*, 2021. Accessed November 3, 2023. https://www.researchgate.net/publication/368602559_
- McKean, Kent, and Heather McKean. *The Metanoia Method: How the Brain, Body, and Bible Work*. Port St Lucia, FL: Mind Change, 2021. Kindle.
- McKinley, Mike. *Luke 1–12 for You*. Edited by Carl Laferton. God's Word for You. The Good Book Company, 2016.
- Miller-McLemore, Bonnie J., and Lisa Sowle Cahill. Let the Children Come: Reimagining Childhood from a Christian Perspective. Minneapolis, MN: Fortress Press, 2019.

- Morris, Michelle J. "Divorce." In *The Lexham Bible Dictionary*, edited by John D. Barry et al. Bellingham, WA: Lexham Press, 2016.
- Murphy, Tim. *The Christ Cure: 10 Biblical Ways to Heal from Trauma, Tragedy, and PTSD.* West Palm Beach, FL: Humanix Books, 2023.
- Naeem, N., Zanca, R.M., Weinstein, S., Urquieta, A., Sosa, A., Yu, B., & Sullivan, R.M. "The Neurobiology of Infant Attachment-Trauma and Disruption of Parent–Infant Interactions." *Frontiers in Behavioral Neuroscience* 16 (2022). Accessed November 3, 2023. https://doi.org/10.3389/fnbeh.2022.882464.
- Noel, Melanie, Maria Pavlova, Lauren McCallum, and Jillian Vinall. "Remembering the Hurt of Childhood: A Psychological Review and Call for Future Research." *Canadian Psychology* 58, no. 1 (2017): 58–68. Accessed September 2, 2022. https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarlyjournals/remembering-hurt-childhood-psychological-review/docview/1877753306/se-2.
- Oliner, Samuel P., and Ronnie J. Swartz. *What Kind of Future Will Our Children Inherit?: The Glass Half Empty -- The Glass Half Full*. Arcata, CA: Humboldt State University Press, 2021.
- Oliveira, Rúbia Maria Weffort de. "Neuroplasticity." *Journal of Chemical Neuroanatomy* 108 (2020): 101822. <u>https://doi.org/10.1016/j.jchemneu.2020.101822</u>.
- Oprean, D. G. "Biblical Models for the Practice of Forgiveness in Public Life." *Journal of Humanistic and Social Studies* XI, no. 1(21) (2020): 131-142. Accessed November 3, 2023. <u>https://doaj.org/article/0a8b535dec374d99b7505b8ba2b2152b</u>.
- Penny, Glasson Barbara Johnson. Writing The Wisdom: Creative Writing As Healing From Childhood Trauma. S.L.: Sacristy Press, 2022.
- Perez Jolles, Monica, Wendy J. Mack, Christina Reaves, Lisa Saldana, Nicole A. Stadnick, Maria E. Fernandez, and Gregory A. Aarons. "Using a Participatory Method to Test a Strategy Supporting the Implementation of a State Policy on Screening Children for Adverse Childhood Experiences (Aces) in a Federally Qualified Health Center System: A Stepped-Wedge Cluster Randomized Trial." *Implementation Science Communications* 2, no. 1 (2021). Accessed November 3, 2023. doi:10.1186/s43058-021-00244-4.
- Perry, Bruce D., and Maia Szalavitz. *The Boy Who Was Raised as a Dog: And Other Stories* from a Child Psychiatrist's Notebook: What Traumatized Children Can Teach Us about Loss, Love, and Healing. New York, NY: Basic Books, 2017. Kindle.
- Perry, Bruce, and Oprah Winfrey. *What Happened to You?: Conversations on Trauma, Resilience, and Healing.* New York, NY: Flatiron Books, 2021. Kindle.
- Pozo, Daphne. "Modifying the Relational Suicide Assessment for Use with Latinx LGB Adolescents." *NSUWorks*, 2019. Accessed November 3, 2023. https://nsuworks.nova.edu/shss_dft_etd/56/.
- Reynolds, Gary C. "Building the Confidence of the Local Church by Renewing the Mind." PhD diss., *Biola University*, 2014. ProQuest Dissertations & Theses Global.

- Richards, Lawrence O. and Gary J. Bredfeldt. *Creative Bible Teaching*. Chicago, IL: Moody Press, 1998.
- Riggleman, Heather. "What Is the Difference between the Body, Soul, and Spirit?" *Crosswalk*, (2021): Accessed November 6, 2022. https://www.crosswalk.com/faith/spiritual-life/what-is-the-difference-between-the-body-soul-and-spirit.html.
- Ricksecker, Bill. Illustrating Forgiveness: Understanding Biblical Forgiveness and Reconciliation. S.L.: Westbow Press, 2022.
- Rogers, Gabrielle. "The Story of the Carrot, the Egg, and the Coffee Bean." *Growing Leaders*, (2022): Accessed November 6, 2022. https://growingleaders.com/blog/the-story-of-the-carrot-the-egg-and-the-coffee-bean/.
- Rosell, Garth M. Surprising Work of God. Eugene, Or: Wipf & Stock Pub, 2020.
- Rosso, Isabelle, Elizabeth Olson, Gwenievere Birster, Scott Rauch. "Thalamus Volumes and Structural Connectivity are Associated with Trauma Re-Experiencing and Fear Extinction Recall." *Biological Psychiatry* 85, no. 10, Supplement (2019). Accessed November 3, 2023. doi: <u>https://doi.org/10.1016/j.biopsych.2019.03.566</u>.
- Royer, MF, and Wharton C. "Physical Activity Mitigates the Link Between Adverse Childhood Experiences and Depression Among U.S. Adults." *PLoS One*. 2022;17(10): e0275185, Accessed December 4, 2022. doi: 10.1371/journal.pone.0275185. PMID: 36223342; PMCID: PMC9555628.
- Rydelnik, Michael, John Hart, John Jelinek, John M. Koessler, Walter McCord, John McMath, William H. Marty, et al. *The Moody Bible Commentary*. S.I.: Moody Publishers, 2014.
- Schmidt, Karen. "Forgiveness." Journal of Christian Nursing 39, no. 2 (2022): 71–71. Accessed November 3, 2023. doi:10.1097/cnj.00000000000954.
- Schuler, Thomas, M. *Metamorphyx; Embracing Life Experience, Life Change, And Life Purpose*. S.L.: Christian Faith Publishing, 2019.
- Schumann, K. "Apologies as signals for change? Implicit theories of personality and reactions to apologies during the #MeToo movement." PLoS ONE 14, no. 12 (2019). Accessed November 3, 2023. <u>https://doi.org/10.1371/journal.pone.0226047</u>.
- Sensing, Tim. *Qualitative Research: A Multi-Methods Approach to Projects for Doctor of* <u>Ministry Theses</u>. Eugene, OR: Wipf & Stock, 2011.
- Shao, X., Li, A., Chen, C., Loftus, E. F., & Zhu, B. (2023). Cross-stage neural pattern similarity in the hippocampus predicts false memory derived from post-event inaccurate information. *Nature Communications*, 14(1), 2299. Accessed November 3, 2023. doi: 10.1038/s41467-023-38046-y.
- Shewale, Rohit. "Clubhouse Statistics." *DemandSage*, 2023. Accessed October 10, 2023. https://www.demandsage.com/clubhouse-statistics/.

- Siegel, Daniel J., and Chloe Drulis. "An Interpersonal Neurobiology Perspective on the Mind and Mental Health: Personal, Public, and Planetary Well-Being." Annals of General Psychiatry 22, no. 1 (2023): 5. Accessed November 3, 2023. doi:10.1186/s12991-023-00434-5.
- Smetana, Susanne. "Forgiving and Wounding: A Theological Exploration on Forgiveness and Sexual Violence." *Concordia*, PhD diss., Concordia University, 2020. ProQuest Dissertations & Theses Global.
- Smith, Diane. "Using Scripture as Affirmations to Promote Positive Religious Coping, Secure Attachment, and Posttraumatic Growth in Christian Clients in Psychotherapy." PhD diss., Southern Connecticut State University, 2019. ProQuest Dissertations & Theses Global.
- Steinhauer, Jason. "History, Disrupted: How Social Media and the World Wide Web Have Changed the Past." *SpringerLink*. 2021. Accessed November 3, 2023, https://link.springer.com/book/10.1007/978-3-030-85117-0.
- Stanley, Andy. Deep and Wide: Creating Churches Unchurched People Love to Attend, Expanded Edition. Grand Rapids, MI: Zondervan, 2016.
- Starecheski, L. "Take the ace quiz and learn what it does and doesn't mean." *NPR*, 2015. Accessed December 4, 2022, from https://www.npr.org/sections/healthshots/2015/03/02/387007941/take-the-ace-quiz-and-learn-what-it-does-and-doesnt-mean.
- Strong, James, and James Strong. *The New Strong's Expanded Exhaustive Concordance of the Bible*. Nashville, TN: Thomas Nelson, 2010.
- Tapp, Joseph Randall. "Addressing the Impact of Adverse Childhood Experiences of Adults through the Pastoral Counseling Ministry of Victory Church." Scholars Crossing, 2022. Accessed November 3, 2023. https://digitalcommons.liberty.edu/doctoral/4006/.
- Terkeurst, Lysa. "Forgiving What You Can't Forget Study Guide with DVD: Discover How to Move on, Make Peace with... Painful Memories, and Create a Life That's Beautiful." *Amazon*. 2022. Accessed November 3, 2022. https://www.amazon.com/Forgiving-What-Forget-Study-Guide/dp/0310104866.
- Toussaint, L. L., B.J. Griffin, E.L. Worthington Jr., M. Zoelzer, and F. Luskin. "Promoting Forgiveness at a Christian College: A Comparison of the Reach Forgiveness and Forgive for Good Methods." *Journal of Psychology and Theology*, 48(2), (2020): 154–165. Accessed September 13, 2022. https://doi.org/10.1177/0091647120911109.
- Talarico, Joshua Lee. Perceptions of Spiritual Health of Homeless Men Receiving Christian Faith Based Recovery for Substance Abuse Issues. PHD diss., Capital Seminary and Graduate School, Lancaster Bible College,2018ProQuest Dissertations & Theses Global.
- Tapp, Joseph Randall. "Addressing the Impact of Adverse Childhood Experiences of Adults through the Pastoral Counseling Ministry of Victory Church." (2022). Accessed November 3, 2023. <u>https://digitalcommons.liberty.edu/doctoral/4006/</u>
- Tomar, Nidhi. "Subconscious Mind and Health." *Asian Journal of Nursing Education and Research* 12, no. 2 (Apr 2022): 245-6. Accessed November 3, 2023.

https://go.openathens.net/redirector/liberty.edu?url=https://www.proquest.com/scholarly-journals/subconscious-mind-health/docview/2665173557/se-2.

- Ujhelyi Nagy, Anikó, Ildikó Kuritár Szabó, Endre Hann, and Karolina Kósa. "Measuring the Prevalence of Adverse Childhood Experiences by Survey Research Methods." *International Journal of Environmental Research and Public Health* 16, no. 6 (2019): Accessed November 3, 2023.1048. doi:10.3390/ijerph16061048.
- Vahidi Mehrjardi, Shahaboddin. "Factors Leading to Decline in Church Attendance in the Present Age". *Religious Inquiries* 11, no. 2 (2022): 221-231. Accessed November 28, 2023, doi: 10.22034/ri.2022.208383.1374
- Van der Kolk, Bessel. *The Body Keeps the Score: Brain, Mind, and Body in the Healing of Trauma*. San Francisco, CA: IDreamBooks Inc, 2015.
- Vederhus, John-Kåre, Christine Timko, and Siri Håvås Haugland. "Adverse Childhood Experiences and Impact on Quality of Life in Adulthood: Development and Validation of a Short Difficult Childhood Questionnaire in a Large Population-Based Health Survey." *Quality of Life Research* 30, no. 6 (2021): 1769–78. Accessed November 3, 2023. doi:10.1007/s11136-021-02761-0.
- Vincent, Marvin Richardson. Word Studies in the New Testament, Vol. 1. New York: Charles Scribner's Sons, 1887.
- Voineskos, Aristotle N. "Mapping Effects of Childhood Trauma onto Brain Systems and Behavior." *Biological Psychiatry* 88, no. 11 (2020): 810-811. Accessed November 3, 2023. <u>https://doi.org/10.1016/j.biopsych.2020.08.009</u>.
- Wah, Tran John Chuen. *Authentic Forgiveness: A Biblical Approach*. Carlisle, Cumbria, UK: Langham Global Library, 2020.
- Wah, Tran John Chuen. A Strategy for Members at Jachin Church to Identify and Practice Authentic Forgiveness. PhD diss., Fuller Theological Seminary, School of Theology, 2017.Digital Commons.
- Whitney, Eric, Sarah McCue Horwitz, Frank Tedeschi, Ava R. Alexander, Carly Lyn Baetz, Amanda L. Bart, Fei Guo, Jennifer Havens. "Diagnoses and Treatment in Juvenile Detention Before and After Evaluation by Facility-Based Mental Health Service." *Journal of the American Academy of Child & Adolescent Psychiatry* 61, no. 10 (2022): 1203-1205. Accessed November 28, 2023. https://doi.org/10.1016/j.jaac.2022.05.009.
- Weinstein, Edie. "Re-Build Your Brain: An Interview with Dr. Daniel Amen." *PsychCentral*. (2020). Accessed November 28, 2023. <u>https://psychcentral.com/lib/re-build-your-brain-an-interview-with-dr-daniel-amen#1</u>.
- Wolyn, Mark. It Didn't Start with You: How Inherited Family Trauma Shapes Who We Are and How to End the Cycle. S.l.: Vermilion, 2022.
- Wonderly, M. "Forgiving, Committing, and Un-forgiving." *Philo Phenomenal Res*, 104, (2022): 474–488. Accessed September 13, 2022. https://doiorg.ezproxy.liberty.edu/10.1111/phpr.12772.

- Woodruff, Alan. "What Is a Neuron?" Queensland Brain Institute University of Queensland, (2019). Accessed November 6, 2022. https://qbi.uq.edu.au/brain/brain-anatomy/whatneuron.
- Worthington, Everett L., and Nathaniel G. Wade. *Handbook of Forgiveness*. New York, NY: Routledge, 2020.
- Worthington, Everett L., Jr, Sandra Yu Rueger, Edward B. Davis, and Jennifer Wortham. "Mere" Christian Forgiveness: An Ecumenical Christian Conceptualization of Forgiveness through the Lens of Stress-and-Coping Theory." *Religions* 10, no. 1 (2019): 44, Accessed September 14, 2022. https://go.openathens.net/redirector/liberty.edu?url=https://wwwproquest-com.ezproxy.liberty.edu/scholarly-journals/mere-christian-forgivenessecumenical/docview/2326927184/se-2.
- Worthington, Everett L. "The New Science of Forgiveness." *Greater Good* (2020). Accessed November 3, 2023. https://greatergood.berkeley.edu/article/item/the new science of forgiveness.
- Wainryb, Cecilia, Holly Recchia, Olivia Faulconbridge, and Monisha Pasupathi. "To Err Is Human: Forgiveness across Childhood and Adolescence." *Social Development* 29, no. 2 (2019): 509–25. Accessed November 3, 2023. doi:10.1111/sode.12413.
- Yarbrough, R. W. "Forgiveness and Reconciliation." In New Dictionary of Biblical Theology, edited by T. Desmond Alexander and Brian S. Rosner. Electronic edition. Downers Grove, IL: InterVarsity Press, 2000.
- Yi, Z., Wu, D., & Deng, M. (2023). Beliefs about the Nature of Forgiveness and Avoidance of an Offender among Chinese College Students. Behavioral Sciences, 13(9). Accessed November 3, 2023. <u>https://doi.org/10.3390/bs13090747</u>.
- Zivkovic, Ales. "Developmental Trauma and the Bad Object: Attachment, Identity, Reenactments." *Transactional Analysis Journal* 50, no. 3 (2020): 251-265. Accessed November 3, 2023. DOI: 10.1080/03621537.2020.1771033.
- Zhu, Yashuo, et al. "Emotion Regulation of Hippocampus Using Real-Time fMRI Neurofeedback in Healthy Human." *Frontiers in Human Neuroscience* 13, (2019): 242. Accessed September 2, 2022. doi:10.3389/fnhum.2019.00242.
- Zuber, Kevin D. "Leviticus." In *The Moody Bible Commentary*. General Editors, Michael Rydelnik and Michael Vanlaningham. Chicago, IL: Moody, 2014.
- Zuck, Roy B., and John F. Walvoord, "Matthew" *The Bible Knowledge Commentary: New Testament*. Wheaton, IL: Victor Books, 1983.
- Zuck, Roy B., and John F. Walvoord, "Genesis" *The Bible Knowledge Commentary: New Testament*. Wheaton, IL: Victor Books, 1983.

APPENDIX A

THE ACES QUIZ

#1. Did a parent or other adult in the household often or very often... a) Swear at you, insult you, put you down, or humiliate you? or b) Act in a way that made you afraid that you might be physically hurt?

Yes

No

#2. Did a parent or other adult in the household often or very often... a) Push, grab, slap, or throw something at you? or b) Ever hit you so hard that you had marks or were injured?

Yes

No

#3. Did an adult or person at least 5 years older than you ever... a) Touch or fondle you or have you touch their body in a sexual way? or b) Attempt or actually have oral, anal, or vaginal intercourse with you?

Yes

No

#4. Did you often or very often feel that ... a) No one in your family loved you or thought you were important or special? or b) Your family didn't look out for each other, feel close to each other, or support each other?

Yes

No

#5. Did you often or very often feel that ... a) You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you? or b) Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?

Yes

No

#6. Were your parents ever separated or divorced?

Yes

No

#7. Was your parent/caregiver: a) Often or very often pushed, grabbed, slapped, or had something thrown at her? or b) Sometimes, often, or very often kicked, bitten, hit with a fist, or

hit with something hard? or c) Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?

Yes

No

#8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?

Yes

No

#9. Was a household member depressed or mentally ill, or did a household member attempt suicide?

Yes

No

#10. Did a household member go to prison?

Yes

No

APPENDIX B

Phase 2 Screening Survey

Screening Survey	Screening S
Please rate your overall childhood experiences.	How often do you think of childhood experiences?
1 2 3 4 5	1 2 3
Disappointing Exceptional	Not at all
Please rate how your childhood affects you in your adulthood.	Please rate the forgiveness who hurt you in your child
[•] 1 [•] 2 [•] 3 [•] 4 [•] 5	1 2 3
Not at all Frequently	Completely
Do you consider yourself <u>mostly</u>	Do you view other individ
Happy person? "Y	Trustworthy?
Forgiving? "Y	Forgiving?
Easily to get along with? "Y	Dependable?
Please rate the quality of the relationship with your mother.	Please rate how satisfied y you are in life.
1 2 3 4 5	1 2 3
Disappointing Exceptional	Disappointing
Please rate the quality of the relationship with your father.	Please rate your overall ph
"1 "2 "3 "4 "5	[•] 1 [•] 2 [•] 3
Disappointing Exceptional	Disappointing
Disappointing	Please rate your overall en
Please rate the quality of the relationship with your family overall.	1 2 3
"1"2"3"4"5	Disappointing
Disappointing Exceptional	Please rate your overall sp
Please rate your overall relationship with	1 2 3
your significant others.	Disappointing
1 2 3 4 5	Please select your ethnicity
Disappointing Exceptional	" American
Which age bracket do you fall in?	" Hispanic
miner age orachet do you fait in:	mopune

Screening Survey					
low often o hildhood e			negati	ve	_
		3	4	5	
ot at all				Frequently	y
lease rate t ho hurt yo				d to those	_
-	-	3		 5	
ompletely				Not at a	11
o you viev	w other	individ	uals <u>m</u>	<u>ostly</u>	_
rustworthy	/?				Y
orgiving?					Y
ependable	?				Y
lease rate l ou are in li		isfied y	ou are	with where	
1	2	<i></i> 3	4	5	
isappointi	ng			Exceptiona	ıl
lease rate y	your ov	erall ph	ysical	health.	_
1	2	3	4	5	
isappointi	ng			Exceptiona	ıl
lease rate y	your ov	erall en	notiona	l health	
1	2	3	4	5	
isappointi	ng			Exceptiona	ıl
lease rate y	your ov	erall sp	iritual l	nealth.	
1	2	3	4	5	
oisappointi	ng			Exceptiona	ıl
lease selec	t your o	ethnicit	у.		_
American			" Afro	o-American	l
Hispanic			" As	ian "	

APPENDIX C

CONSENT FORM

Consent

Title of the Project: Forgiving Childhood Hurt Biblically **Principal Investigator:** Latisha Shearer, a student at Liberty University. Doctoral Candidate, School of Divinity, Liberty University

Invitation to be Part of a Research Study

You are invited to participate in a research study. To participate, you must be 19 years of age, can answer yes to one of the ten questions of the ACE survey, and must believe in God. Taking part in this research project is voluntary.

Please read this entire form and ask questions before deciding whether to participate in this research.

What is the study about, and why is it being done?

The purpose of the study is to implement biblical forgiveness for childhood trauma, resulting in physical, mental, and emotional healing. The purpose is to teach one to love God and others deeper and begin to love and identify themselves in one's authentic and unique identity in Christ.

What will happen if you take part in this study?

If you agree to be in this study, I will ask you to do the following:

- 1. If selected as a candidate, the researcher will continue to Phase 2 of the survey questions. This requires a virtual recorded interview requiring, at most, one hour. A scheduling link will be sent for you to schedule a convenient time for being interviewed. Due to the hearing impairment of the researcher, the interviews are recorded for accuracy allowing the researcher to ensure your response was heard and documented correctly. The video is strictly for research purposes and will not be distributed.
- 2. You will be given homework questions and applications to apply biblical forgiveness for the 8-week study, starting with week one. The researcher will evaluate your emotions towards the traumatic event each week, the person(s) connected with the experiences, and yourself. Follow-up questions may be asked to gain clarity and understanding.
- 3. To maintain a personal journal.
- 4. You will be asked to schedule another interview within a week at the end of each appointment.
- 5. The final week and outtake survey will be given for you to assess what improvements or lack thereof were made towards the specific traumatic event biblical forgiveness was applied towards.

How could you or others benefit from this study?

The direct benefits participants should expect to receive from taking part in this study include teaching how to apply biblical forgiveness in their life, daily releasing, forgiving, and renewing their minds to think about things that are true, noble, right, pure, loving, admirable, excellent, or praiseworthy rather than negative thoughts.

Benefits to society include teaching others of all ages how to apply the practices and preventing a cycle of emotional and physical trauma in generations to come. It will create better work environments and family relationships.

What risks might you experience from being in this study?

The expected risks from participating in this study are minimal, which means they are equal to the risks you would encounter in everyday life. The risks involved in this study include the possibility of psychological stress from being asked to recall and discuss prior trauma. To reduce risk, I will give steps to help process and work through the psychological stress associated with the trauma. It is essential that you follow these steps and be open and honest with me as well as yourself throughout the study. As a licensed Christian Mental Health Coach and Counselor, I can help you process your emotions. We will confront emotions and challenge negative thoughts throughout the process, but we can only heal what you are willing to confront. I will monitor your mental ability to continue through the study, discontinue the interview, administer psychological care, and provide referral information for counseling services if needed.

I am a mandatory reporter. During this study, if I receive information about child abuse, child neglect, elder abuse, or intent to harm self or others, I will be required to report it to the appropriate authorities.

How will personal information be protected?

The records of this study will be kept private. Published reports will not include any information that will make it possible to identify a subject. Research records will be stored securely, and only the researcher will have access to the records.

- Participant responses will be kept confidential by replacing names with pseudonyms.
- Interviews will be conducted in a location where others will not easily overhear the conversation.
- Data collected from you may be used in future research studies and shared with other researchers. If data collected from you is reused or shared, any information that could identify you, if applicable, will be removed beforehand.
- Data will be stored on a password-locked computer. After seven years, all electronic records will be deleted.
- Recordings will be stored on a password-locked computer for seven years and then deleted. The researcher and members of her doctoral committee will have access to these recordings.

Is study participation voluntary?

Participation in this study is voluntary. Your decision on whether to participate will not affect your current or future relations with Liberty University. If you decide to participate, you are free to not answer any question or withdraw at any time without affecting those relationships.

What should you do if you decide to withdraw from the study?

If you choose to withdraw from the study, please contact the researcher at the email address/phone number included in the next paragraph. Should you choose to withdraw, data collected from you will be destroyed immediately and will not be included in this study.

Whom do you contact if you have questions or concerns about the study?

The researcher conducting this study is Latisha Shearer. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact her at **Section 1**. You may also contact the researcher's faculty sponsor, Dr. Mark Plaza, at

Whom do you contact if you have questions about your rights as a research participant?

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher, **you are encouraged** to contact the IRB. Our physical address is Institutional Review Board, 1971 University Blvd., Green Hall Ste. 2845, Lynchburg, VA, 24515; our phone number is 434-592-5530, and our email address is <u>irb@liberty.edu</u>.

Disclaimer: The Institutional Review Board (IRB) is tasked with ensuring that human subjects research will be conducted in an ethical manner as defined and required by federal regulations. The topics covered and viewpoints expressed or alluded to by student and faculty researchers are those of the researchers and do not necessarily reflect the official policies or positions of Liberty University.

Your Consent

By signing this document, you agree to be in this study. Make sure you understand what the study is about before you sign. You will be given a copy of this document for your records. The researcher will keep a copy with the study records. If you have any questions about the study after you sign this document, you can contact the study team using the information provided above.

I have read and understood the above information. I have asked questions and have received answers. I consent to participate in the study.

The researcher has my permission to video-record me as part of my participation in this study.

Printed Subject Name

Signature & Date

APPENDIX D

INTERVENTION DESIGN

Corresponding Week Intervention Plan/Task

Week One	Virtual interviews will be conducted one-on-one with participants
week one	virtual interviews will be conducted one-on-one with participants
	and the researcher on their adverse childhood experiences.
	Verbal Discussion: How have negative experiences of childhood
	impacted your adulthood? Discuss participant's ACEs Survey.
	Homework: Which experience one experience do you wish to
	work through during the research? Why?
Week Two	Virtual interviews will be conducted one-on-one with participants
	and the researcher discussing individual homework.
	Verbal Discussion: What perceptions or beliefs have you formed
	about yourself, others, or events, due to the adverse childhood
	experience you selected to work on? Discuss participant's ACEs
	Survey.
	Homework: Make a detailed list of all the negative perceptions
	you feel about yourself potentially related to the ACE in one
	column. In the second column, write the opposite of the negative
	perception. Example: Column 1: I am unworthy of unconditional
	love. Column 2: I am worthy of being loved unconditionally.

Week Three	Virtual interviews will be conducted one-on-one with participants and the researcher discussing individual homework. Verbal Discussion: Defining biblical forgiveness. Discuss the importance of forgiving the action and the person. A detailed explanation of homework assignments. Discuss biblical forgiveness. Homework: Application of forgiveness and letting go of negative emotions listed in Week Two homework. Example 1: Tameika made me feel unworthy of unconditional love when she repeatedly beat me for mistakes made in my childhood. Today, I forgive Tameika for making me feel unworthy of unconditional love and no longer hold it against Tameika. Example 2: I forgive Tameika for repeatedly beating me as a child. I no longer desire to hold these actions against her and give them to God. (Repeat verbally or silently as often as needed) Be mindful of which
	emotions or experiences are more challenging to forgive.
Week Four	Virtual interviews will be conducted one-on-one with participants and the researcher discussing individual homework. Verbal Discussion: Being mindful of one's verbal and non-verbal words communicated. Discuss biblical forgiveness.

	Homework: Take accountability or inventory of one's negative
	thoughts or "I am" statements verbally released through daily
	journal writing for seven days.
Week Five	Virtual interviews will be conducted one-on-one with participants
	and the researcher discussing individual homework.
	Verbal Discussion: Renew the mind to think positively and speak
	positive affirmations instead of releasing negative words. Discuss
	applying forgiveness.
	Homework: Make a list of at least ten positive affirmations
	opposite of the negative thoughts or "I am" statements spoken in
	Week Four. Set the alarm and speak or write the positive
	affirmation three times daily. Continue to journal, taking an
	inventory of your thoughts. Continue forgiveness statements in
	problematic areas.
Week Six	Virtual interviews will be conducted one-on-one with participants
	and the researcher discussing individual homework.
	Verbal Discussion: Discover pattern interruptions suitable for
	participants when faced with a problematic area of forgiveness
	and negative thoughts. Discuss applying forgiveness.
	Homework: Continue to work on homework given in week five.

Week Seven	Virtual interviews will be conducted one-on-one with participants and the researcher discussing individual homework. Verbal Discussion: Adjusting individual pattern interruptions as needed for participants when faced with a problematic area of forgiveness and negative thoughts. Discuss participant's willingness to forgive. Homework: Continue to work on homework given in week five.
Week Eight	The final virtual interview will be conducted with participants to assess changes in mindset towards the adverse childhood experience, others, and individuals after three weeks of speaking positively. The participant will also identify any additional physical, emotional, or spiritual changes in their health they may have noticed. Participants will be provided a suggestion of an individual plan to renew their minds.

APPENDIX E

IRB APPROVAL LETTER

LIBERTY UNIVERSITY. INSTITUTIONAL REVIEW BOARD

February 23, 2023

Latisha Shearer Mark Plaza

Re: IRB Application - IRB-FY22-23-999 Forgiving Childhood Hurt Biblically

Dear Latisha Shearer and Mark Plaza,

The Liberty University Institutional Review Board (IRB) has reviewed your application in accordance with the Office for Human Research Protections (OHRP) and Food and Drug Administration (FDA) regulations and finds that your study does not meet the definition of human subjects research. This means you may begin your project with the data safeguarding methods mentioned in your IRB application.

Decision: No Human Subjects Research

Explanation: Your project is not considered human subjects research because it will consist of quality improvement activities, which are not "designed to develop or contribute to generalizable knowledge" according to 45 CFR 46. 102(l).

Please note that this decision only applies to your current application. Any modifications to your protocol must be reported to the Liberty University IRB for verification of continued non-human subjects research status. You may report these changes by completing a modification submission through your Cayuse IRB account.

Also, although you are welcome to use our recruitment and consent templates, you are not required to do so. **If you choose to use our documents, please replace the word** *research* with the word *project* throughout both documents.

If you have any questions about this determination or need assistance in determining whether possible modifications to your protocol would change your application's status,

please email us at irb@liberty.edu.

Sincerely,

G. Michele Baker, MA, CIP *Administrative Chair of Institutional Research* **Research Ethics Office**