

## **Beyond Disaster: Fear Transformed**

**Margaret Kornfeld**

It takes time to heal from the trauma of disaster. Six years after September 11, 2001, I am finally ready to record my reflections about my experiences as a New York City pastoral psychotherapist, who counseled, supervised, taught, and consulted during the disaster. I was also president of the American Association of Pastoral Counselors at the time. This was a challenge, but it was also good fortune. Because of my duties as president, I traveled to all parts of the country. This regular travel gave me respite—a chance to breathe clean air and to be soothed by colleagues. I also saw the country beyond traumatized New York City. I tell my story through the eyes of a pastoral psychotherapist. When I refer to counseling, however, I include all kinds of chaplains who were at the site, counseling and offering pastoral care as first responders.

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## MY STORY

September 11 was a beautiful Primary Day. After voting, I got on my usual Brooklyn subway at 8:30 a.m.—never imagining that when I got off the world would have changed. I was in fact underground when the first Tower was struck. As I got off the train at Twenty-third Street, I saw a fire on the top floor of a Tower but had no idea what had happened. As I rounded Fifth Avenue—which was ominously quiet—groups of people were gathered in the street. I asked, “What’s happened?” Someone yelled, “A second plane hit a Tower.” Again my imagination failed. I assumed that a plane had hit a Tower and crashed into the Plaza. It never entered my mind that a plane could actually attack such a massive tower. I was late for my appointment, so I hurried on. I was concerned that a terrible accident had occurred.

I then went into my office at Calvary Episcopal Church, where my client was already waiting. She, too, knew that something awful had happened, but, like me, she had not seen the images. We proceeded with therapy, but then the phone started ringing, and unlike my regular practice, I picked up the phone. First my husband: “Margaret are you all right? I was so afraid you were caught in the subway under the Towers. Don’t you know? Planes have crashed into the Towers.” And then a friend: “Are you OK? The Towers have fallen.” And another call: “Are you OK? A plane has exploded in Pennsylvania.” Another phone call: “A plane hit the Pentagon.”

My client and I sat increasingly in shock as each call came. These plane crashes seemed coordinated. Was a war beginning? With whom? Viscerally, we were both remembering the wars of our childhood. For me, it was World War II, and for her, the Cold War. It was all coming back. Then she began to tremble as long suppressed/repressed feelings of shame and guilt emerged. Her father had worked on *the* bomb. She had never talked about this with me.

We were no longer client and therapist. We were together—sharing an existential crisis, bound together in knowing and not knowing. When the session was over, she felt it was safe to go out into the street. Neither of us “got” that we were only a mile from the disaster.

And so the day went on. My next client did not arrive, and I was worried. I had enough information to know that downtown was in chaos. She, too, was coming from Brooklyn by subway. Was she stuck underneath? When I finally reached her, we laughed ruefully. She was coming that day

with an agenda: she was finally ready to face her fear of flying. I told her that perhaps she was right.

My greatest concern was to locate a client who worked at the World Trade Center. I did not grasp the enormity of the situation and didn't realize that she might not be found. But hers was another miracle story. Normally, she would have been working on an upper floor of the first Tower, but she was at a meeting on a lower floor of the second Tower. Her boyfriend, who worked nearby, looked out the window, saw the first plane, called her to get out, and she did—running madly from the building and helping others on the way. When I finally reached her, she was frightened, covered with dust and exhausted, but mainly, she was furious. "They've taken away my city! I've always felt safe here."

Although it now seems trite, I felt personally annoyed by these events. On Friday, I was to go to Baltimore for my first Board of Governors meeting as president of AAPC. The meeting was important. I had worked hard to prepare for the meeting, and I was excited. I called the Washington office and asked if they thought we would be flying by Friday. The staff was incredulous. "No, Margaret!! Cancel! We'll do it now." Little did I know that I couldn't even be home by Friday.

That evening I was invited to go upstairs to the Rector's apartment to watch TV. There I saw what I had been unable to imagine. My eyes were opened. Perhaps I was blessed to have not been traumatized by those early images. I would have enough vicarious traumatization in the coming days and months ahead.

#### SUPERVISING AND COUNSELING IN THE MIDST OF DISASTER

In those first somber days, chaplains and pastoral counselors rushed to hospitals where we expected that hundreds of victims would come to be treated. Although injured firemen and rescue workers arrived *they* did not come. It took us days to comprehend that *they* would not come. *They* were dead.

But there was still much for us to do. Chaplains and pastoral counselors were early responders at the site and at other locations where families and friends gathered in the hopes of learning about lost ones. Every health care and social service agencies were directly impacted—institutional and hospital chaplains were particularly stretched. Pastoral counselors tended traumatized clients and their families. We were also part

of mental health teams, were consultants in schools, and resources to faith communities. We were in the midst of it all.

During that terrible time, I developed the following guidelines for myself and for supervising other pastoral counselors and social workers, who worked with those affected by every aspect of the disaster. I pass along these guidelines in the hope that they will help anyone who is forming pastoral care and counseling supervises to work those affected by acute crises, including disasters.

*Listen. Be a Non-anxious Presence*

Listening without anxiety is a basic rubric of counseling. Even so, that was hard to do in the midst of a disaster. I found that in those first days, my professional training and defenses kicked in as well as the pre-PTSD (posttraumatic stress disorder) symptom of disassociation: I didn't cry until September 25. I was able to work on top of my anxiety and be present. I believe I was praying without ceasing.

As the weeks and months went by, I began to be worn down by the constant red alerts and all that went with them. Just getting to work was a challenge. I was often exhausted before I saw my first client. Very often we both needed to discharge our anxiety and frustration before we could get to work. We traded stories of our morning's frustrations. We both needed to be soothed, and the sharing helped. My earliest training was psychoanalytic psychotherapy. I was taught that such self-revelation would have been unhelpful to the client. However I believe this transparency honored our common condition. We were in the same boat. After unloading, I was able to step back and listen.

*Don't Make Matters Worse*

I already knew that it was dangerous to ask a person in trauma such reflective questions as: "Tell me how you feel about what happened to you?" "Do you want to talk about it?" Such questions can reactivate the trauma and make matters worse. I was grateful that I had added ego supportive and solution focused therapies to my psychoanalytic armamentarium and that I had experience with bodywork: massage, energy work, movement therapy, and biofeedback. In time, I was also able to refer recovering victims to clinicians whose physical techniques not only soothed, but released toxins of fear and helped them return to their bodies.

*Learn New Treatment Methods*

At the time of the disaster, most pastoral caregivers were proficient with “talk” counseling. Only a few of us had had training in the EMDR—eye movement desensitization and reprocessing—technique. EMDR is a one-session treatment that has proven to be an amazingly successful treatment for trauma victims. After 9/11, word about the efficacy of this method spread and many pastoral caregivers received EMDR training.

*Understand that Following Trauma, PTSD Symptoms are Normal*

I knew that a diagnosis of PTSD could not be made until six months following the event. Then, if pre-PTSD symptoms were still present, a PTSD diagnosis was given. With time, for most people, pre-PTSD reactions have receded with the help of support and care. This relieved me of feeling acutely anxious—as if everything was an emergency! I was able to reassure those who were experiencing the following:

- Subjective sense of numbing, detachment, or absence of emotional responsiveness
- Reduction in awareness of surroundings
- Feelings of unreality (derealization)
- Being detached from oneself (depersonalization)
- Inability to recall an important aspect of the trauma (dissociative amnesia)
- Severe sleep disturbance and exaggerated startle response
- Reactivation of the trauma that has been triggered by association

Pre-PTSD reactions are gradually no longer needed, but anniversary dates and other associations may continue to trigger trauma reactivation. The body remembers. Both memory and emotion are “stored” in neuropeptide receptors that are located throughout the body. Memory releases emotion. Emotion releases memory. When people are able to identify events/associations/sensory phenomena that trigger reactivation, they can be helped to predict reoccurrence and regain control.

I think that the pre-PTSD state is adaptive and, in many cases, a blessing. It is far better to be numb than to continue to experience abject terror. It is better to be distanced from the shock of the attack, the horror of falling bodies, and the panic of escape. More adrenalin overload is not needed. Healing must first happen—then comes remembering.

*Some are More Vulnerable to PTSD than Others*

Although most disaster victims won't develop PTSD, some do. Unless they have experienced prior recovery, persons who have been previously traumatized by child, family, sexual or other types of abuse, or who have suffered substance abuse or other addictions, or who have witnessed the abuse or violent death are particularly vulnerable to PTSD and may have multiple diagnoses.

In the early days after 9/11, vulnerable people throughout the city were being destabilized. And some, like those with acute PTSD, reacted by taking their own lives. Just as bodies fell from the Towers, they fell from apartment houses. Shortly after 9/11, a young woman jumped from an apartment across from my office. I did not see it, but my client walked by the apartment house on her way to our session, minutes before the woman jumped. My client came into the office frightened—not knowing what she knew. In a short time, we heard the sirens, went to the window and saw medics covering a body on a stretcher. We didn't know the story, although the tragedy was clear: the sound of falling, the cries of pedestrians—and with this, a therapy session began.

*Identify Networks of Support and Help People Connect to Them*

In early weeks following the attack, we knew that it was important to help traumatized victims remember times and places where they had received care and to encourage them to repeat what had worked. We also pointed them to agencies that could address their more specific needs.

Many New Yorkers and suburbanites already knew where to find their network of support. On 9/11 and the days following, they flocked to their communities of faith for prayer, comfort, and meaning making. Clergy and other religious leaders were inundated with requests for counseling, spiritual direction, and practical help.

At this time, New Yorkers and New Jersey suburbanites had less than "six degrees of separation" between them and a victim. Many knew, often intimately, one or more people who had escaped, were missing, or were dead. Others knew someone who knew someone—and they were empathically connected. Widows, widowers, and orphans were becoming known. We were connected as never before. As remains of the dead were found, whole communities mourned and were cloaked in grief and loss. Communities themselves began to create healing rituals—candlelight vig-

ils, community memorials, bulletin boards listing the missing, tributes of gratitude to the firefighters.

Even the City changed. Just living in New York City had some healing benefits. Perhaps living with the spirits of the dead had softened our hearts. When riding on the subway we looked in each other's eyes. We smiled at strangers. We thanked policemen. We baked cookies for firemen and did not honk our horns. We were kinder and glad to be alive.

Not everyone, however, enjoyed this communal openness. Our government, in seeking to protect citizens from terrorists, had caused many to be frightened of their Muslim neighbors. These "scapegoat neighbors" lived in their own fear of false accusations, detention, and the projections of others.

*Know that Most Disaster Victims are Resilient*

Disaster researchers have concluded that most people who suffer disasters are resilient. I have known this and have written about it in *Cultivating Wholeness*.<sup>1</sup> Other researchers have replicated these findings when studying trauma in families. Although I knew this intellectually, before 9/11, I didn't know the half of it. In extraordinary ways, traumatized New Yorkers, their neighbors, and the City itself, got up again. We saw that to be resilient did not mean to bounce up like a rubber ball. It took time, faith, and new alliances for us to pull together. And resiliency does not mean merely rising up to the former level of functioning. It means rising above it. I believe the City became wiser.

WHEN CASTING OUT FEAR IS UNPATRIOTIC

Autumn of 2001 was unusually beautiful—crisp days, blue skies—filled with smoke. Ash and debris fell down like snow. Beauty and horror reflected the City's emotional life. In the first two weeks after the attack, we lived in a state of emergency—in "High Alert." The police, fire, and emergency sirens were constant. We were looking for the lost—as though they had escaped the ordeal and were wandering the streets. We were living in fear.

But we were also mourning, and we were beginning to wait. Every day a few bodies or remains were found, but thousands were missing. And we waited. We could not yet comprehend that the digging and looking would go on for years. We were just beginning to acknowledge that the dust that covered us was not just ash from the fallen Towers. Ground Zero

was a crematorium. We were breathing in the bodies—and perhaps souls—of the fallen. We were walking on Holy Ground.

I was invited to give a pastoral response at a candle light vigil to be held at Calvary Church on September 25—two weeks after 9/11. I used pastoral psychotherapist insights to address our condition: the trauma, fear, mourning, and waiting. I assumed that this vigil—waiting in the dark for the dawn—was planned by the church staff with input from the community. I was wrong. It was planned by community leaders. The church was packed. We were moved by firefighters who, in dress uniforms, filled three pews. We greeted them with hearts both filled with gratitude and open to their tremendous loss.

It was not the candlelight service I had expected. Every known patriotic hymn was sung. As we sang, people were given Velcro®-backed stars, representing the fallen, which they prayerfully put on a white alter cloth—a community “Eucharist.” I was uncomfortable. I felt as though I was at a religious patriotic rally.

I was the last to speak. I could sense that the mood had changed, and the message I’d written wouldn’t fit the situation. But I persevered, hoping to shed some light on fear and give a message of comfort and gratitude. I concluded by saying:

I think the most painful aspect of this attack is that the terrorists struck our nation with the weapon of terrifying fear. Terrorism is psychological war in which the poisonous fear of future annihilation is meant to keep us from living in the present by making us worry about the future. Tools that we can use against terrorism are acts of love, for love will cast out fear and give us hope.<sup>2</sup>

I can now see how crazy those words seemed to those who had already been rallied by both the event and the President’s words of fear. They were ready to say, “Right on! Go for it!” to the President who that very night would be declaring “war on terror.” I imagine that they had expected me to say, “God bless America,” and instead I talked about casting out fear. That was unpatriotic. Being afraid of terrorists—and going after them—was patriotic. “Casting out fear through acts of love” made no sense at all.

After the service, a parishioner came screaming into the foyer to find me, shouting, “Where is that woman? That was the most disgusting, inappropriate thing I’ve ever heard. Doesn’t she know what’s going on?” Then



I saw him coming toward me, flailing, shaking with rage. He lunged at me, and as he grabbed me, three men pulled him off. I then began to cry.

That night President Bush announced that we were going to “smoke out” the terrorists hiding in Afghanistan. He was focused on eliminating the terrorists through war. I was concerned about terror, itself. I believed that the terrorists didn’t need to come back for awhile because they had unleashed their weapon of fear. They could count on us to continue to scare ourselves to death. Perhaps they even have imagined that we would spend billions of dollars chasing them and fighting with others.

As I listened to the President, I became determined to spread the word: To “defeat” the terrorists we must live our lives. Fear was our friend when we needed it to send information to the brain, releasing the neurochemicals for those who needed to flee. To be afraid of something that might happen brings victory to the terrorists—whether we caught them or not. We have been created to live fully. One of the earliest admonitions given to our Jewish spiritual ancestors was: “Choose life so you may live.” Jesus said, “I have come so that you might have life and have it abundantly.”<sup>3</sup> The inner drive to wake up and be alive is rooted in our spiritual DNA.

#### ASSAULT ON THE BODY POLITIC

As I traveled about the country as president of the American Association of Pastoral Counselors, I found people less frightened than those of us who lived in New York or Washington, D.C. Our responses to 9/11 were reactivated every day—triggered by the very actions that were supposed to make us feel safe. In my travels, I found folks filled with good will toward New Yorkers. However, they, too, were affected. They were reluctant to travel, apprehensive about Muslims or “Muslim looking” strangers, and worried for those going to war in Afghanistan. They tended not to be viscerally filled with fear, but many were anxious because of the attack.

Because of 9/11, the Body Politic was traumatized. Since that body is us, the country, we experienced collective anxiety. We no longer could count on America to provide a safe holding environment. Because of this, we were losing basic trust. Although it might have been rooted in hubris, most Americans chose to believe that, because of our country’s strength, the boundaries of our country would never be violated, even in times of war. Those who

remember World War II know that we were afraid that we might be attacked and convinced that it was possible. Because we weren't attacked, our belief in the invulnerability of the United States was strengthened. Just like infants who experience a secure holding environment, Americans have been grounded in a confidence that, although our country could be threatened, we would still be safe. Now, our boundaries had been violated.

Although the ground underneath us felt shaky, there was not much talk about an underlying loss of trust in the fall of 2001. Instead, there was patriotic talk, supporting the goal of "getting the terrorists." Bin Laden had claimed the attack as the work of al-Qaeda; now we had a face on which we could focus our fear and our need for revenge. It was not acceptable to criticize this strategy. We were not able to say: "Mr. President. You're scaring us, and the terrorist love it."

#### A SIDE BAR: WHY DIDN'T WE SPEAK UP?

I have wondered why the country's reluctance to "speak up" persisted for so many years—particularly after there was evidence that the war "wasn't working." We were also becoming aware that we were violating our own values: torturing detainees in the hope of gaining information, killing innocents, and traumatizing our own military—sending them back for more combat and then not providing adequate medical and psychiatric care when they returned. We neglected military families, and the list goes on. In time, our own allies disengaged. And still we were silent. Only a few spoke up.

Although there are complex political reasons for the silence, I've speculated that, in addition, our government is replicating a dysfunctional family. Citizens who have grown up in dysfunctional families would be especially reluctant to speak up about their concerns. They know the rules. Keeping secrets, being silent about what is really going on at home, is a ground rule in the dysfunctional family.

Like many dysfunctional families, our "father" is a dry drunk. President Bush, our country's "father figure," admits that he is a former alcoholic. Others would say that he never entered treatment and is an unrehabilitated alcoholic. President Bush protests this diagnosis saying that his religious conversion to Jesus was his recovery. His approach to 9/11 and its aftermath, however, replicates the behavior of an alcoholic father.

Father Bush presents himself as the charming wisecracking good guy. (He was the clown in his family.) He gives nicknames to others—a power maneuver. (Genesis tells us that to name the creatures was to have dominion over them.) His mood and words are erratic. He says he will do something, but often he will actually do the opposite. He lies and denies. Father Bush lacks empathy—sending other people’s children to be killed, to kill, and to learn to torture. He deals secretly with his advisors and insists on secrecy. Even the dead are shrouded in secrecy. He would not allow the coffins of military personnel to be photographed.

His “children”—the American public—were told not to ask questions about the necessity to go to war with Iraq. We should trust him; he would give us the reasons. His policies and the war itself were being conducted “for our own good.”<sup>4</sup> It was not the children’s business to ask about how the war was being financed, who was doing the rebuilding after we had bombed Iraq, and who would profit. And children must not talk about pain inflicted on innocent Iraqis, on our soldiers, or on American families and communities.

#### AFRAID OF THE DARK? TURN ON THE LIGHT

Living in the present is not easy. For most of us, it requires spiritual discipline. We must choose to do it. Perhaps this has always been the case. Early on the children of Israel were told to choose life so they might live. In our time, we are conditioned, often subliminally, to live for and in the future: “Buy and you’ll be happy, successful, and sexy. We are seduced by the culture to live for the future; the terrorists use fear—different methods; same result.

So...what to do about terrorist-induced fear that activates the fears we already have? This was my challenge when speaking about fear. How can I talk about it without activating it, particularly in the lives of those who had not learned to sooth themselves? I decided to rely on my mothering experience.

When my daughter Sarah cried, “Momma, I’m scared! It’s dark in here, and there’s something in my room!” I did not say, “Don’t be silly. There’s nothing to be afraid of. Go back to sleep.” Instead, I went into her room, turned on the light, and asked, “Sweetie, what’s the trouble?” Sometimes we would both look around the room to see if something scary was

there. (It was often her cat.) To find a reasonable explanation, I would sometimes turn off the light, and we would look for what was creating shadows or would listen to the wind. Sometimes the dark felt like dark feelings. As I comforted her she would say, "The kids at school were mean today." Before I left her room, I would rub her back and sing until she was soothed and sleepy.

In working with clients after 9/11, I did not suggest that they look for early roots of fear. Instead, I used my mothering experience. I listened as they said: "It's dark in here. I'm scared." I would enter their space and gently turn on the light. We would then, together, explore what triggered the fear. What was the body responding to that caused it to send the brain the message, "Danger!?" Was it a shadow on the wall? Or was a person actually in the room? In the early days after 9/11, it was often hard to know if the client's fear response was warranted.

"Be not afraid" echoes throughout the Hebrew and Christian scriptures. However, a "because" is always added." Be not afraid, because I bring you tidings of great joy! Be not afraid, because I am with you always<sup>5</sup> Fear is acknowledged, but new information is added. There is a reason not to fear, and it becomes the most important part of the sentence. When one is told not to think of something—a pink elephant—a suggestion is made, and one thinks of the elephant. So it is with, "Don't fear." Fear has been suggested. It is pointless to say, "Don't be afraid," to someone who is already frightened or to try to talk her out of her fear. Turning on the light and "being with" helps.

#### TRANSFORMING FEAR BY MOVING THROUGH IT

In working with those suffering fear responses to acute trauma, I listened, soothed, and helped them recognize their own strengths and coping skills. I had a different relationship to fear in other situations. In therapy, I welcomed talk about fear and believed that healing come through addressing—and even making friends—with "dark emotions." Often a client's readiness to address the fears that came up in dreams or other associations was an indication that our relationship of trust had deepened. I have experienced the healing power that comes as I listen, witness, and accompany those who have the courage to face their fears and the experiences that created them. Often the journey brought them to a different place. The fear

of dying, when explored, revealed a fear of not being able to live a fulfilled life before death. Fear was transformed.

Fear is often reshaped into the action/inaction of phobias or the habits of obsessive thinking and compulsive behavior. People may turn fear into an idea or an action—supported by magical thinking. Always cycling, the habits are deeply entrenched. I have found that, before analyzing underlying fears, it is best to help people be relieved of the burden of fear producing habits. I first use behavioral cognitive methods and medication to ease underlying anxiety and interrupt the cycle. Phobias and obsessive thinking are not protective adaptations; they generate more fear. They keep people from living life fully. Alcoholism and other addictions often begin as self-medication of the fearful. Fear lies beneath violence and abuse. Sin is rooted in fear.

What can be done about fear?

#### FEAR TRANSFORMED IN FAITH COMMUNITIES

After 9/11, people flocked to their faith communities for a reason. There they would find their way to the Holy One, in whose presence they would find comfort and courage to face, and move through, their fear. Many were already members of congregations where they felt safe enough to be themselves—fears and all. They had known healing in these communities because they had been accepted. They could count on embracing and being embraced in this time of fear. They were rooted in their faith.

Two years after 9/11, I was privileged to be part of The Council of Churches of the City of New York's Care for the Caregivers Interfaith Project. Each faith group, with the help of consultants, developed a program to provide resources for their leaders, who might be suffering compassion fatigue, and to their communities that were being stretched to provide social services and counseling to their members. We also provided training in disaster preparedness—a little after the horse had left the barn!

I was a consultant to progressive Muslim and Haitian Protestant communities. I found that these communities, so different in many ways, shared the same experience: Both groups witnessed fear being transformed by faith. Prior to the Care for the Caregivers project, the Imams' Council had asked me to help them develop a training program for pastoral care and counseling, which we called Compassionate Care and Counseling. It

was clear to them that their community needed to be equal participants in the network of caregivers, but they had no tradition of formal training. Our first course was offered through Auburn Seminary in New York City. On the day of the second session, the Iraq war began. Pressure on the Muslim community had already been ratcheted up. What would happen to them now? I came to class filled with fear. I expressed my fear to the class and soon realized that I was more frightened than they. Shayk Ali said, “Dr. Kornfeld, we are where we are meant to be. Allah—his Name be praised—has met our needs. He has given us you to help us learn what we desperately need to know. We are safe. Have faith in Allah.”

I later met with fifty Haitian pastoral and laypeople to listen to their stories about the effect of 9/11 on their lives. Their community here and in Haiti had been devastated because their source of income had been diminished. Haitians in New York were supporting their families here and at home. Many of them, who were restaurant and service people, had worked and died in the Twin Towers. Others, who were taxi and car service drivers, were unemployed for months. New York Haitian families were living from hand to mouth. They could not send money home at a time when Haiti was impoverished and torn by bloody civil strife. Many in their community also had severe PTSD. Homeland trauma was reactivated.

But those at the meeting were filled with energy and purpose. They told impressive stories about how they had picked themselves up. They were now more worried about the people at home than themselves. I was moved by their resilience. Because I was facilitating this session with the help of a translator, our communication hit a snag when I asked a complex question about how they did it: what was the source of their resiliency? They began to talk at once. My translator felt he couldn't do justice to the conversation. The English speakers tried to interpret. Then I had an idea. I asked them to sing a song in their language that would express what they were saying. After a lively discussion, then a hush, they began to sing, “How Great Thou Art.” I didn't know the Creole, but the music touched my heart. God was the source of their resiliency, and they loved each other. Perfect love casts out fear.

#### NOTES

1. Margaret Kornfeld, *Cultivating Wholeness* (New York: Continuum Press, 2004).

2. The meditation was reformatted and read into the Congressional Record as my statement as the President of AAPC at a hearing that produced a report titled, "Psychological Trauma and Terrorism: Assuring that Americans Receive the Support They Need." I'm certain President Bush didn't read it. Senate Committee on Health, Education, Labor, and Pensions, *Psychological Trauma and Terrorism: Assuring that Americans Receive the Support They Need*, 107th Congress, 1st Session, 2001 (Washington, D.C.: U.S. Government Printing Office, 2002) [Hearing].

3. John 10:10, NRSV.

4. Researchers at the Center for Public Integrity have substantiated that, in the two years following 9/11, Bush, Cheney, Rice, Rumsfeld, and others made 935 false statements. Their database is available at <http://www.publicintegrity.org/WarCard>.

5. Luke 2:10. Matthew 28:13.

**Call for Essays for *Reflective Practice*, Volume 29**  
**Theme: Forming Religious Leaders In and**  
**For a Diverse World**

Every faith tradition is faced with the task of preparing leaders who are equipped to work effectively in richly diverse contexts. What are the unique challenges and possibilities about ministerial and religious formation today? How does each faith tradition enhance and impede responding positively to diversity? What does it mean for the process itself when formation occurs in a diverse or interfaith context? Beyond continuing to attend to our own social location, what must we learn about responding to religious and cultural difference in order to live and lead authentically and peaceably in diverse contexts? What present assumptions about formation need to be challenged in order that future religious leaders will be prepared to lead in changed and changing contexts? Send essays to Herbert Anderson, editor, at [handerson@plts.edu](mailto:handerson@plts.edu) by December 1, 2008.