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FROM TRAUMA TO RESILIENCE: RECONSTRUCTING CHURCH PASTORAL MINISTRY IN POST-DISASTER CONTEXTS

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Abstract

Natural disasters generate not only physical destruction but also psychological trauma, spiritual crisis, social disintegration, and profound changes in community life. Gulö's study (2012) of BNKP pastoral ministry after the Nias earthquake demonstrates that the church's response tended to be sporadic, poorly planned, overly focused on spiritual concerns, and insufficiently holistic. This article aims to reconstruct a contextual pastoral-theological framework for church ministry in post-disaster contexts, guiding communities from trauma toward resilience. The study employs qualitative library research and a contextual pastoral theology approach. Sources analyzed include pastoral theology texts, disaster pastoral care studies, trauma and resilience research, theology of suffering and hope, ecclesial documents, and research on faith-based organizations. The study argues that post-disaster pastoral ministry must be contextual, trauma-informed, holistic, interdisciplinary, community-based, participatory, and resilience-oriented. The church should function not merely as an emergency aid provider but as a community that listens, laments, restores, empowers, and pursues social transformation. Resilience is understood not as individual capacity alone, but as a theological and social process nurtured through relationships, faith, solidarity, participation, and hope.

Keywords : *post-disaster trauma; resilience; pastoral ministry; contextual pastoral theology; church; community recovery*

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1. Introduction

Disasters always arrive as a rupture wider than the destruction of buildings. When earthquakes, floods, tsunamis, or volcanic eruptions strike a region, what collapses is not only housing and infrastructure but also routines, a sense of safety, family relationships, livelihoods, and the belief that life can be predicted. Survivors often face the days after a disaster with accumulated losses: the loss of loved ones, homes, income, social networks, and a sense of the future. Post-disaster recovery therefore cannot be measured solely by the reconstruction of buildings or the distribution of material assistance. Behind visible physical recovery lies the long work of restoring safety, trust, meaning, and the community's capacity to imagine a future.

Neria, Nandi, and Galea (2008) show that the psychological impact of disasters varies considerably. Across different disaster contexts, the prevalence of post-traumatic stress disorder ranges widely, approximately from 5 to 60 percent, depending on exposure, the magnitude of loss, population characteristics, and available social support. This variation does not diminish the seriousness of the problem; rather, it demonstrates that trauma cannot be understood through a single uniform pattern. Goldmann and Galea (2014) expand this picture by showing that disasters may trigger depression, anxiety, prolonged grief, substance use, and other mental-health disorders. Some effects diminish over time, whereas others persist for years, particularly when survivors face repeated losses, economic uncertainty, displacement, stigma, or limited social support.

This reality positions disaster as a multidimensional crisis. The body experiences injury and exhaustion; the psyche experiences fear, grief, and disorientation; social relationships are fractured; and faith confronts questions concerning God's presence, justice, and the future. The crisis also has a structural dimension. Poor people, children, older adults, women, persons with disabilities, and those lacking access to public services often bear greater risks and experience slower recovery. The Inter-Agency Standing Committee guidelines (IASC, 2007) therefore encourage a layered approach to mental health and psychosocial support, ranging from the fulfillment of basic needs to professional services. This approach rejects a sharp separation between material, social, psychological, and spiritual dimensions because all four are intertwined in survivors' experiences.

At this point the church encounters its pastoral vocation. Churches almost always appear in disaster situations through prayer, fundraising, visits, distribution of basic necessities, and family accompaniment. Such presence has considerable social and spiritual significance because churches are often among the institutions closest to people's daily lives. Yet presence does not automatically mean that ministry is adequate. Gulö's thesis (2012) on BNKP pastoral ministry after the Nias earthquake of 28 March 2005 shows that church ministry tended to be sporadic, unplanned, overly focused on spiritual aspects, and not yet developed into holistic ministry. This finding reveals a gap between the church's intention to accompany communities and the pastoral capacity required by communities experiencing trauma and profound social change.

The problem identified by Gulö is not merely an organizational-technical issue. It concerns the way the church understands pastoral ministry itself. If pastoral care is understood primarily as providing spiritual consolation to individuals, the church may fail to see that disasters affect families, congregations, social networks, local economies, and structures of power. Pattison (2000) warns that pastoral ministry lacking contextual reflection can become individualistic and neglect questions of power. Lartey (2003), by contrast, emphasizes the need for intercultural ministry – ministry that begins with the concrete experience of a community and does not impose a universal model. The challenge is to connect this contextual sensitivity with knowledge of trauma, resilience, mental health, and disaster-risk reduction.

The literature on disaster pastoral care has offered several responses, but these remain dispersed across fields that often operate independently. Trauma studies emphasize psychological effects and the need for professional support. Pastoral-theology literature

discusses presence, counseling, healing, and growth. Resilience studies focus on the mobilization of individual and community resources. Research on faith-based organizations demonstrates the capacity of churches to build social capital and recovery networks. Meanwhile, theologies of suffering and hope provide language for understanding lament, doubt, solidarity, and the future. What remains insufficiently developed is an integration of trauma, resilience, contextual pastoral theology, and community ecclesiology into a single conceptual model relevant to churches in Indonesia.

This article aims to reconstruct a pastoral-theological framework for post-disaster church ministry capable of directing recovery from trauma toward resilience. It asks: How should disaster be understood as a pastoral and theological crisis? Why must sporadic and spiritualistic pastoral models be reconstructed? What theological foundations support trauma-informed, resilience-oriented ministry? What elements should constitute a post-disaster church pastoral model? These questions are addressed through library research using a contextual pastoral theology approach.

The contribution of this article is conceptual, contextual, and practical. Conceptually, it connects pastoral theology, trauma studies, community resilience, and practical ecclesiology. Contextually, Gulö's thesis serves as a point of departure for reading the problem of post-earthquake church ministry in Indonesia, rather than as a case closed in history. Practically, the article offers a pastoral reconstruction model that can help churches move from charitable and reactive responses toward ministry that listens, is safe for survivors, is holistic, participatory, networked, and sustainable. Its final argument is that pastoral resilience is not merely an individual's ability to resume functioning, but a theological and social process through which communities process wounds, restore relationships, construct meaning, strengthen capacity, and transform conditions that produce vulnerability.

2. Method

This study is qualitative research employing a library-research method. This methodological choice follows the article's purpose: to construct or reconstruct a pastoral-theological framework rather than empirically measure disaster survivors' experiences. Library research enables the researcher to bring together relevant knowledge traditions, examine tensions among them, and develop an argumentative synthesis that can ground a model of post-disaster church ministry. The research data consist of ideas, concepts, findings, and normative principles contained in the literature, rather than respondents' answers or field measurements.

The approach employed is contextual pastoral theology. It reads the reciprocal relationship among theological texts and traditions, human experience, sociocultural contexts, and church-ministry practices. Lartey (2003) guides an intercultural reading, while Pattison (2000) cautions that pastoral ministry must be critically analyzed in relation to power, institutions, and social structures. Within this framework, post-disaster experience is not positioned merely as an object to which theory is applied, but as a context that challenges, corrects, and enriches the formulation of pastoral theology.

The literature is organized into seven categories. First are pastoral-theology books, particularly works by Lartey, Pattison, Clinebell, Capps, and Ashley and Roberts. Second are studies of pastoral care and disaster pastoral care, including Meade, Swain, Bridgers, and Sutton. Third are studies of post-disaster trauma and mental health, such as Neria, Nandi, and Galea (2008), Goldmann and Galea (2014), and the IASC guidelines (2007). Fourth is literature on individual, community, and spiritual resilience, including Brenner, Bush, and Moses (2010), Cook and White (2022), Bakic and Ajduković (2021), and Aten, Smith, and Fitzpatrick (2019). Fifth are works on suffering, hope, recovery, and community, particularly Jones, Rambo, Warner and colleagues, and Wright. Sixth are ecclesial documents and public policies from PGI, WCC, and UNDRR. Seventh are studies of churches and faith-based organizations in disaster recovery, including Elliott and Webb, Rivera and Nickels, and Baidhawy. Gulö's thesis (2012) is positioned as an Indonesian contextual source connecting theoretical discussion with the BNKP experience after the Nias earthquake.

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The analysis proceeded through five primary movements. First, the problem of post-disaster pastoral ministry was identified through readings of Gulö's thesis and trauma literature. Second, sources were classified according to their argumentative function: diagnosis, critique, theological foundation, resilience concepts, or institutional implications. Third, each source was read critically with attention to its context, assumptions, strengths, and limitations. Fourth, the findings were theologically synthesized to bring together suffering, pastoral presence, hope, resilience, and community. Fifth, the synthesis was used to construct a pastoral model coherent with the context of churches in Indonesia.

Accordingly, this article is not a summary of theories. The literature is used as argumentative material for answering the research questions and constructing a pastoral model. Critical reading is necessary so that trauma is not reduced to a problem of insufficient faith, resilience is not narrowed into a demand to recover immediately, and the church is not positioned merely as a distributor of aid. The validity of the article's argument rests on the coherence among the diagnosis of the problem, theological foundations, cross-disciplinary findings, and the conceptual feasibility of the proposed model.

3. Results and Discussion

Disaster as a Pastoral and Theological Crisis

Disaster is not merely a natural event requiring a technical-material response. It disrupts the order of life previously regarded as stable. Families may be separated, homes reduced to rubble, livelihoods lost, and social spaces that sustain communal identity rendered dysfunctional. Alongside visible destruction, the structures of meaning that help people understand who they are, upon whom they depend, and how the future may be imagined also collapse. Here disaster enters the pastoral domain: it touches the whole of human existence and raises questions that cannot be answered through logistical distribution alone.

Neria, Nandi, and Galea (2008) show that the prevalence of post-traumatic stress disorder after disasters ranges widely, approximately 5–60 percent, depending on exposure, the magnitude of loss, population characteristics, and available social support. This figure should not be used to label all survivors as patients. Rather, it demonstrates that post-disaster responses must be sensitive to differing experiences and must not impose a single measure of recovery. Goldmann and Galea (2014) extend this picture by showing that disasters may also trigger depression, anxiety, grief, substance use, and other mental-health problems that can persist long after public coverage of the disaster has disappeared.

IASC (2007) emphasizes that post-disaster support should proceed through several layers, from basic needs and safety to community support, focused interventions, and clinical services. This framework is important for churches because it prevents spiritual ministry from being placed in the role of a substitute for mental-health services. Prayer, liturgy, pastoral conversation, and faith communities make distinctive contributions, but those contributions are ethical only when carried out with awareness of the limits of competence and readiness to refer survivors to professionals.

From a pastoral-theological perspective, disasters simultaneously shake bodies, psyches, relationships, faith, and social structures. The question "Where is God?" often arises together with questions about the justice of aid distribution, the future of families, and the possibility of rebuilding life. Churches therefore cannot restrict themselves to distributing assistance or offering religious answers. They are called to be present within crises of meaning, to preserve safe spaces for lament, and to participate in repairing damaged social relationships. Pastoral crisis does not end when material needs are met; it continues as long as survivors struggle to reconnect fragmented lives.

Diagnosis: Limitations of Sporadic and Spiritualistic Pastoral Models

Gulö's thesis (2012) provides an important empirical foundation for this discussion. In his study of BNKP pastoral ministry after the Nias earthquake of 28 March 2005, Gulö found that church ministry tended to be sporadic, unplanned, overly focused on spiritual aspects,

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and lacking a special institutional structure for addressing post-disaster problems. Occasional ministry is certainly not the same as insincere ministry. Nevertheless, sincerity is insufficient for responding to a complex crisis. Without planning, training, division of responsibilities, and evaluation mechanisms, ministry easily depends on personal initiative and ends when public attention shifts.

The finding also shows how ecclesial traditions are shaped by their sociocultural and theological contexts. Nias society, post-earthquake social change, and BNKP pietism interacted in shaping ministry priorities. Gulö is not claiming that attention to spirituality is erroneous. The problem arises when spirituality is separated from the body, economy, social relationships, mental health, and institutional structures. Prayer can be an important resource for survivors, but prayer without accompaniment, protection, and social action risks becoming consolation that does not address the roots of vulnerability.

Pattison (2000) helps broaden this diagnosis. He shows that pastoral ministry can become individualistic and unreflective regarding power dynamics when it focuses only on the relationship between minister and individual without reading the social structures that shape the individual's life. In disaster contexts, questions about who receives assistance, who can speak, who is considered worthy of help, and who is left waiting are pastoral as well as political questions. Clinebell (2011) offers a more holistic horizon: pastoral ministry includes healing, growth, group support, the restoration of relationships, and the development of life capacities. Ashley and Roberts (2011) add that disaster pastoral care requires planning, training, protocols, and coordination that cannot be generated ad hoc in the midst of a crisis.

Reconstructing the pastoral model therefore requires a paradigm shift. Survivors should no longer be positioned primarily as "victims" waiting for mercy, but as subjects possessing knowledge, voices, networks, and capacities to participate in determining the direction of recovery. Ministry must not stop at "assistance," but move toward the restoration of relationships and meaning, capacity building, and justice. Churches must not wait for disaster as an emergency event; they must develop preparedness before disaster, accompaniment during crisis, and learning afterward. Individual spiritual ministry remains necessary, but it must be situated within a broader community ecology.

Contextual Pastoral Theology: Listening Before Acting

Lartey (2003) argues that effective pastoral ministry cannot employ one uniform model for every context. Local culture, language, religious symbols, kinship structures, patterns of leadership, and historical experience are not merely background; they shape how communities experience wounds and recognize recovery. An intercultural approach requires churches to recognize that no ministry tradition is context-free. Pastoral models always arise from particular encounters among theology, society, and history.

Meade (2007) warns that pastoral models imported from other contexts may fail not because their intentions are bad, but because they cannot read the symbolic and relational world of the local community. A ritual regarded as healing in one place may not carry the same meaning elsewhere. Similarly, psychological terms, counseling patterns, or particular forms of liturgy may create distance if they are not translated into the language of the community's experience. In plural Indonesia, churches need to understand how local communities interpret disaster, death, land, home, ancestors, family, suffering, and the future.

Gulö (2012) shows that Nias sociocultural background and BNKP pietist tradition directly shaped and limited the pastoral ministry that developed. This finding need not be read as a critique of pietism as a whole. More appropriately, it is an invitation for every theological tradition to be critically brought into dialogue with the concrete context. Pietist spirituality emphasizing personal faith and relationship with God can be a source of strength, but it must be expanded so that it can read collective trauma, social injustice, and the institutional needs of post-disaster communities.

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Listening before acting is both an epistemological and an ethical principle. Churches must not determine survivors' needs based on ministers' assumptions, donor requirements, or pre-established theological agendas. Context mapping must ask about the experiences of different groups, including children, women, older adults, persons with disabilities, and families that have lost their livelihoods. In this way, contextual pastoral care does not become a slogan about culture, but a practice of reading reality and allowing that reality to correct the church's understanding of its vocation. There can be no pastoral reconstruction without reconstructing the reading of context.

Theology of Suffering and Trauma-Informed Pastoral Care

One of the greatest dangers in post-disaster pastoral ministry is the tendency to spiritualize suffering prematurely. Disaster may be interpreted as a test of faith, divine punishment, or part of a plan that will ultimately produce good. Such interpretations may sound reassuring to some, but to survivors still grieving homes, family members, or a sense of safety, they may feel like a rejection of actual experience. When churches offer theological explanations too quickly, lament can be silenced and anger treated as a deficiency of faith.

Jones (2009) shows that theology which leaves no room for lament, anger, and doubt can deepen wounds. Trauma is not merely a bad memory waiting to be replaced by a victory narrative; it changes the way a person experiences time, the body, relationships, and God. Rambo (2010) develops the concept of "remaining," attending to the Spirit's presence amid life that has not yet been restored. This concept rejects the demand that survivors leap immediately from the cross to victory. Pastoral presence is tested precisely in the willingness to remain with ambiguous experience, when recovery is unclear and answers are unavailable.

Swain (2011), in reflecting on the tragedy of September 11, shows that meaningful pastoral presence often consists not in theological answers but in the willingness to be silent, listen, and bear pain together. Bridgers (2011) adds that sacramental and liturgical resources can facilitate recovery when they are not used to close trauma but to give communal form to grief and hope. Liturgy can help communities remember victims, lament loss, and affirm that survivors' lives retain dignity.

Aten, Smith, and Fitzpatrick (2019) show that religion and spirituality can be sources of healing as well as sources of additional harm. Positive religious coping can help people find support, meaning, and hope; negative religious coping, such as interpreting disaster as punishment or feeling abandoned by God, can intensify psychological distress. Trauma-informed pastoral care therefore not only acknowledges religion's strength but also examines the possibility that religion may be used harmfully.

In practice, trauma-informed ministry prioritizes psychological safety, trust, choice, survivors' control, respect for boundaries, and sensitivity to trauma triggers. Pastors and volunteers must not pressure survivors to recount their experiences, diagnose PTSD without competence, promise instant healing, or replace psychologists and psychiatrists. They need to know when to be present, when to listen, when to facilitate community support, and when to refer to professionals. The pastoral principle is simple but demands discipline: be present before explaining, listen before advising, lament before formulating victory, and respect the process before demanding results.

Resilience as a Theological and Social Process

Resilience is often misunderstood as the ability to bounce back quickly. This understanding can turn resilience into a moral demand: survivors are considered successful when they quickly become productive again and failures when they continue to grieve. Bakic and Ajduković (2021) show that post-disaster resilience is not an inborn individual trait, but a process of mobilizing social, material, relational, and spiritual resources over time. A resilient community is not one that has remained uninjured, but one able to process wounds and activate resources to continue life with dignity.

Brenner, Bush, and Moses (2010) integrate spiritual care and mental health throughout the disaster cycle. This integration is important because spiritual care and mental health are

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not competitors. They have different competencies that can support one another when working within clear ethical boundaries. Churches can offer presence, ritual, relational support, and meaning-making; mental-health professionals can provide assessment, clinical intervention, and referral. A sound model does not force either party to assume the entire responsibility for recovery.

Cook and White (2022) connect biblical and theological visions of resilience with pastoral and clinical insights. Within this perspective, resilience is inseparable from faith, hope, relationships, and community. Aten, Smith, and Fitzpatrick (2019) remind us that religious coping is not always protective. Theology that blames victims, regards disaster as punishment, or promises that faith will erase all pain can produce religious injury. Churches therefore need to cultivate positive religious coping through an understanding of God's presence in suffering, a community that bears burdens together, and hope that does not deny reality.

N. T. Wright (2006) offers an important horizon for this understanding. Christian hope is not an escape from suffering but a calling to move with God in resisting evil and restoring creation. In post-disaster contexts, genuine resilience is not merely personal adaptation or a return to pre-disaster conditions. It is a communal movement toward life that is more just, better prepared, and more capable of protecting vulnerable groups. Hope therefore has an ethical dimension: it impels churches to advocate for livelihood recovery, access to services, protection, and risk reduction.

From this synthesis, pastoral resilience may be defined as the process of accompanying communities as they process wounds, restore relationships, rebuild meaning, activate resources, and develop the capacity to live together more justly after disaster. This formulation preserves two things at once. It acknowledges that trauma is real and must not be bypassed quickly; at the same time, it refuses to see survivors only as broken people. They are subjects with capacities, experiences, and possibilities for building a common future.

The Church as a Community of Recovery: Social Capital and Practical Ecclesiology

Churches have social and theological grounds for becoming communities of recovery. Rivera and Nickels (2014), in their study of Vietnamese Catholic churches in New Orleans after Hurricane Katrina, show that social capital—trust, networks, leadership, gathering spaces, and shared identity—can accelerate community recovery. Social capital does not work automatically; it must be managed inclusively. A church that serves only internal members may reinforce exclusivity, whereas a church that builds partnerships and opens its resources can become social infrastructure for a wider area.

Elliott and Webb (2023) found that congregations effective in disaster response transition from internal ministry toward cross-institutional partnership. Churches do not work alone; they become coordination nodes connecting survivors, government, humanitarian organizations, health professionals, schools, and local groups. Baidhawy (2015) shows through the Muhammadiyah experience that religious organizations in Indonesia possess distinctive institutional capacity, volunteer networks, and social legitimacy. Although its institutional context differs from that of churches, the finding is relevant comparatively: faith-based recovery requires structures, leadership, training, and networks that can endure beyond the emergency-aid phase.

Warner, Southgate, Grosch-Miller, and Ison (2019) develop a perspective on how congregations collectively experience, interpret, and respond to tragedy. Congregations can experience collective trauma; therefore, recovery cannot be achieved through individual counseling alone. Churches need to build collective memory, spaces for lament, memorial rituals, support groups, and practices of solidarity. Liturgy is not merely a routine worship activity, but one-way communities give form to loss and articulate hope.

Ecclesial documents from PGI and WCC, together with the Sendai Framework from UNDRR, broaden this horizon. Churches are called to be present before, during, and after disaster. Presence before disaster means education, mitigation, preparedness, and network

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building. Presence during disaster means safety, assistance, accompaniment, and protection. Presence after disaster means restoring relationships, strengthening livelihoods, advocacy, evaluation, and reconstruction that reduces vulnerability. Churches thus become not merely institutions distributing aid, but communities connecting faith, solidarity, knowledge, and social action.

4. Reconstructing a Contextual Pastoral Model from Trauma to Resilience

Based on the preceding argument, this article proposes the Contextual Pastoral Reconstruction Model from Trauma to Resilience. The model is not intended as a rigid procedure to be applied identically in every church. It is a normative and operational framework that must be translated through contextual interpretation. Seven principles support the model: contextuality, pastoral presence, recognition of trauma, holism, survivor participation, interdisciplinary networking, and an orientation toward resilience and transformation.

Contextuality means that ministry begins with the community's experience and resources. Pastoral presence means that the church is willing to remain with survivors, rather than merely arrive to deliver a message. Recognition of trauma rejects spiritualization and forced recovery. Holism connects spiritual, psychological, social, material, and structural dimensions. Participation positions survivors as subjects. Interdisciplinary networking recognizes the limits of church competence while opening cooperation with professionals. An orientation toward resilience and transformation ensures that recovery does not stop at restoring the old condition but also builds stronger capacity and justice.

Progressively, the model moves through seven interconnected phases. The first is reading the context and mapping vulnerabilities through dialogue, community mapping, identification of vulnerable groups, and recognition of local resources. The second is establishing safety and trauma accompaniment through safe spaces, visits, family support, non-coercive prayer, and mental-health referrals. The third is providing space for lament, meaning-making, and the reconstruction of faith through liturgy, memorial rituals, voluntary testimony, and theological language that acknowledges ambiguity.

The fourth phase focuses on restoring relationships and strengthening community through support groups, educational activities, restoration of congregational life, and reinforcement of social networks. The fifth directs ministry toward empowerment and social transformation through advocacy, livelihood strengthening, volunteer training, protection of vulnerable groups, and community-based mitigation. The sixth builds institutions and networks through disaster-pastoral teams, protocols, referral systems, partnerships with regional disaster-management agencies and health institutions, and cooperation across churches. The seventh phase is continuous evaluation and learning so that churches can assess safety, participation, restored relationships, institutional capacity, and the transformative impact of ministry.

This model changes pastoral orientation from reactive to preventive and sustainable, from aid recipients to subjects of recovery, from limited spirituality to holistic ministry, and from individual recovery to communitarian resilience. It also responds to Gulö's (2012) finding concerning the need for a special body, human-resource development, training, and collaborative networks. The model does not erase the church's distinctiveness; rather, it helps churches translate that distinctiveness into ministry responsible to the complexity of trauma and disaster.

Table 1. Comparison of the Previous Pastoral Model and the Reconstruction Model

Aspect	Previous pastoral model	Reconstruction model
Orientation	Reactive and short-term	Preventive, sustainable, and adaptive
Position of survivors	Objects of assistance	Subjects of recovery and decision-making
Focus	Limited spiritual focus	Spiritual, psychological, social, material, and structural

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Aspect	Previous pastoral model	Reconstruction model
Trauma approach	Ignored or spiritualized	Acknowledged and addressed through trauma-informed practice
Resilience	Individual responsibility	Relational and communitarian process
Professional relationships	Limited or unstructured	Interdisciplinary with referral systems
Ministry structure	Ad hoc and dependent on individuals	Institutionalized, with protocols and training
Goal	Return to the pre-disaster condition	Recovery, empowerment, and transformation

Table 2. Dimensions, Key Questions, and Forms of Ministry

Dimension	Key question	Form of ministry
Contextual	How does the community understand disaster and recovery?	Mapping, dialogue, and cultural interpretation
Trauma-informed	What is safe and does not retraumatize?	Safe spaces, accompaniment, and referral
Theological	How are suffering and hope processed?	Lament, liturgy, prayer, and remembrance
Relational	Which relationships have been damaged and need restoration?	Visits, support groups, and reconciliation
Communitarian	What social resources can be mobilized?	Volunteer networks and community strengthening
Transformative	Which vulnerabilities and injustices need to change?	Advocacy, empowerment, and mitigation
Institutional	Who is responsible and how will coordination occur?	Teams, protocols, training, and partnerships
Resilience	How can the community build future capacity?	Evaluation, learning, and preparedness

5. Implications of the Model for Churches and Theory Development

The model carries several implications for pastoral theology. First, pastoral care is expanded from individual counseling to community accompaniment. Individuals remain important, but individual experience is read within family, congregational, economic, cultural, and policy networks. Second, consolation is understood as solidarity enacted through presence, protection, and action. Third, charitable ministry is directed toward empowerment and liberation. Fourth, private spirituality is connected with a public spirituality willing to speak about justice, aid distribution, and risk reduction.

For local churches, the model requires the formation of disaster-response teams, training for pastors and volunteers, the development of protocols, trauma-sensitive liturgy, referral systems, documentation, and survivor participation. For synods or ecclesial institutions, these needs should be translated into policies, budgets, theological-education modules, and cross-regional cooperation. Disaster ministry must not depend solely on a pastor's charisma or a congregation's momentary enthusiasm; it must become part of the church's institutional capacity.

At the societal level, churches can function as civil-society actors and government partners. They possess trust, space, networks, volunteers, and an ability to construct meaning that other institutions do not always possess. Yet such legitimacy must be accompanied by accountability. Churches need to be transparent in aid distribution, respect religious diversity, protect vulnerable groups, and refrain from using survivors' vulnerability to expand institutional dominance. Interfaith and cross-sector collaboration is part of the church's social witness in disaster contexts.

The model also opens an agenda for further research. Field research can test how the model is translated across different denominations and regions. Participatory action research can involve survivors in designing, implementing, and evaluating ministry. Specialized studies of children, post-trauma liturgy, church–regional disaster-management agency relations, and indicators of pastoral resilience would enrich this still-conceptual framework.

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6. Conclusions and Suggestions

This article begins with the reality that disaster not only damages bodies and living spaces but also shakes relationships, meaning, faith, and the future of communities. Trauma literature demonstrates the breadth of disasters' psychological effects, while Gulö's thesis (2012) shows that BNKP pastoral ministry after the Nias earthquake remained sporadic, unplanned, overly spiritualistic, and insufficiently holistic. This diagnosis confirms that the problem of ministry is not merely a lack of activities, but a limitation of paradigm and institutional capacity.

Through library research using a contextual pastoral theology approach, this article argues that churches need to move from reactive and charitable pastoral models toward ministry that is contextual, trauma-informed, holistic, interdisciplinary, community-based, participatory, and resilience-oriented. Contextual pastoral theology teaches that churches must listen to the community's experience and culture before acting. Trauma theology warns against premature religious explanations. A theology of hope provides a basis for presence that does not deny suffering. Resilience literature broadens attention from individual capacity toward the mobilization of social, spiritual, material, and relational resources.

The Contextual Pastoral Reconstruction Model from Trauma to Resilience formulates seven phases: reading the context and mapping vulnerabilities; establishing safety and trauma accompaniment; providing space for lament and meaning-making; restoring relationships and strengthening community; developing empowerment and social transformation; building institutions and networks; and undertaking continuous evaluation. The model positions survivors as subjects of recovery and the church as a community that walks with them. Resilience is not understood as a demand to return to normal immediately, but as a process of building life together in ways that are safer, more just, and more dignified.

The limitation of this article lies in its conceptual character. The proposed model has not yet been tested through field research, and some disaster-pastoral-care literature comes from contexts outside Indonesia. Further research should therefore test the model across different denominations, regions, and types of disaster. Nevertheless, this conceptual reconstruction provides a basis for churches' conversations about preparedness, trauma accompaniment, community recovery, and interinstitutional cooperation.

Ultimately, the church is called not to provide quick answers to suffering, but to remain faithfully present amid fractured life. From a listening presence, communities can learn to lament; through lament, faith can find more honest language; and from honest language, a path opens toward recovery and resilience. Post-disaster pastoral ministry becomes a witness when the church walks with survivors, not abandoning them within trauma, nor forcing them out of it before the time is right, toward a common life that is stronger, more just, and full of hope.

References

Ashley, W. W. C., & Roberts, S. B. (Eds.). (2011). Disaster spiritual care: Practical clergy responses to community, regional and national tragedy. SkyLight Paths Publishing.

Aten, J. D., Smith, W. R., & Fitzpatrick, S. (2019). The psychological study of religion and spirituality in a disaster context: A systematic review. Psychological Trauma: Theory, Research, Practice, and Policy, 11(6), 597–613.

Baidhawy, Z. (2015). The role of faith-based organization in coping with disaster management and mitigation: Muhammadiyah's experience. Journal of Indonesian Islam, 9(2), 167–193.

Bakic, H., & Ajduković, D. (2021). Resilience after natural disasters: The process of harnessing resources in communities differentially exposed to a flood. European Journal of Psychotraumatology, 12(1).

Brenner, G. H., Bush, D. H., & Moses, J. (Eds.). (2010). Creating spiritual and psychological resilience: Integrating care in disaster relief work. Routledge.

P-ISSN: 0000-0000; E-ISSN:3025-1990
Available : https://jurnalhafasy.com/index.php/msj DOI: https://doi.org/10.61942/msj.v4i4.681

Bridgers, L. (2011). The resurrected life: Roman Catholic resources in posttraumatic pastoral care. International Journal of Practical Theology, 15(1), 38–56.

Capps, D. (1983). Life cycle theory and pastoral care. Fortress Press.

Clinebell, H. (2011). Basic types of pastoral care & counseling: Resources for the ministry of healing and growth (3rd ed.). Abingdon Press.

Cook, J. R., & White, J. W. (Eds.). (2022). Biblical and theological visions of resilience: Pastoral and clinical insights. Routledge.

de Gruchy, J. W. (1987). Theology and ministry in context and crisis: A South African perspective. Collins.

Elliott, J. H., & Webb, G. R. (2023). Moved to partner: A case study of faith-based congregations in disaster response. Journal of Emergency Management, 21(1), 37–51.

Goldmann, E., & Galea, S. (2014). Mental health consequences of disasters. Annual Review of Public Health, 35, 169–183.

Gulö, A. (2012). Pelayanan pastoral BNKP dalam konteks perubahan sosial pasca gempa bumi 28 Maret 2005 di Nias [Tesis, Universitas Kristen Satya Wacana].

Inter-Agency Standing Committee (IASC). (2007). IASC guidelines on mental health and psychosocial support in emergency settings. World Health Organization.

Jones, S. (2009). Trauma and grace: Theology in a ruptured world. Westminster John Knox Press.

Lartey, E. Y. (2003). In living color: An intercultural approach to pastoral care and counseling (2nd ed.). Jessica Kingsley Publishers.

Meade, J. A. D. (2007). Pastoral care in disaster: A theological reflection. Oxford Institute of Methodist Theological Studies.

Neria, Y., Nandi, A., & Galea, S. (2008). Post-traumatic stress disorder following disasters: A systematic review. Psychological Medicine, 38(4), 467–480.

Pattison, S. (2000). A critique of pastoral care (3rd ed.). SCM Press.

Pattison, S. (1994). Pastoral care and liberation theology. Cambridge University Press.

Persekutuan Gereja-Gereja di Indonesia (PGI). (2026). Pesan pastoral PGI menghadapi bencana. PGI.

Rambo, S. (2010). Spirit and trauma: A theology of remaining. Westminster John Knox Press.

Rivera, J. D., & Nickels, A. E. (2014). Social capital, community resilience, and faith-based organizations in disaster recovery. Risk, Hazards & Crisis in Public Policy, 5(2), 178–211.

Sutton, J. (2006). Convergence of the faithful: Spiritual care response to disaster and mass casualty events. The Journal of Pastoral Theology, 16(1), 18–29.

Swain, S. (2011). Trauma and transformation at ground zero: A pastoral theology. Fortress Press.

United Nations Office for Disaster Risk Reduction (UNDRR). (2015). Sendai framework for disaster risk reduction 2015–2030. UNDRR.

Warner, M., Southgate, C., Grosch-Miller, C., & Ison, H. (Eds.). (2019). Tragedies and Christian congregations: The practical theology of trauma. Routledge.

World Council of Churches (WCC). (2006). Statement on water for life. WCC Central Committee.

Wright, N. T. (2006). Evil and the justice of God. IVP.