
Pastoral Ministry with Individuals Experiencing the Trauma of Homelessness

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The neighborhood of Rosslyn in Arlington, Virginia, lies just across the Key Bridge from Georgetown in Washington, D.C. Once known for its pawn shops and used car dealerships, Rosslyn is now a revitalized urban area, home to the State Department, Nestlé world headquarters, and an increasing number of apartments and condos. Its residents include diplomats, graduate students, and young professionals, as well as retirees seeking to enjoy the amenities of the city from close by.

Rosslyn is also home to a small but significant number of individuals experiencing homelessness. A point-in-time survey in January 2021 identified 171 people experiencing homelessness in Arlington County (a jurisdiction of about 25 square miles). Of those individuals, thirty-five were identified as chronically homeless,¹ defined as having been homeless continually for one year or on four or more occasions in the past three years.² Rosslyn serves as an unofficial home base for many of the county's chronically homeless residents, due largely to its proximity to the city. It is common for people experiencing homelessness in Washington to seek shelter and help in Rosslyn, because it is perceived as both safer and a more resource-rich area. Often people will move back and forth between Washington and Rosslyn (or elsewhere in Arlington) as needed to access resources, seek shelter, and/or panhandle.

Arlington Temple United Methodist Church, where I served as pastor from 2013-2022, stands in the heart of Rosslyn. Travelers commuting across the Key Bridge are greeted by the church's 70s-style steeple rising above the local Sunoco station. As the only church building in the neighborhood, it is a natural gathering place

1. "Arlington Continuum of Care (CoC) 2021 Point in Time (PIT) Count Snapshot." <https://www.arlingtonva.us/files/sharedassets/public/public-assistance/Documents/PIT-Snapshot-2021-FINAL-2.pdf>. Accessed January 25, 2023.

2. "The McKinney-Vento Homeless Assistance Act, as amended by S. 896 The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009." Section 104(2)(A). https://www.hud.gov/sites/documents/HAAA_HEARTH.PDF. Accessed March 28, 2023.

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for members of the local homeless community. During my nine years at Arlington Temple, I grew to know many of the people who slept in the covered area outside the church doors, came to meet with the county outreach worker who worked in our building, or stopped by our fellowship hall during the day for a cup of coffee or a can of soup. The church administrator and I often referred to this group of people as our "weekday congregation," those with whom we were most closely in ministry Monday through Friday (and sometimes, though less often, also on Sunday).

Through my encounters with these individuals from our weekday congregation, I learned the stories of where they came from and what brought them to Arlington: stories of homes and families elsewhere, struggles with mental health and substance abuse issues, jobs lost and found and lost again, and other stories of past traumas. Similarly, I heard stories of life on the streets in Rosslyn and nearby: conflict with neighbors, money and transportation needs, methods for surviving cold weather, faith in God's provision, and frustration with the systems that were supposed to help.

Arlington Temple was not the first place I encountered people experiencing homelessness. During my time in seminary, I interned at two different women's shelters. In my first pastoral appointment, in Williamsburg, Virginia, I often engaged the local homeless population by issuing checks from the church's financial

assistance to help with extended stays at cheap motels. At Arlington Temple, however, I got to know people over the course of years. I prayed with them, bought them Metro cards and sleeping bags, visited them in jail, blessed their new apartments when their time on the waiting list was finally up, and, on occasion, commended them to God in Sunday worship when they died in the hospital or in the woods by the Potomac River. Little by little, I learned about their lives, and I gained a sense of the trauma that often led to their experience of homelessness, and the trauma that continued in and even beyond that experience. I wrestled with questions of how to be a pastor to this weekday congregation and came up with answers that often seemed provisional and inadequate. Still, we—the church administrator, a handful of volunteers present during the week, and I—sought to welcome people who didn't always find a welcome elsewhere, and to treat them as worthy and beloved.

In the following pages I share some of the stories of the people I got to know, with names and identifying details changed to protect their privacy, with the goal of highlighting the role of trauma in the experiences of these individuals. I look first at how trauma was present in the stories of three weekday congregants leading to their experiences of homelessness, and then how trauma was present in the story of one congregant during and even after her experience of homelessness. After each section, I raise questions about how best to be in ministry with individuals who have experienced trauma in these ways, and I conclude with reflections on best practices and the theology that came to form my ministry over time.

Stories: Trauma leading to homelessness

A great deal of scholarly research has established a clear link between homelessness and past trauma. According to the *Encyclopedia of Trauma*, “The lines of evidence are clear: Homeless persons report high levels of exposure to violence and trauma before the onset of their homelessness.” This trauma may include such experiences as childhood abuse, sexual assault, and witnessing or participating in violence (military or otherwise).³

I found this to be true for many, if not most, of the chronically homeless individuals I encountered in Rosslyn. As I listened to the stories, complaints, and prayer requests shared by members of our weekday congregation, it was clear to me that most of them carried trauma from past experiences. However, even when I had known a person for years, it was rare that I would know any specifics about the traumatic event(s) in question. This lack of clarity was sometimes on my part but also was sometimes because the storytellers themselves withheld those details; people living on the streets could be guarded due to concerns for privacy or safety. More often, though, it wasn't an issue of reticence. Many people shared their stories openly; I was simply not always able to piece together the parts of the stories I heard into a narrative that was coherent for me.

3. Cary L. Mitchell, “Trauma and Homelessness,” in *Encyclopedia of Trauma: An Interdisciplinary Guide*, ed. Charles R. Figley (Thousand Oaks: Sage, 2012).

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In the words of theologian Serene Jones, “When we are overwhelmed, what fails us most profoundly is our capacity to use language, to make sounds that communicate meaning from one person to another.”⁴ Perhaps that was why I had such a hard time making meaning of the stories I heard bit by bit over the course of months or years. Rich, for example, was a man I met early on in my time at Arlington Temple. He slept outside the church at night and spent most of his time inside the church building during the day, either in the fellowship hall or chatting in the church office with me or our church administrator. When Rich stopped by my office to talk, he sometimes alluded to an experience of assault—perhaps a series of assaults—in his past. The stories came in bits and pieces, but I gathered that this assault had been a major factor in his leaving his hometown in Tennessee. Rich occasionally also spoke of being persecuted for his Jewish heritage. He would often warn me to be careful of certain people—usually other weekday congregation regulars or county outreach workers. This theme of danger and persecution grew more and more pronounced during the time that Rich was part of our church community, and his warnings started to sound to me less and less like well-intentioned advice and more and more like farfetched conspiracy theories. I do not know if Rich ever received an official mental health diagnosis. I only knew what I could piece together: that there seemed to be some traumatic event in Rich's past that led him to view the world and those around him with almost constant fear and suspicion.

Trauma scholars Ronnie Janoff-Bulman and Irene Hanson Frieze assert that trauma victims, having experienced a “malevo-

4. Serene Jones, *Trauma and Grace: Theology in a Ruptured World*, 2nd ed. (Louisville: Westminster John Knox Press, 2009), 29.

Lawrence never stayed in one place for long because, per his own reports, certain people who were out to get him would always find him to harass and threaten him. The people who were after Lawrence were always figures from his past, now newly disguised as his landlord, neighbors, or other people he encountered in daily life.

lent world,” “no longer perceive themselves as safe and secure in a benign environment.”⁵ While I have never been qualified to assess individuals psychologically, this reality of the fear in which many of our weekday congregation members went through everyday life was something I became more attuned to over time. Lawrence was another man whose story was similar in some way to Rich’s. Unlike Rich, Lawrence was not unhoused the whole time I knew him. Instead, he moved from one apartment to another, living in his car in between. Lawrence never stayed in one place for long because, per his own reports, certain people who were out to get him would always find him to harass and threaten him. The people who were after Lawrence were always figures from his past, now newly disguised as his landlord, neighbors, or other people he encountered in daily life. As I understood things, Lawrence had spent time in jail and been the victim of rape and violent assault, and it seemed to me that this trauma—perhaps along with others—shaped his perception of the world such that these experiences became ongoing and present realities. I often found myself wondering what had “really” happened to Lawrence: how I would have told or understood his story if I had been an onlooker to the whole thing. I also knew that that “real” history, if it existed, was impossible to unearth. Recalling Serene Jones’s words about the failure of language, did language fail for Lawrence? And if so, did it fail for him in making meaning for himself out of his traumatic experiences, or just in communicating that meaning to me?

A woman named Vanessa, unlike Rich and Lawrence, didn’t turn her fear and suspicion toward people. Vanessa had come to Arlington from West Virginia, where she had escaped a relationship that was verbally if not physically abusive. Vanessa had an innocent quality to her and was trusting of people, sometimes more so than was warranted. But Vanessa continued to wrestle with her demons—literally. She remained in Arlington long enough

to receive housing through the county, and soon thereafter, she came to me reporting that her apartment was possessed by evil spirits and asking me to perform an exorcism. Exorcism is not a common practice in my mainline United Methodist/Protestant tradition, but I did pray for Vanessa to be released from the evil spirits that held her captive. The experience, real or perceived, of being persecuted by evil powers was another one I commonly encountered in Rosslyn. Individuals’ religious backgrounds often gave them a framework for experiencing their trauma as a spiritual or metaphysical problem, rather than a social or institutional one. Sometimes it could be both: Lawrence, for example, could speak of Satan being at work behind a social worker who didn’t help him in the ways he hoped for. While the details of past traumatic events in the lives of our weekday congregation members were rarely clear, the presence of trauma that affected perceptions of current reality was.

My pastoral relationships with Rich, Lawrence, Vanessa, and others raised questions for me that were both spiritual and ethical. Chief among them was what to do with these narratives that I found incoherent, or that came across to me as more paranoia than plausible truth. How much did the “truth” matter for my understanding of these individuals and their histories, and how did my answer to that question affect my ministry with them? I return to this question at the end, after reflecting on other ways that trauma showed up in the stories and experiences of Rosslyn’s homeless community.

Stories: Trauma resulting from homelessness

Even more than I heard stories of past events in the lives of our weekday congregation, I heard stories of their present experiences of homelessness. While Rosslyn may have been perceived as a safer and more resource-rich place than nearby Washington, D.C., homelessness in Arlington still had its challenges. A person was required to be an Arlington resident for 30 days before accessing services through the county or the local homelessness organization. That meant that those who made their way across the bridge were destined for at least a month on the streets before they could make use of the county shelter up the street or get on waiting lists for housing and other programs. (Exceptions were made for freezing weather.) Many of the people I knew had their own objections to shelter-life, including the strict rules, curfew, and other residents with whom they had conflict. But life on the streets, while less confined than shelter life, was hard and could be scary. Beyond the discomfort or danger of heat and cold, there were other challenges to contend with: a lack of basic amenities like bathrooms during the night when businesses were closed; the possibility that possessions would be stolen while a person slept; fear of police and of others in the homeless community.

Studies show that the link between trauma and homelessness is multi-directional. While traumatic events are often present in the histories of those experiencing homelessness, and may be contributing factors to that experience, the experience of homelessness itself may be a source of trauma. Psychologist Lisa Goodman and

5. Ronnie Janoff-Bulman and Irene Hanson Frieze, “A Theoretical Perspective for Understanding Reactions to Victimization,” *Journal of Social Issues* 39, 2 (1983): 5.

Trauma theory may inform our understanding of the experience of homelessness in at least three ways: the event of becoming homeless may produce symptoms of trauma; the ongoing experience of homelessness with its “attendant stressors... the possible loss of safety, predictability, and control” may produce trauma; and finally, the experience of homelessness may exacerbate trauma symptoms for those with “histories of victimization.”

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This tri-fold reality was also borne out in the stories I heard from those experiencing homelessness in and around Rosslyn. Though many of the people I knew had experienced clearly traumatic events in their past, not everyone had. Linda was one such member of our community whose “journey of homelessness,” as she called it, began in a seemingly more mundane way. Linda was an older woman who had worked most of her life at low-wage administrative jobs. After the death of her longtime partner (traumatic in itself, to some degree, no doubt, but not due to violence or assault) she could no longer afford the apartment they shared and found herself with no place to go. For several years, she spent the bulk of her days at the church, and at night she went to the airport, one of the only nearby places where a person could anonymously spend the night inside.

When I first met her, Linda did not present with (what I perceived to be) outward signs of mental illness the way many of the church’s neighbors did. She held coherent conversations about her life, her family, and world events. Linda was able and willing to comply with the county’s process for receiving aid and was eventually rehoused. Whether or not trauma was a factor leading to Linda’s homelessness, though, the experience of homelessness

itself was traumatic for her. She spent about three years waiting for a subsidized apartment to become available, living in the uncertainty of whether she would ever be safe in her own home again. She consistently expressed exhaustion and frustration with the long wait. Each week in Sunday worship she submitted a prayer request card, marked for the pastor only, asking for continued prayer on her journey of homelessness.

The extent of Linda’s trauma became truly clear only after her ordeal was over. After her three-year wait, a subsidized apartment became available in a new building just blocks from the church. I visited and blessed her new apartment when she finally moved in. Despite that celebration, Linda lived in fear of losing her apartment from then on, especially when the time came for the county to reassess her monthly contribution. Three years of a lack of good sleep, insecurity, fear, and waiting had taken their toll. Having lived so long in uncertainty, it seemed she was unable to enjoy the security she had longed for.

It was after she was housed that Linda’s physical health began to visibly decline. She began to have breathing problems, making the three-block walk from her apartment to church difficult. She then had a minor heart attack. As time went on, our administrator and I began to have concerns about Linda’s mental state as well. Linda’s relationship with our church culminated in a complaint that people were talking behind her back—an accusation I never found evidence to support. A year or so later, I learned of her death from cancer. It was only at her funeral that I realized that her family had not known she had been homeless. In the midst of everything else, she bore the weight of that secret.

It is impossible, of course, to separate all the strands in Linda’s story to discern what role trauma might have played in her final years. Trauma didn’t cause her cancer, and it is only a guess that it may have played a role in her worsening physical health. I do not know for sure whether trauma was a factor in her seemingly worsening mental health, or whether that was a function of her physical decline, or neither. I also don’t know whether there may have been mental health factors or trauma unknown to us that led in part to Linda’s experience of homelessness in the first place. I can only suspect that the trauma of homelessness continued to play a role in Linda’s life and well-being even after the experience of homelessness itself was over.

Linda was also far from the only person who seemed to decline in both mental and physical health over the time I knew her. Rich’s conspiracy theories seemed to grow and expand, as did his

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6. Lisa Goodman, et al., “Homelessness as Psychological Trauma: Broadening Perspectives,” *American Psychologist* 40, 11 (November 1991): 1219.

If the job of a pastor is to receive people's stories and help point the way to God and redemption in those stories, I couldn't point to redemption by trying to parse out details and fit them together. While I may have had doubts about the "objective" truth of parts of the stories I heard, I would do no good by fighting about an objective reality which, if it could be said to exist, would probably always elude me.

temper—which eventually led to the end of his relationship with the church. Rich's physical health was also clearly deteriorating during that time, as evidenced in part by his lessening ability to walk longer distances. How were trauma, physical health, and mental health related for Rich? Again, I don't know, but can only surmise that the trauma of living on the streets contributed to both physical and mental unwellness. However our neighbors got to the streets in the first place, the streets took their toll.

Once again, these pastoral relationships raised important questions for me. How could I best be in ministry with people suffering the ongoing trauma of homelessness and its continuing effects? What could I give them that they needed when I couldn't solve their problems and didn't always understand the roots of those problems? And how should I navigate the changing of relationships as trauma took its toll on the physical and mental health of these members of our weekday congregation? While I never arrived at definite answers, nine years in ministry in Rosslyn did give me the opportunity for ongoing reflection on these questions, and I explore some of the answers I came to below.

Pastoral ministry with those experiencing the trauma of homelessness

One of the most important questions I wrestled with as I interacted with people such as Rich, Lawrence, Vanessa, and Linda was how best to be in ministry with people whose stories and experiences I did not understand. Not only did the stories often come to me in bits and pieces that didn't always seem to fit together, but I also had reason to question the versions of reality they portrayed, as with Lawrence's assertions that people from his daily life were old enemies in disguise. I constantly faced the desire, or perhaps temptation, to rearrange the pieces of the stories they told me or accusations they cast to figure out what "really" happened, and why they viewed the world the way they did. Perhaps this was my own

need for a clean and compelling narrative at work as much as it was my desire to respond to their various situations appropriately. Yet, when trauma is involved, and language fails to capture and communicate meaning the way it used to, there are arguably no clean narratives. This loss of coherence leading to what Kimberly Wagner terms "narrative fracture"⁷ is part of the reality of those experiencing both the trauma of homelessness and, perhaps, the trauma that led them there.

Over time, I came to try to resist the temptation to reconstruct clean narratives for the people with whom I was in ministry. If the job of a pastor (or one of them, at least) is to receive people's stories and help point the way to God and redemption in those stories, I couldn't point to redemption by trying to parse out details and fit them together. While I may have had doubts about the "objective" truth of parts of the stories I heard, I would do no good by fighting about an objective reality which, if it could be said to exist, would probably always elude me. For one thing, my knowledge of each person's situation was limited; for another, it was after all their own narrative—fractured as it might have been—that shaped their understanding of their past and experience of day-to-day life. What I could do, then, was do my best to listen to those who congregated on our porch and in our fellowship hall, and to take them seriously as people who bore the image of God in the midst of their trauma and all its ongoing effects.

I did struggle sometimes to find ways to respond that afforded people the care and dignity they sought without totally entering into the narrative presented in a way that felt inauthentic for me. Could I take seriously Lawrence's belief that his landlord was his old enemy, for example, without affirming that I also believed that to be the case? When Rich cautioned me to be wary of other members of our weekday congregation, how could I take his concern seriously without joining in the creation of a potentially unfair image of others? How should I respond to Vanessa's request for an exorcism when that type of spiritual warfare wasn't part of my own religious narrative or tradition? These were lines I learned to walk. If I quickly discovered that fighting about the facts of a situation was useless, I also discovered along the way that pretending to adopt a reality that wasn't mine in order to connect with someone

7. Kimberly R. Wagner, *Fractured Ground: Preaching in the Wake of Mass Trauma* (Louisville: Westminster John Knox, 2023), 21.

Recognizing the presence of trauma allowed me to put aside my own need for clean narrative as a way of understanding a person, and to listen for and respond to the pain that was present instead.

could come across as patronizing. Instead, I learned to—or at least I tried to—receive the fear and anger expressed while neither affirming nor contesting the facts of the narrative.

While I may not have had a clear idea of everything that happened in the pasts or the present of those whom I pastored, an understanding that their stories and experiences had been shaped by trauma did help me to respond with compassion to worldviews that sometimes seemed foreign to me. Recognizing the presence of trauma allowed me to put aside my own need for clean narrative as a way of understanding a person, and to listen for and respond to the pain that was present instead. It wasn't a perfect system—as I wrote above, my (and the church's) relationships with several members of our weekday congregation deteriorated over time as our perceptions of reality diverged in ways that affected our lives together. Still, if my role as pastor was to point to redemption in people's stories, I could do that by receiving those stories with care and dignity, along with the traumatized people who told them.

Was it enough? I had to contend, also, with my own inability, and that of the church, to make things tangibly better for the people we encountered. I could listen, but I was neither qualified nor equipped to address, materially or psychologically, all the complicated factors involved in our neighbors' experiences of homelessness, trauma, and mental illness. Where possible, the congregation as a whole did its best to mitigate the traumatic effects of homelessness: we provided food, a warm or cool place to go during the day, occasional low-barrier help with financial or material needs, and coordination with local services as needed. Yet, the value of the congregation's ministry was probably not primarily in meeting tangible needs, most of which could be met elsewhere in Arlington and D.C. Its value, rather, was in providing a space of welcome, where some of the most marginalized people in our neighborhood could be received with their hurts and their stories as those who bear the image of God, in the hopes that that, too, could provide a source of healing.

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For a time, a framed blessing hung near the church entrance. I always loved its final words: *Often, often, often, goes Christ in the stranger's guise*. In order to accept this as true, we didn't need to know all the details of a person's history or be able to put all the pieces together into a coherent narrative. We needed to open our doors and to listen, with an ear to the pain that had so often brought people to us and that continued with every night spent on the streets. Trauma shaped and fractured their stories, sometimes tragically and irrevocably. But, limited and imperfect as our response may have been, we as a congregation and I as a pastor did our best to proclaim welcome to neighbors bearing the image of God—broken stories and all.