Trauma, trigger warnings, and making a little space

By <u>E. Carrington Heath</u> August 28, 2016

During the earliest years of my ministry I served as a hospital chaplain, shepherding both religious and non-religious patients and families through the worst days of their lives. I quickly specialized in trauma, mostly because others didn't want to, and so often found myself in emergency rooms and trauma ICUs. Over the next few years I spent my time responding to traumatic incidents mostly involving children and adolescents, but also adults of all ages.

When a patient was brought to our hospital after a traumatic event or accident, the doctors would be the first to meet with the family. They would explain what had happened, and the treatment the patient had received. My job was to listen quietly and then take the family to see the patient.

By the time I did so, I had already seen the patient myself. I had made note of the injuries, the medical equipment, and anything else that might stand out to the family. By the time the doctors left the room, and I began my work, I had prepared for a type of grim ritual that trauma chaplains were advised to follow with families.

Speaking calmly, I would explain again what had happened to their loved one. I would then tell the family that their loved one might look differently from when they had last seen them. I'd explain about the medical equipment that was connected to their bodies. If there were obvious signs of trauma, I would describe what they would see in a controlled and accurate manner. I would ask if they needed time before going into the loved one's room.

One day I sat with a mother of a son who had been shot in the streets of East Nashville. We had just heard doctors explain that he would not make a recovery, and would likely die within hours. The doctor also told me that the bleeding could not be completely stopped. I prepared the mother for this as best I could. That night, after he had died, I went home and took off my white shirt, now speckled with his blood. It was traumatic for me; I can't imagine what it was like for his mother. This ritual was of course easier if it was played out in an ICU, and if the patient survived. But sometimes I would find myself preparing families for a visit to a lonely basement morgue, and the horrible scene of an often unrecognizable body on a cold steel table.

Always queasy around blood, I somehow learned to describe the geography of broken bodies. This was essential for families facing trauma. Already at risk for developing post-traumatic stress disorder, experts told us that failing to adequately prepare parents and spouses and siblings for the first sight of their loved one could greatly increase the odds of longterm trauma. My job was to help make the unthinkable just a little less devastating.

I never thought about what I did as a kind of trigger warning. I thought about it as being compassionate but also proactive. My work was to help a family get through the unimaginable.

But this week, when the University of Chicago sent a self-congratulatory letter to the incoming freshmen warning that "trigger warnings" and "safe-spaces" were not to be found at their school, I thought back to my days of trauma chaplaincy.

Trauma rarely is visible on the body. Even the scars and broken bones of physical trauma often heal to the point of being unnoticeable. But, visible to the other or not, it is still contained within the person who has suffered it.

Conventional wisdom says that trigger warnings are making our youth and young adults soft. They're creating ways for them to get out of having hard, deep, and rigorous intellectual debates. At worst, they are enabling a generation of nonresilient citizens who will be unable to sustain democracy.

But that's not what trigger warnings are about. They're not "get out of hard conversations free" cards. Rather, they are conscious ways of telling the people involved in a conversation what they are about to see and hear. It's not so unlike what I used to do with families going to see a loved one's body.

These days I am no longer a trauma chaplain. In the eight years I spent as a chaplain I saw enough people, especially children, die traumatically that I never want to see another. I left the field reluctantly, but with the feeling that I had served my time faithfully and now was being called elsewhere. I now pastor a church in a wonderful community where violence is rare, and the quality of life is just about as good as it gets. I especially love working with the children and youth of my congregation, who are all incredible. But I'm not naive enough to think that some of them don't also carry trauma or are not now in some sort of serious crisis.

I like to be aware of those things so that I can be a better pastor and teacher to them. If we are talking about something in youth group, for instance, I want them to know about it ahead of time if it's something that might be uncomfortable. It's not because I want to shield them from hard conversations or the real world. It's because I want to walk with them in their journey, side by side, giving them support.

It's the same in college classrooms. Is it really so hard for a college professor to say "next week we will be talking about sexual assault" to a group of students where invariably at least one has been assaulted? Or, to say "we will be exploring the War on Terror next session, including a video of an Army unit engaged in active combat" when they just might have a veteran who deployed to Iraq or Afghanistan in the room?

This isn't about stopping hard conversations. This is about making the room big enough that everyone can be involved in the conversation. This often means making the room big enough so that the people most directly impacted by any given topic can be there too. Their voices are in many ways the most critical to have in the room.

Like anything this can be abused by those who don't want to have the hard conversations, but I've often found that the ones who have truly been impacted by trauma are the ones *most* willing to have the conversations. They just deserve the courtesy of a heads-up and the time to think about how they will best protect themselves from being re-traumatized in the process. Allowing people the space to be able to do this work of self-care is far from enabling them. On the contrary, it's allowing them to take responsibility for their own recovery.

We worry that we are building a generation of non-resilient young people. I say just the opposite is happening. The people who need trigger warnings are not soft; on the contrary, they are probably the most resilient among us. By listening to their voices, and hearing their experiences, we can learn from them. But that will only happen if we deliberately make space for them. Originally posted at <u>Heath's blog</u>