



# VIOLENCE TRANSFORMED: POSTTRAUMATIC GROWTH IN SURVIVORS AND THEIR SOCIETIES

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**ABSTRACT.** *Violence can be a catalyst for personal and social transformation. In this review, theory and research on processes that lead to posttraumatic growth are applied to survivors of violence. Certain kinds of rumination appear to lead to revision of fundamental schemas about the self, others, and the future. Revised schemas appear to survivors as personal growth that has occurred as a result of having to cope with their trauma, and this is incorporated into a personal narrative that gives meaning to the trauma and consolidates perceptions of growth. Survivors often report positive changes in identity, philosophy, and goals. Social transformations occur when survivors tell about their experiences and take other actions that enlighten others, obtain justice, and prevent recurrences of similar events.*  
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THE DELETERIOUS EFFECTS OF violence on individuals and societies are apparent in accounts that emphasize the physical injuries of victims, the fears raised in these victims, their families, and neighbors, and the physical and social destruction that violence visits on societies (Figley & Kleber, 1995; Frieze, Hymer, & Greenberg, 1984; Kleber, Figley, & Gersons, 1995; Summerfield, 1995). The effects of violence bear great similarity to the effects of other traumatic events, but often may be more severe. These effects include fear, alienation, depression, and a general assault on a variety of schemas or cognitive frameworks that order our experience that relate to self, others, and the future (Janoff-Bulman, 1995; Norris, Kaniasty, & Thompson, 1997). Approximately one quarter to one third of victims of violence suffer from posttraumatic stress disorder (PTSD), as indicated by studies of combat veterans (Kulka et al., 1991), and crime victims (Berman, Kurtines, Silverman, & Serafini, 1996), and survivors of torture (Van Velsen, Gorst-Unsworth, & Turner, 1996). PTSD represents a long-term consequence of trauma that involves complex neurological and cognitive appraisal processes that can produce a broad spectrum of

major psychiatric syndromes, personality disorders, and psychophysiological disorders (Everly, 1995). It generally involves symptoms of reexperiencing traumatic events, avoidance and emotional numbing, and hypervigilance or arousal. It is the most common type of posttrauma mental health problem (Freedy & Donkervolt, 1995), and appears in its most complex, severe forms after prolonged, repeated trauma and threats or actual experiences of violence (Herman, 1995; Norris et al., 1997), or after experiences of severe trauma (Berman et al., 1996). Even more severe sequelae than PTSD are noted (Herman, 1995) in extreme victimization experiences, such as sexual abuse (Zlotnick, 1996) and human rights violations (Becker, 1995). The effects of violence are not necessarily related to the amount of physical harm suffered by victims (Janoff-Bulman, 1995), but the victims of violence appear to suffer greater effects than persons who experience other sorts of victimization (Norris, Kaniasty, & Thompson, 1997).

Along with these effects of violence, there are others that have been less commonly described. These include the ways violence may act as a catalyst for personal and social transformation. This article will describe the positive aftereffects of violence for victims and the societies in which they live, describe some mechanisms that may be involved in producing these benefits, and suggest how these mechanisms may be enhanced so that violence sets in motion a negative feedback system that helps to prevent the future occurrence of violence.

In order to begin to understand how positive effects of violence may be possible, it is necessary to review what is known about processes that lead to the negative effects, for it is these same processes that set in motion the positive effects, especially the emotional and cognitive processes involved in posttraumatic response. Crucial in response to trauma is the attempt to find relief from emotional distress, and to address the challenge to schemas. These are intertwined, since, according to terror management theory, high-order schemas (such as believing that good people will have good fortune) allow us to minimize our sense of vulnerability (Hamilton, Greenberg, Pyszczynski, & Cather, 1993). Without being able to rely on schemas that provide a frame of reference for self-worth, the benevolence of others, trust, safety, and meaning, life seems less understandable, more frightening, and it becomes difficult to decide how to proceed (Epstein, 1990; Janoff-Bulman, 1989, 1992; McCann & Pearlman, 1990a). Traumatic experiences often leave these schemas shattered, and years after surviving the events, people may continue to struggle with reconstructing schemas that accommodate the experience (Becker, 1995; Silver & Wortman, 1980). Satisfactory adjustment seems to be dependent on developing a way to understand the trauma and its aftermath in personal terms. For example, Holocaust survivors adjusted better if they could develop a way of understanding why they had survived while millions of others had not (Helmreich, 1992).

The understandings that people arrive at may be difficult or impossible to empirically confirm, and they may even have an illusory quality (Taylor & Brown, 1988, 1994), but they are useful if they allow the world to be comprehensible and meaningful again. A key aspect of their usefulness is that in providing understanding and meaningfulness, they reduce emotional distress. But beyond this coping success, additional changes appear to be possible. In over half of persons who have experienced traumatic events, the reconstruction of schemas produces a view of the world and related behavior that the survivor perceives as beneficial, not only in managing the trauma, but in living life more fruitfully than it was prior to the trauma (Tedeschi & Calhoun, 1995).

### CONCEPTS OF GROWTH AND TRANSFORMATION

Recently, the field of psychotraumatology has spawned a new area of study, which has been termed *posttraumatic growth* (Tedeschi, Park, & Calhoun, 1998). Posttraumatic

growth is the tendency on the part of some individuals to report important changes in perception of self, philosophy of life, and relationships with others in the aftermath of events that are considered traumatic in the extreme. Many kinds of traumas have acted as precursors for these changes. These include bereavement (Calhoun & Tedeschi, 1989–1990; Edmonds & Hooker, 1992; Hogan, Morse, & Tason, 1996; Lehman et al., 1993; Miles & Crandall, 1983; Nerken, 1993; Schwab, 1990), chronic illnesses and disabilities (Tedeschi & Calhoun, 1988; Tennen, Affleck, Urrows, Higgins, & Mendola, 1992), HIV infection (Schwartzberg, 1993), cancer (Collins, Taylor, & Skokan, 1990; Curbow, Somerfield, Baker, Wingard, & Legro, 1993), heart attacks (Laerum, Johnson, Smith, & Larsen, 1987), and coping with the medical problems of children (Abbott & Meredith, 1986; Affleck, Tennen, & Gershman, 1985). In addition, circumstances in which violence or the threat of violence plays a central role have also produced reports of posttraumatic growth: transportation accidents (Joseph, Williams, & Yule, 1993), house fires (Thompson, 1985), rape and sexual abuse (Burt & Katz, 1987; Draucker, 1992; McMillan, Zuravin, & Rideout, 1995; Silver, Boon, & Stones, 1983; Veronen & Kilpatrick, 1983), combat (Elder & Clipp, 1989; Sledge, Boydston & Rabe, 1980), and hostage-taking (Cole, 1992; Sank, 1979). It appears that no matter what the event might be that sets in motion the process of posttraumatic growth, similar personal transformations occur, and the process leading to these transformations is similar. This may be because it is not the trauma itself, but what it does to a person that sets the stage for growth. It is the struggle with the new reality in the aftermath of trauma that is crucial in determining the extent to which posttraumatic growth occurs (Tedeschi & Calhoun, 1995).

### DOMAINS OF POSTTRAUMATIC GROWTH

The growth outcomes reported by survivors of trauma vary from person to person, but tend to fall into certain categories. Given that posttraumatic growth is multidimensional, persons may report growth experiences of one sort, while not experiencing another. Different aspects of posttraumatic growth may be initiated by somewhat different kinds of traumas or social support contexts, and the routes to posttraumatic growth may involve somewhat different processes for each dimension. For example, the factors of the Posttraumatic Growth Inventory (Tedeschi & Calhoun, 1996) refer to somewhat different domains of change: Relating to Others involves primarily interpersonal behavior, New Possibilities represents a shift in goals, Personal Strength involves a change in identity, while Spiritual Change and Appreciation of Life represent change in certain aspects of the belief system (Calhoun & Tedeschi, 1998).

To account for posttraumatic growth, it is important to be able to account for how beliefs, goals, identity, and interpersonal behavior change as traumas challenge preexisting patterns in these areas. Janoff-Bulman (1992) has described the processes of posttraumatic change in fundamental beliefs. Changes in major life goals have been described by Carver and Scheier (1998), McIntosh (1996), and Rothbaum, Weisz, and Snyder (1982). McCann and Pearlman (1990a) have focused on how trauma affects identity. Interpersonal relationships and behavior are addressed by many theories of psychotherapeutic change.

In all these domains, there is an acknowledgement that existing beliefs, goals, and behavior do not work very well after the trauma has changed things, producing in the trauma survivor a culling of beliefs, goals, and behavior. A cognitive and emotional disengagement from what has been culled must then be accomplished, with a development of replacements for what has been lost. A personal narrative is then produced that incorporates life before the trauma, the struggle with the ensuing changes, and the new

way of living, and with this narrative comes changes in identity. This distressing process often involves transitory symptoms of anxiety, depression, or posttraumatic stress disorder.

## PERCEPTION OF SELF

### *Survivor Status*

Certainly in the study of crime and violence, researchers are used to referring to “victims” of violence, and there is no doubt that this is appropriate. However, it appears that an important step to posttraumatic growth is the change in perception of self as a “victim” of trauma to a “survivor” of trauma. Use of the survivor appellation is common among clinicians who work with persons who have experienced trauma because it allows for recognition of the special status and strength that may accrue to many who have experienced trauma (Calhoun & Tedeschi, 1998). But even this term has been said to carry a perjorative image (Berger, 1988).

### *Personal Strength and Vulnerability*

Literature on stress inoculation (Meichenbaum, 1985) leads to the conclusion that experiencing a stress can enhance one’s ability to face future stressors, and this seems to be recognized by trauma survivors who think that because they have survived a traumatic event they can handle other things that come their way (Aldwin, Levenson, & Spiro, 1994). Although there have been few data collected to investigate whether trauma survivors cope better than others when subsequent traumas are encountered, such a finding has been reported among flood victims (Phifer & Norris, 1989). Those who had survived a previous flood were not affected by a subsequent one, while persons who experienced flooding for the first time developed psychological symptoms. The literature on psychological resilience also provides evidence that many trauma survivors cope remarkably well (Garmezy, 1985; Rutter, 1987; Werner, 1989). Again, it is unclear whether their trauma experience is responsible for this subsequent healthy coping, but this is an attribution sometimes made by the survivors themselves. These self-perceptions may be contributions to psychological well-being (Tedeschi & Calhoun, 1995) that in turn leads to healthier coping in the face of adversity. Although these self-perceptions may be somewhat self-deceptive, they may be the hallmark of mental health (Taylor & Brown, 1988, 1994).

The perceptions of personal strength reported by survivors of trauma are often reported as a sense of increased self-reliance or self-efficacy. Much of the evidence for the link between trauma and self-efficacy comes from the literature on spousal bereavement. Older women who lose their husbands report that out of necessity they learn to do things that they had never approached before, have a stronger self-image (Lopata, 1973; Shacter, 1986; Thomas, Digiulio, & Sheehan, 1991), report more self-efficacy than when they were married (Calhoun & Tedeschi, 1989–1990; Gilbar & Dagan, 1995; Lund, Caserta, & Dimond, 1993), and express more self-efficacy than long-term married women (Arbuckle & de Vries, 1995). Self-efficacy has apparently been enhanced in persons confronted with other challenges as well, including children (Schlesinger, 1982) and adults (Wallerstein, 1986) experiencing divorce, combat experiences (Aldwin et al., 1994; Elder & Clipp, 1989; Sledge et al., 1980), and life-threatening medical problems (Andreasen & Norris, 1972; Collins et al., 1990; Curbow et al., 1993). Andreasen and Norris (1972) indicated that some burn patients stated that the reason they had experienced their trauma was to make them better persons. Eighty-three percent of a sample of persons who survived the sinking

of a cruise ship reported they felt more experienced about life (Joseph, Williams, & Rule, 1993). Sixty percent of prisoners of war (POWs) examined by Sledge et al. (1980) reported that they approached their lives wiser, more content, stronger, and more self-confident since their captivity. It appears that living through life traumas provides a great deal of information about self-reliance, affecting not only self-evaluations of competence in difficult situations but the likelihood one will choose to address difficulties in an assertive fashion. Paradoxically, some persons who recognize their greater personal strength often feel a greater vulnerability or mortality, and feel that life is more precious as a result.

## INTERPERSONAL RELATIONSHIPS

### *Self-Disclosure and Emotional Expressiveness*

The ability to be self-disclosing and expressive appears to be related to various indices of mental and physical health (Park & Stiles, 1998; Pennebaker, 1995). Although we do not know for certain if trauma survivorship directly produces these changes, people frequently report becoming closer to their spouses and having stronger marriages as a result of traumatic events, such as heart attacks (Laerum et al., 1987; Michela, 1987), bereavement (Feeley & Gottlieb, 1988; Malinak, Hoyt, & Patterson, 1979; Ponzetti, 1992), and hostage-taking (Cole, 1992; Sank, 1979).

Relationships may be enhanced by the struggle with trauma through the continuing need for discussion of the consequences of these events, leading people to be more self-disclosing than they may have been before. Although reactions of persons in the support network vary (Dakof & Taylor, 1990), self-disclosure may provide an opportunity to try out new behaviors that can then be directed at the most appropriate persons in the support network. The recognition of one's vulnerability can lead to more emotional expressiveness, willingness to accept help, and, therefore, a utilization of social supports that had previously been ignored. Part of the positive development of social relationships comes from the greater sensitivity to other people and increased efforts directed at improving relationships (Collins et al., 1990).

Experiencing strong emotions during and in the aftermath of trauma, and recognizing one's vulnerability, may be a kind of empathy training that allows a survivor to be more intimate. Often, there is a motive to share these experiences with others, and help others in similar circumstances, allowing healing and the recognition of one's strength through a downward social comparison with those who are still struggling (Wills, 1987). Such motives also can become the basis for mutual support programs (Holmes, Heckel, & Gordon, 1991), other useful community work, or even larger social movements, as discussed later.

### *A Mixture of the Positive and Negative*

Another aspect of improving relationships after traumatic events was reported by Veronen and Kilpatrick (1983) in a study of rape victims. Women who came for counseling indicated they had learned from their victimization that they must make decisions in their own best interests, including protecting themselves from abuse in their relationships. This approach to relationships also assisted these women to become better able to establish more positive and intimate relationships with some family members from whom they had been estranged. Burt and Katz (1987) found approximately 25% of rape victims reported that they had come to value themselves more and handle relationships better since being raped, although these positive changes had often taken many years to develop, and it is unclear if such

changes would have occurred in the absence of the rape experience. McMillen et al. (1995) found that women sexually abused as children reported “quite a bit” or “a lot” of benefit from this abuse, usually thinking they are better able to protect their own children from harm. However, some of the positive effects cited appear to be a development of increased suspiciousness. Acknowledgement of these negative outcomes appear to coexist with the perception of benefits. For example, almost 90% of women perceiving benefits from their early traumatic experience also said they had been harmed (McMillen et al., 1995). It appears, in fact that allowing the trauma to have an impact, rather than avoiding the distressing aspects of it, is critical for posttraumatic growth.

Positive changes in interpersonal relationships may depend on certain aspects of the traumatic experience, and, therefore, what schemas might be affected. Victimization by a trusted person probably presents a more complicated path to growth in the area of interpersonal relationships than other victimization experiences, as in crimes committed by strangers. This appears to be true, the clearer the picture becomes that the trusted person is a victimizer. Holman and Silver (1996) reported that the only factor associated with incest itself that affected long-term recovery was abuse-related violence. Such violence makes obvious the victimization that is occurring, posing a greater threat to a child’s assumptions about the benevolence of parents.

### EXISTENTIAL ISSUES

Trauma often initiates consideration of fundamental questions about life that have to do with life’s meaning, importance, and spiritual basis (Cook & Wimberley, 1983; Tedeschi & Calhoun, 1995; Yalom & Lieberman, 1991). When one’s life has been put in danger, surviving can be experienced as a second chance, and changes in how the rest of a lifetime is spent may follow. These changes have been reported among some persons who have been hostages (Sank, 1979; Simon & Blum, 1987; Strentz, 1979), as well as after other traumas. The changes include an appreciation for the essentials of life, especially interpersonal relationships and nature (Klass, 1986–1987) and that life may be short, therefore, it is foolish to waste it on things inconsequential. Ninety-four percent of the survivors of the sinking of the cruise ship *Jupiter* reported they no longer took life for granted and 71% reported they now lived each day to the fullest (Joseph et al., 1993).

#### *Spiritual Development*

Especially when traumatic events involve death, existential issues of the meaning and purpose of life and the inevitability of personal death are likely to arise (Yalom & Lieberman, 1991). Some persons are able to use their existing spiritual life or metaphysical beliefs to address these issues (Pargament, 1990; Weisner, Betzer, & Stolze, 1991), perhaps because such beliefs can accommodate so many experiences (Overcash, Calhoun, Cann, & Tedeschi, 1996). On the other hand, a “spiritual emergency” might be produced by trauma (Fahlberg, Wolfer, & Fahlberg, 1992). Spiritual beliefs may be temporarily weakened, and victims may become more cynical and less religious (Schwartzberg & Janoff-Bulman, 1991). But for some, trauma may lead to a spiritual quest (Batson, Schoenrade, & Ventis, 1993), a turning to religion as a resource (Gilbert, 1992), strengthening of religious beliefs (Andrykowski, 1992), or a religious conversion (Pargament, 1996). Pargament (1990) has shown how a strengthening of religious beliefs may lead to an increased sense of control, intimacy, and finding meaning. Recognizing meaning may allow a person to experience emotional relief and lead to a new philosophy of life that alters basic assumptions people

hold about life. These issues of meaning are also raised in the work of Janoff-Bulman on assumptive worlds and their shattering, and Taylor on what she has termed *positive illusions* (Janoff-Bulman, 1992; Taylor & Brown, 1988, 1994).

### **Wisdom**

People who have developed an appreciation of life, can relate to others successfully, cope with difficulties, and have a sense of the spiritual are often seen as wise. This wisdom appears to be available to the young as well as the old (Baltes, Staudinger, Maercker, & Smith, 1995). Evidence for trauma-producing wisdom in its aftermath is only indirect (e.g., Collins et al., 1990; Elder & Clipp, 1990; Lehman et al., 1993), and it does not appear to be an inevitable result of aging or experience (Birren & Fisher, 1990; O'Connor & Wolfe, 1991). Instead, wisdom may be dependent on an ability to take a broader perspective of events, integrating emotional as well as an intellectual understanding of experiences, creating an affirmative identity that incorporates the painful, allowing serenity despite difficult history (Lerner & Gignac, 1992). People can be enriched by pain, seeing themselves as repositories for eternal truths (Neugarten, 1977), or at least endure pain in order to witness to what they remember or have learned about life. For example, some Holocaust survivors give meaning to their survivorship by attempting "to fulfill the testament of those who perished, by hard work, devotion to their families, raising children and devotion to the state of Israel" (Robinson, Rapaport, Durst, Rapaport, Rosca, Metzger, & Zilberman, 1990, p. 314).

## **THE PROCESS OF POSTTRAUMATIC GROWTH**

The process of posttraumatic growth has not been studied to any great extent separate from posttrauma recovery. Therefore, much of what can be said about posttraumatic growth processes represents an extension of the literature on posttraumatic response along with anecdotal and clinical information from persons who have reported growth outcomes.

### **Violence and Posttraumatic Growth**

The types of growth outcomes appear to be similar among persons who have experienced a wide variety of traumatic events, and it appears that the social context, personal resources, and the ability to utilize certain personal change processes play a crucial role in the likelihood that personal transformations will occur. These aspects have been emphasized more than the characteristics of the events that set growth processes in motion (Affleck & Tennen, 1996; Calhoun & Tedeschi, 1998; Holman & Silver, 1996; Schaefer & Moos, 1998; Tedeschi & Calhoun, 1995; Tennen & Affleck, 1998). Violence per se has not been studied as a factor in posttraumatic growth, although many traumas that have been associated with posttraumatic growth have violent aspects. Violence may be a factor that affects the severity of a traumatic experience, but even this effect may vary. For example, McFarlane (1995) describes the case of a man who had been involved in a hold-up. The man was unaware of how close a bullet fired in the incident had come to striking him in the head until he saw a videotape of the bullet striking a wall near his head. His posttraumatic preoccupation focused on the video rather than his experience of the incident. Survivor ratings of severity of events have been positively related to reports of posttraumatic growth in several studies (Alvaro & McFarlane, 1997; McMillen, Smith, & Fisher, 1997; Tedeschi & Calhoun, 1996).

### ***Gradual and Abrupt Posttraumatic Growth***

The changes that occur may be gradual or abrupt, but in both cases, there is some type of shock that is necessary in order to usher in future changes. Calhoun (1996) describes a “seismic” event that shakes the foundations of existing beliefs and patterns of living. This event has to be strong enough to do the job. For example, POWs who reported the most extreme physical and psychological distress in captivity and the most difficulty after release, also reported benefits, while POWs who endured less difficult circumstances did not (Sledge et al., 1980). Traumas may set in motion changes that are amplified by a feedback loop until stress becomes great enough to force transformative changes (Aldwin, 1994). Carver and Scheier (1998) make a similar point in applying catastrophe theory to personal change. Whether the shock of trauma initiates a period of rapid conversion to a different way of living, or a more reflective, ruminative process may depend on the degree to which survivors had experienced some sense of personal control over their lives before the trauma. Miller and C’deBaca (1994) found that abrupt transformative changes are more likely to happen in persons without much sense of control over their lives and who were at a low point. “Conversion delivers one from chaos” (Lifton, 1993, p. 171). A willingness to give up has been noted among persons who undergo religious conversions and similar transformations (Pargament, 1996).

There is some evidence that growth may be more likely for those who find it rapidly (Finkel, 1975) than those who are still engaged in a search for meaning many years later (Silver et al., 1983; Tait & Silver, 1989), but most persons appear to need a period of a few weeks up to a year or two to appreciate some posttraumatic growth. There do appear to be cases of what might be termed *delayed* recovery, however. Burt and Katz (1987) describe rape survivors who began a processing of the rape again, after some event broke down avoidance patterns in place for years. It is unclear to what extent these persons were able to enter a growth phase, but generally, these authors report no relationship between time after trauma and growth.

### ***Chronic and Acute Trauma***

Persons experiencing such chronic trauma as concentration camps, continuing sexual abuse, and chronic illnesses have reported posttraumatic growth. People in other circumstances experience the trauma in a relatively brief time frame. There are a few traumas where everything apparently returns to “normal: afterward, for example, being taken hostage or surviving another random criminal act. But even these survivors can have a sense of perpetuated trauma through rumination about it, although the event is “over.” But, for posttraumatic growth to develop, it may be necessary for some relief to occur from the direct confrontation with the trauma and the accompanying extreme distress, since continuing extreme levels of distress may be an impediment to growth in most persons. This corresponds to the findings that pervasive and persistent victimization is related to poorer psychological adjustment in general (Norris et al., 1997). A sense of looking back, reflection from a safe distance, provides the best opportunity for growth, probably because cognitive processes can be more constructively devoted to the development of growth when they are not disrupted by so much distress.

### ***Cognitive Styles***

Why some persons convert their despair into growth rather than suicide may in turn depend on certain cognitive styles. Persons who successfully use the aftermath of trauma process information in a way that allows them to develop creative solutions to problems.



One personal characteristic that can be considered a cognitive style related to the processing of “trauma information” is hopefulness, an ability to remain open to the pain and to its eventual possibilities, being willing to rethink the experience, so that there is an “active surrendering” to it (Farran, Herth, & Popovich, 1995). Hope involves flexibility, activity, and openness.

Another way to think about this tendency is in reference to the Big Five personality factors of openness to experience and extraversion that have been shown to be related to posttraumatic growth (Tedeschi & Calhoun, 1996). Generally, people who have an open, complex cognitive style, enabling them to actively try new things, or new perspectives (extraversion, openness to experience), and an ability to be open to and tolerant of feelings (openness to experience) are better suited to handle trauma in a way that allows it to become transformative. Finke and Bettel (1996) have similarly described “chaotic thinkers,” who see life as inherently complex and chaotic, and can thrive in this chaos. These people are also comfortable with incubation periods that allow the structure of situations to emerge, so they may be more likely to experience posttraumatic growth in a gradual way rather than saving themselves from distress and misery through a rapid transformation. Much of this has also been described as creativity, in persons who are inquisitive, imaginative, suspend judgment, let go of the conventional ways of viewing the world (Sternberg, 1985), autonomous, information-seeking, willing to take reasonable risks, and self-confident (Strickland, 1989). People who are able to put their insights into action (the extraverted approach) may then represent those who are likely to report posttraumatic growth.

The foregoing suggests a paradox: those who are in greatest despair and who have felt most out of control are prone to transformative experiences, while persons who are open to experience, hopeful, extraverted, and creative make the most out of trauma. Although none of this has been tested to any great degree, it may be that the pathways to rapid transformation and gradual transformation are traveled by different kinds of people. Also, Tedeschi and Calhoun (1995) suggest that those who experience transformation have a modicum of mental health so that they are not destroyed by trauma, but are not so well-adjusted that the struggle with trauma has nothing to teach them.

### ***Processing a Trauma Into Growth***

Given the wide variety of events that has been reported to lead to posttraumatic growth, what all these events have in common is that they severely shake or destroy key elements of the individual’s important goals and world view, producing great emotional distress, rumination, and distress-reduction coping mechanisms. Personal identity may change as people account for what has happened to them, often referring to the time before and the time after the trauma as dividing their lives in two. The struggle with the trauma and the changes it has wrought is the source of subsequent positive change, not the events themselves, so it cannot be suggested that violent acts and other traumas are “good” for people.

Cognitive processing of trauma is crucial, especially in cases of gradual posttraumatic growth. It is unclear how much processing takes place in abrupt life conversions, although much may occur subsequent to the conversion in accounting for how it occurred, and settling on a new identity. Cognitive processing has often been seen as quite useful or even necessary by those working in the field of bereavement (Stroebe, van den Bout, & Schut, 1994). In the trauma field, avoidant coping has been seen as a sign of failure to adapt (Rachman, 1980) and as a normal part of adaptation after trauma (Horowitz, 1976). However, cognitive and emotional processing of trauma, when it involves intrusive thoughts, has been linked to poor outcome (McFarlane, 1992). It has been suggested that

intrusive thoughts in the form of flashbacks may be unrelated to outcome, while rumination is more crucial (Joseph, Williams, & Yule, 1995). Openness to consideration of the trauma, indicated by initial high levels of intrusive thoughts (Creamer, Burgess, & Pattison, 1992), followed by forms of rumination that lead to attributions of self-worth and control may be linked with good outcomes (Joseph, Dalgleish, Thrasher, Yule, Williams, & Hodgkinson, 1996).

### ***Disengagement***

Constructive cognitive processing, a particular form of rumination that leads to posttraumatic growth, seems to involve finding meaning in the trauma and its aftermath, and noticing changes in the self. A first step is a recognition that important goals have been blocked because of the trauma, and that beliefs about how the world functions and the meaning of life no longer seem so clear (Horowitz, 1986). These fundamental schemas, or higher-order goals and beliefs, provide a general framework for life activity and create a sense of stability and predictability in life (Baumeister, 1991). This “assumptive world” is shattered by trauma (Janoff-Bulman, 1992). These beliefs include assumptions about physical safety, the benevolence of the world, etc., and may be most clearly challenged by crime and other experiences of violence. For posttraumatic growth to take place, something has to replace the goals and beliefs that have been put aside through disengagement processes in the aftermath of trauma. The disengagement is usually a struggle, because what is being given up is so fundamental or important, and it may not be clear that such a disengagement is necessary. Carver and Scheier (1998) point out that a crucial life skill is the ability to determine when persistence or disengagement is appropriate. This disengagement should not be confused with disengagement coping, which has strong avoidance tendencies (Tobin, Holroyd, Reynolds, & Wigal, 1989).

This disengagement has sometimes been described as “grief work,” and it happens not only in bereavement but after many traumas, since there is often a sense of loss of something precious, if intangible, including a goal, a view of the world, or part of one’s identity. After some period of successful coping, when distress usually, but not always (Wortman & Silver, 1989), has become manageable, what has happened has been comprehended, and new goals have been developed, more attention can be paid to restoration and growth-oriented grief-work (Stroebe & Schut, 1996). In this phase, participants may report greater emotional serenity (but not necessarily an absence of psychological distress) together with an increased appreciation for life, and a quiet strength that can come from a recognition that the self is strong yet vulnerable.

***Blame.*** The disengagement process may be made difficult by blame. Violent acts committed by others can be expected to arouse questions of blame and perhaps revenge. Some have argued that resolution of such events is easier for persons who accept blame rather than blame others (Downey, Silver, & Wortman, 1990; Tennen & Affleck, 1990) because blaming others indicates a sense of helplessness (Abrahamson, Metalsky, & Alloy, 1989). Specifically, blaming an event on one’s own choice or behavior, or “behavioral self-blame” rather than oneself in a global sense (“characterological self-blame”) (Janoff-Bulman, 1979) produces better outcomes in cases when traumas are avoidable (Brewin, 1984). The ability to make attributions that are less global might be related to self-complexity, which is in turn a characteristic that promotes better trauma recovery (Linville, 1985, 1987; Morgan & Janoff-Bulman, 1994; Showers, 1992; Showers & Ryff, 1996).

However, there is evidence that any kind of self-blame is an obstacle to adaptation in trauma survivors (Kubany, Abueg, Kilauano, Manke, & Kaplan, 1997), and continuing

to focus on blaming others or seeing oneself as essentially at fault or guilty is likely a sticking point in the post-trauma process that leads to growth. On the other hand, being able to see avenues toward prevention of future trauma for oneself or others allows for the possibility of choice, action, and growth. For example, survivors of rape (Downey et al., 1990) and incest (Silver et al., 1983) who focus on the question of why the sexual assaults occurred do more poorly over the long term, but those who focus on the future and develop a sense of control do well (Frazier, Harlow, Schauben, & Byrne, 1993). Furthermore, these approaches to coping may be related to posttraumatic growth, since almost two thirds of rape survivors not only improve but report positive changes as a result of the assault a few months later (Frazier & Burnett, 1994). Transforming blame into forgiveness may promote growth (Kottler, 1994).

### ***Automatic and Effortful Rumination***

Initial distress, rumination, and disengagement are all critical elements associated with growth in the aftermath of trauma. Higher levels of initial distress and rumination will likely produce higher degrees of growth later on, and this is particularly true for individuals who have lower levels of rumination at later time periods. The distress precipitated by the loss, together with the higher levels of rumination, are expected to lead to more energetic attempts at coping to reduce distress and rumination, thus laying the groundwork for subsequent growth. The opportunity for posttraumatic growth is likely to be greater for individuals who experience the highest levels of rumination, because this allows the possibility for a revision of schemas in a way that makes the perception of positive change more likely. Disengagement from old beliefs and goals allows for more deliberate processing of trauma and less automatic, intrusive elements. This more deliberate processing includes the active surrender described above, and consideration of alternative beliefs and goals. The more emotionally laden, automatic, and intrusive process of rumination immediately after trauma represents an expected and necessary response to the shattering of schemas, and sets the stage for later, more constructive information-processing (Greenberg, 1995). If this automatic rumination persists over extended periods of time, this is likely an indication of failure to manage emotional distress, and the level of growth is likely to be lower (McIntosh, Silver, & Wortman, 1993). Therefore, posttraumatic growth is most likely when there is an initial automatic ruminative process followed later by a more deliberative one that constructs the revised schemas. These schemas are then evaluated as growth by the person as he develops a story of what has happened, and an identity as a survivor with a deeper understanding of how to live. This sequence incorporates both affective and intellectual elements of learning from trauma and its aftermath.

### ***Narrative and Identity Development***

The individual's active construction of traumatic events can produce a significant revision of the life narrative (McAdams, 1993; Weber & Harvey, 1994), or even a first reflection on the life being lived. The trauma and its aftermath usually is a demarcation in this narrative, when the old life was destroyed and, in its rubble, a new one was built. The various domains of posttraumatic growth may be part of the new structure. Since a comparison and contrast between the life before and the life after is useful in promoting growth, it is important to remember and tell as much as possible of the story. This is seen as a crucial "integration" of past and present in both psychoanalytic (Kestenberg, 1993) and cognitive/constructivist models (Neimeyer & Stewart, 1996). Telling the story of the trauma may bring into focus different aspects of the self not clearly considered before

(Showers & Ryff, 1996), producing an elaborated identity. This new identity allows for new goals and a “generativity script” that involves a plan that leaves a useful legacy (McAdams, 1989). Then the trauma comes to have meaning as a catalyst for the creation of this way of living that has a deeper significance. The creation of a life narrative allows all this to be seen more clearly.

### VIOLENCE AND POSTTRAUMATIC GROWTH IN CHILDREN

Violence appears to be a powerful factor in producing distress among children of incest (Holman & Silver, 1996), child Holocaust survivors (Krell, 1993), and children of inner cities (Berman et al., 1996). Severity of violence may be most crucial (Berman et al. 1996). However, in studying children it must be remembered that belief systems and understandings of life circumstances are poorly formed, so that the actions of others might be misinterpreted (Krell, 1993). Because children are faced with trauma without well-developed schemas, posttraumatic growth may not be possible as it is in adults. There is little work on posttraumatic growth in children, although the large literature on childhood resilience does make clear that some children can navigate terrific trauma, and that this may be age-related, with preschool children most able to overcome its effects, preadolescents most vulnerable, and adolescents intermediate (Duncan, 1996). But resistance to effects of trauma is different from growth in its aftermath, and the few reports of older children and adolescents demonstrating growth need further verification. It appears that what evidence that exists comes from studies of children experiencing parental loss, economic hardship, illness, or parental emotional problems, resulting in higher achievement motivation (Albert, 1983; Elder & Clipps, 1974), mastery (Murphy & Moriarity, 1976), and self-knowledge (Beardslee, 1989; Fritz, Williams, & Amylon, 1988). So far, violence seems to predict poor outcomes rather than growth outcomes in children, especially if the social fabric is torn, and parental responses are inadequate (Bat-Zion & Levy-Shiff, 1993; Garbarino & Kostelny, 1993). But if parental physical and mental health are sound, children can do surprisingly well even in the face of terrorism (Miller, 1996). However, there has not, to date, been an attempt in studies of child victims of violence to consider the possibilities of growth.

### SOCIAL TRANSFORMATIONS OF VIOLENCE

War, terrorism, and other acts of violence that have widespread effects produce social as well as individual trauma. Simpson (1995) describes the way the system of South African apartheid continues to perpetuate torture even in the time of liberation from the old system. Brendler (1995) recounts the struggles of German youth 50 years after the war as they come to terms with the Holocaust; 70% have problems identifying positively with their nationality; 41% report feelings of guilt, although they were not born at the time of the crimes. Guiao (1995) suggests that Filipinos have developed a “protective” culture to cope with years of political repression.

However, there is evidence of positive developments within many social systems in the aftermath of violence. The transformation of Japan from a militaristic to a pacifistic society in the aftermath of World War II is an example. Smaller social changes are also evident: the changes in drunken driving laws in the United States after consciousness-raising by bereaved parents in the organization Mothers Against Drunk Driving. Bloom (1998) has described how these transformations occur through a number of activities that change

values, inspire, organize, and spur action in the larger social system: education and prevention; mutual self-help; rescuing; witnessing and seeking justice; political action; humor; and artistic creation. These categories are not mutually exclusive but highlight the ways individuals or groups can promote sometimes massive social change as a result of confronting political or social violence.

## THE COINCIDENCE OF PERSONAL AND SOCIAL TRANSFORMATION

### *The Role of Leaders*

The mechanisms by which these social transformations occur often seem to rely on transformations in individuals. Bloom (1998) sees an interaction between inspirational leaders and groups. Lifton (1993) describes a “protean self” that seems to have its greatest expression in a “species mentality,” an ability to understand one’s own experience of suffering in communion with the suffering of others. These persons are most likely to be the leaders that push social transformations. Either an individual’s experience with trauma galvanizes a group, or group experience of trauma is mediated by an inspirational leader. Either way, it appears that strong leadership is important, and that a moral commitment is involved. Self-interest is willingly risked in an attempt to make sense out of otherwise senseless acts of violence. Bloom (1998) describes this as a moral necessity, crucial for social advancement.

***The credibility of the trauma survivor.*** Bit (1991) describes the “ascendant personality” that emerged during the depths of the Cambodian trauma of Khmer Rouge rule. He mentions a Cambodian proverb that urges people to follow the “curved path,” characterized by inner strength, flexibility, and creativity in service of survival when life is reduced to its basic elements. Although inspirational leaders may believe it is possible to make the best of adversity, there is a clear scepticism that allowed survival in Cambodia. For social as well as personal transformation to occur, a balance exists between possibilities of a future that one can control and a clear-headed recognition of the reality of violence. Gandhi was determined to face suffering in this way, to be neither a player or counterplayer to the existing system (Lifton, 1993). Perhaps a less sanguine terminology applied to social transformation is *positive revenge* (Garbarino, Dubrow, Kostelny, & Pardo, 1992), used to describe the commitment to positive change shown by some survivors of the Cambodian killing fields. It is noteworthy that those who took on this approach experienced some concomitant emotional healing. However, this same positive revenge is in evidence when adopting fanatical ideology in ethnic conflicts among those who believe they are on the “right” side in the conflict.

***Mutual leadership.*** A mutual interplay of influence between individuals and groups is also seen in the working of support groups. One of the most important sources of new goals and beliefs may be veterans of similar traumas who model ways that life might be satisfying, even improved in the new circumstances. At the same time, members of such groups come to recognize their own special status and credibility provided by their survivorship. Although the mutual support group may initially benefit its members most, the process can transform these members into powerful witnesses for a group of persons in a society, creating a new community morality (Wuthnow, 1994). Vietnam veterans groups (Brende & Parson, 1985; Shay, 1994), Mothers Against Drunk Driving (Prescott, 1995) and the Grandmothers of the Plaza de Mayo (Bloom, 1998) provide examples of this.

### TELLING THE STORY

Witnessing and education (Bloom, 1998) involve keeping alive an horrific tale, personal and collective, that the larger group may have attempted to deny (Brendler, 1995). Some survivors of trauma may witness as an attempt to assuage survivor guilt (Brende & Parson, 1985), some in order to prevent a reoccurrence of a similar episode, but the effects on society may be powerful whatever the motivations of individuals involved. To tell such stories may require long periods of posttraumatic avoidance (Davidson, 1992; Elliot, 1997), and special initiatives on the part of others. For example, Krell (1993) describes the positive personal effects for Holocaust survivors of telling stories they had essentially hidden for 40 years. As a result of his research with them, several became Holocaust educators.

There are other ways to witness: the erection of monuments, memorials, and observing rituals. Although some of these approaches to healing were originally devised for the persons directly affected by the trauma, they may become meaningful for others in society, some long-removed from the trauma itself. This indicates that a trauma has had an important impact on the social fabric, creating an enduring need to revisit, heal, and learn from it. Ground zero in Hiroshima, the Anne Frank House in Amsterdam, the Vietnam Veterans Memorial in Washington are powerful reminders of the suffering that violence produces. These reminders are maintained because they are needed for individual healing, but they may also help prevent similar societal mistakes from being repeated. They also enable a construction of the narrative that gives traumatic events meaning (Catherall, 1992; Kleber, 1995).

Telling the story produces social transformations through the effect of the story on others who did not directly experience the trauma. In this way, posttraumatic growth may be vicarious, just as traumatization may be vicarious (McCann & Pearlman, 1990b). Those experiencing vicarious posttraumatic growth may then be enlisted in the struggle for social change, as their consciousness has been raised through the witnessing of the survivors.

#### *Telling the Story with a Twist: Art and Humor*

Artistic depictions of trauma can have a healing and educational function through memorials, reenactments, and ceremony, and can affect social consciousness through the impact of symbols. Art also can be a vehicle for social criticism that provokes crucial changes in values, and ultimately, social systems. Bloom (1998) cites a few of the "seemingly endless" artists who were influenced by trauma and whose subsequent work was a personal testimony and an important social influence: Camus, Dostoevsky, Beckett, Picasso, and Havel. She also provides an account of a program in Philadelphia that recruited graffiti artists to paint public murals, thereby reducing graffiti, providing public art and memorials to those touched by violence, and rescuing some young people from a life of crime. Davidson (1992) describes the role of creativity in the transformation of the Holocaust experience by survivors, and Lifton (1993) describes contemporary artists' use of the Holocaust experience in startling ways to extend it and universalize it.

Another creative device used in the face of trauma is humor. It can be used to assist coping even under the most horrific circumstances, such as the Cambodian killing fields (Bit, 1991). Humor can also be a powerful tool of social change, revealing the absurdities and weaknesses of social systems (Bloom, 1998). Comedy is often a subversive activity, and the repressive reactions of totalitarian systems to it is an indication of its power (Jenkins, 1994).

### ***The Social Narrative***

There are similarities in the function of the social narrative and the individual narrative of trauma. Critical social change events are demarcations in the life of societies, just as traumatic events can be for individuals. Time becomes separated into pre-trauma time and post-trauma time. Losses and gains are apparent in comparing the times. Wars are often demarcations: for Americans, pre- and post-Civil War; pre- and post-World War II; and pre- and post-Vietnam. Something was shattered in each case, but out of the trauma, crucial lessons were learned that still echo in the social consciousness: the importance of national unity, preparedness, and morality.

Creating this narrative also tends to create controversy about the historical record, responsibility for trauma, and what is to be learned from it. The existing historical record might be rejected in light of new information that trauma brings (Lifton, 1993). The Nuremberg Trials and the South African Truth and Reconciliation Commission represent formal attempts to write the story of violent episodes. An attempt to mark the 50th anniversary of the dropping of the atomic bombs provoked such an outcry that the planned exhibit was scrapped. Out of such controversies come the social equivalent to the schema change in individuals discussed previously. There is a mutual influence between the schema changes of the individuals and large segments of a society, so that social changes are not possible without the crucial changes in understanding trauma that occur at the individual level. It should be evident that much pain and investment in particular viewpoints must be overcome in order to achieve benefits from the social trauma. There is some evidence that older adolescents may be most able to utilize the changes wrought by social upheaval, perhaps because they are at a time when schema development is at a critical period in terms of evaluation of social institutions (Garbarino & Kostelny, 1993). Just as in the individual, the trauma lives on, and only with the ability to disengage enough from the violence of the past is it possible to accomplish the transformations. But this is difficult even for the post-trauma generations, indicating that there is indeed a social memory (Brendler, 1995), although its affects may sometimes be overstated (Berger, 1988). These social transformations of violence are imperative if we accept the assertion that a society that damages some of its members damages all, and that this damage is at the root of the perpetuation of violence (Coudrogrou, 1996; Staub, 1993).

### **ENCOURAGING GROWTH IN SURVIVORS OF VIOLENCE**

The descriptions given here of the processes of posttraumatic growth suggest some potentially useful ways to encourage such processes. However, such suggestions are purely speculative, as there is no research on intervention strategies for posttraumatic growth. The following suggestions come from Tedeschi and Calhoun (1995), who have produced the only discussion of this issue. In each, the common assumption is that the survivor has found a way to tell the story, perhaps with the aid of some of the intervention techniques for trauma survivors that have been well-described in the literature (e.g., Herman, 1992; McCann & Pearlman, 1990a). Interventions in posttraumatic growth build upon this so that the survivor can use the experience of violence and its aftermath to inform self and others. The story of this period may be retold many times, and the process of growth can become evident in how it is retold in altered form over time.

A first consideration is whether the individual is ready to entertain the idea that benefits can accrue in the aftermath of a trauma. Survivors of violence will likely have to grapple with issues of blame, revenge, and forgiveness in order to make headway toward growth.

Some successful coping must have allowed the survivor to relieve emotional distress and intrusive ruminations, and they must be engaged in the effortful aspects of the ruminative process, showing that they are actively searching for ways to comprehend the trauma and its aftermath. This is fertile ground for growth.

Another consideration is the credibility of the person making the intervention. As mentioned above, other survivors of trauma probably carry most weight, since they have "been there." Mutual-help support groups are particularly powerful in providing a place to meet these credible others, especially if there are veterans of trauma attending. Some of the same effect might be derived from bibliotherapy (e.g., Borysenko, 1993; Cole, 1992; Frankl, 1963; Gallmann, 1991; Helmreich, 1992; Kubler-Ross, 1997; Kushner, 1981; Lauer & Lauer, 1988; Lewis, 1963; Lifton, 1993; Neeld, 1990; Price, 1994; Schmookler, 1997; Slaby, 1989; Viorst, 1986; Wolin & Wolin, 1993). Tedeschi and Calhoun (1995) review a number of these accounts of finding benefit in adversity. However, it is important within the context of support groups, bibliotherapy, etc. to recognize that no two persons' experiences of an event are identical, or even similar. Davidson (1992) points out that the Holocaust encompasses many different individual experiences. The same has been said about the Vietnam War (Shay, 1994), and this is obviously true of all traumas to some extent. Therefore, the listener must appreciate both the universal and the unique in the trauma, and what has been gained from it.

It is also important to highlight an individual's own attempts to create growth, even when they can not yet see these attempts for what they are. Paying attention to the developing belief system of the survivor, not foreclosing on this development, but maintaining an open, hopeful stance about what this person may learn, is also important. This will demand an understanding on the part of all parties that the process of growth is often gradual.

Persons who are attempting to help in this process must not only be patient, but be able to appreciate the paradoxes that survivors of trauma see in their situation. Survivors will also struggle to find words to explain their experiences in the time following trauma, since these experiences have great emotional impact, and usher the survivor into unfamiliar areas that previously existing schemas may not account for. The ability to suggest ways to express this experience can be useful in recognizing the benefits of it.

One of the ways to give meaning to trauma is through social and political action. There is dual benefit to this. The individual transforms the traumatic experience into a basis for a generativity script, and society benefits from the telling of the story. Social transformations of violence, like individual ones, are first based on telling the story. This is a consciousness-raising that allows the past to become a resource (Davidson, 1992) and sets the stage for action against repetition of trauma. In all the descriptions of social transformation of trauma offered by Bloom (1998), a common theme is the survivors telling stories that eventually overcome apathy, disbelief, threat, and social systems resistant to change. In this way, the survivors of violence can become the most powerful members of their societies.

## CONCLUSIONS

There are many issues that remain to be addressed in understanding the phenomenon of posttraumatic growth. Foremost are issues of validity. Are the reports of survivors of trauma who claims benefits to be taken at face value? Taylor and Brown (1988, 1994) suggest that what people actually benefit from are self-enhancing illusions. To date, self-reports of growth by survivors have not correlated highly with the reports of those who



know them (Alvaro & McFarland, 1997; Park, Cohen, & Murch, 1996). But indications that persons who report growth also report negative effects (Tedeschi & Calhoun, 1996) call into question the stance that posttraumatic growth is purely illusory. And a recent report by McMillen et al. (1997) cannot be easily explained by simply questioning the validity of survivors' perceptions of growth. They reported that among persons surviving a plane crash, mass shooting, or tornado, that perceptions of benefits moderated the relationship between severity of trauma and mental health problems. Among survivors perceiving benefits, trauma exposure recovery was related to increasing severity of the trauma experience, while those who did not perceive benefits fared more poorly with increasing severity of trauma.

Another issue to be further explored is the affect of perceiving the benefits. Do these perceptions result in better adjustment and healthier living? The answer may have a lot to do with pretrauma levels of adjustment (Park, 1998; Tedeschi & Calhoun, 1995). Associated with this is the question of what kinds of people are likely to experience growth. A good beginning has been made on linking personality and posttraumatic growth, but there are different ways to consider this issue. Tennen and Affleck (1998) suggest examining the relationship by going beyond the trait approach to a more contextual approach that focuses on the life narrative and identity. This seems to be clearly relevant, given the ways survivors describe their experiences of growth as changing life paths and perceptions of self.

Then there are the situational variables. In this article, the focus has been on posttraumatic growth in the wake of violence. The particular role of violence and other situational variables is important to consider, but cannot be separated from the experiential. The literature on stress and coping has clearly established the importance of appraisals and these almost certainly continue to play a role in the development of growth in the aftermath of trauma in the context of family and community (Schaefer & Moos, 1998).

It will be useful for researchers in the area of violence and trauma to routinely consider measuring posttraumatic growth outcomes as well as the usual negative outcomes in their studies of survivors. This will begin to provide the data we need to more completely understand the farther reaches of recovery, and more accurately portray the experiences of those whose wounds have been evident, but whose wisdom and contributions to social change have too often gone unrecognized.

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