

**Facilitating
Posttraumatic Growth**

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What Makes Events Traumatic?

- Sudden, unexpected, or unusual
- Often involve physical harm, or *perceived life-threat*
- Experience of lack of control
- Blame is an element
- Certain stages of development make a person more vulnerable
 - Childhood trauma
 - The late teens and early twenties

DSM-IV definition

- **DSM-IV describes traumatic stressors as involving**
 - direct personal experience of an event that involves actual or threatened death or serious injury, or other threat to one's physical integrity;
 - or witnessing an event that involves death, injury, or a threat to the physical integrity of another person;
 - or learning about unexpected or violent death, serious harm, or threat of death or injury experienced by a family member or other close associate.

- **Being exposed to traumatic events also places one at somewhat increased risk for psychiatric disorders other than PTSD.**
- **However, the majority of persons exposed even to the most catastrophic events tend not to develop stress related disorders.**

Individual Responses and Diagnoses

- **Much individual variability, due to**
 - **genetic factors**
 - **traits, coping skills, prior illness**
 - **available social supports**
 - **Time since precipitating event(s).**
- **Reactions may be transitory and adaptive and some may develop into psychiatric disorders.**

Who will need help the most?

- **People who**
 - **are isolated without respite from work, family, and social demands**
 - **have additional family or financial stressors and burdens**
 - **have few secure and reliable outlets for unburdening their experiences**
 - **receive little or no validation following trauma**

Standard Trauma Intervention

- **Specific interventions include**
 - ***Education about post-traumatic stress reactions.***
 - ***Training in coping skills.***
 - ***Exposure therapy.***
 - ***Cognitive restructuring/processing.***
 - ***Family counseling.***

Standard Trauma Intervention

- **Medications? (See Schoenfeld, Marmar & Neylan 2004 for a review)**
 - **SSRIs, antipsychotics (e.g. Risperdal, Zyprexa) and Adrenergic inhibitors (Prazosin) for all 3 PTSD symptoms clusters (re-experiencing, avoidance/numbing, hyperarousal)**
 - **Tricyclics for re-experiencing, hyperarousal**
 - **Anticonvulsants & mood stabilizers (e.g. Lamictal) for re-experiencing**

PTG in Support Group Interventions

- **Support groups--Psychoeducational (Antoni, et al., 2001) & Electronic (Lieberman, et al., 2003) produced reports of PTG in participants.**
- **Participants in psychoeducational group interventions for wives of men with prostate cancer were more likely to report PTG. (Manne et. al, 2004).**

PTG in CBT

- **Traffic accident survivors were randomly assigned to treatment or waiting list control conditions.**
- **individual CBT with imaginal exposure, cognitive restructuring, traffic related *in vivo* exposure homework, and progressive muscle relaxation training.**
- **The therapy program did not explicitly address personal growth.**
- **PTGI measured before, after, and several months posttreatment (Zollner, Karl, & Maercker, 2004)**

- **At the beginning of treatment, PTG was best predicted by concurrent intrusion level and openness to experience.**
- **At the end of successful treatment PTG was predicted only by openness to experience and PTSD severity at the beginning of treatment.**

- **Gains in overall PTG from pre- to posttest were positively associated with reduction of PTSD severity.**
- **Reduction of PTSD severity related to “new possibilities” and “personal strength.”**

PTG & Exposure therapy

- **80 mixed trauma PTSD patients: PTG negatively related to PTSD**
- **65 completed prolonged exposure therapy:**
 - **PTG NP & PS increased; related to decrease in PTSD**
 - **Pre Tx PTG AP related to better Tx outcome, controlling for PTSD (Hagenaars & van Minnen, 2010)**

Expert Companionship

- **A Model for working with the traumatized and bereaved.**
- **See Tedeschi & Calhoun, 2004, *Helping Bereaved Parents*.**
- **Calhoun & Tedeschi, 2006, *Handbook of Posttraumatic Growth*.**

We got up the next morning and went to them. And it was really strange from the standpoint that I thought that I should have some great words of wisdom here. I've been there, I should know something.

And I found myself sitting there thinking I have no clue, as most people do not have a clue, who want to say something to somebody in a similar situation.

And if I could tell anybody anything if they are faced with a friend who is going through this, all you can do is say 'yeah I'm here, if you talk, we'll talk, if you don't, we won't.' That's all you can do, you can not take that pain from another person.

Why "Expert Companion?"

- **Reasons to downplay expertise:**
 - **Every trauma and death is different.**
 - **People are experts on their own experience.**
 - **Cultural differences are important in trauma and grief.**
 - **Your humanity is crucial.**
 - **It takes the pressure off of you.**

Who is the “Expert Companion?”

- A person who listens to the worst.
- A person who learns from the client.
- A person who tolerates the “craziness.”
- A person who is there for the long haul.

Practice humility, and a new way of listening...

- Focus on listening, without necessarily trying to solve.
- Listen in a way that allows change in yourself, rather than being intent on doing the changing.

Why an “Expert Companion?”

- High quality interactions.
- A knowledge base about trauma and grief.
- Realizes he or she doesn’t have many answers.
- No platitudes.
- Others may not be there for the long haul.
- Pass on what has been learned by others.

The Combination: Expert Companions

- **Companionship:**
 - Sensitive
 - Courageous
 - Accepting
 - Aware of limits and ambiguity in the face of questions of life and death
- **Expertise:** Based on *research on trauma and grief and the teachings of the clients.*

Expertise and Myths

- There may not be “closure.”
- Those suffering loss continue to be attached.
- Look for alternatives to talk, other ways of expression.
- Action sometimes is a proxy for talk, especially in men.
- Trauma survivors often must re-understand everything, and this can lead to *Posttraumatic Growth*.

PTSD Recipe

- 1. Thinking with a “victim” theme, undermining core beliefs.
- 2. Brooding, counterfactual thinking, upward social comparisons, blaming
- 3. Pining for the past.
- 4. Searching for “meaning,” with “why” questions, and absence of any resolution.
- 5. Avoidant and safety behaviors, delaying help-seeking, failing to share.
- 6. A story that is fragmented, poorly elaborated.

Assessing PTG: PTGI variations

- **PTGI-C: A 21 item inventory with revised wording and response format suitable for children.**
- **PTGI-C-R: A 10-item inventory based on original PTGI-C.**

Assessing PTG: PTGI variations

- **PTGI-42: Separate scales for positive and negative changes in the same content areas**
- **PTGI-SF: 10 item PTGI short form**

**PTG Facilitation Recipe:
Therapy Orientation**

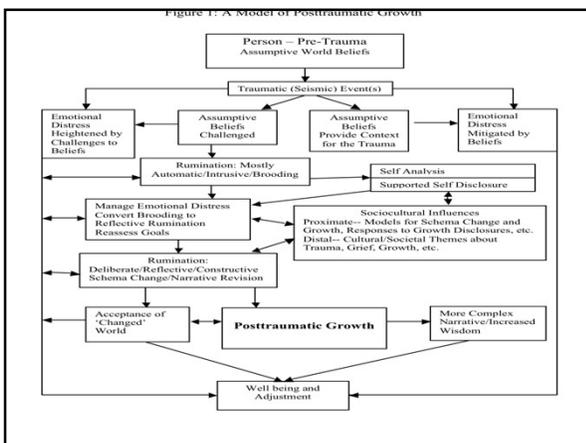
- *Constructivist,*
- *Narrative,*
- *Cognitive,*
- *Existentialist*
- *(integrative!) approach*

**PTG Recipe:
Activities for Survivors**

- **1. Seeking, finding, reminding, and constructing benefits for oneself and others.**
- **2. Establishing and maintaining a future orientation with altered priorities.**
- **3. Constructing meaning.**
- **4. Coherent narrative, “missions” that transform loss into something good.**

**PTG Recipe:
Expert Companion’s Talk**

- **Notice evolving domains of growth**
 - *“I’ve noticed something in you that you tend to overlook in yourself.”*
 - *Past crises may illustrate strengths.*
 - *“Is it possible for the future to be better in any way?”*
 - **Refer to growth caused by the individual’s struggle to survive and come to terms.**
- **Relate through survivor’s worldview. Accept apparent ‘illusions’ as useful.**



Posttraumatic Growth Inventory

- Empirically derived domains: **New Possibilities, Relating to Others, Personal Strength, Appreciation of Life, Spiritual Change.**
- CFA N=926: 5 first order factors, 1 second order. (Taku, Cann, Calhoun & Tedeschi, 2008)

Relating to Others

- 6. I more clearly see that I can count on people in times of trouble. (I)
- 8. I have a greater sense of closeness with others. (I)
- 9. I am more willing to express my emotions. (I)
- 15. I have more compassion for others. (I)
- 16. I put more effort into my relationships. (I)
- 20. I learned a great deal about how wonderful people are. (I)
- 21. I better accept needing others. (I)

New Possibilities

- 3. I developed new interests. (II)
- 7. I established a new path for my life. (II)
- 11. I am able to do better things with my life. (II)
- 14. New opportunities are available which wouldn't have been otherwise. (II)
- 17. I am more likely to try to change things which need changing. (II)

Personal Strength

- 4. I have a greater feeling of self-reliance. (III)**
- 10. I know better that I can handle difficulties. (III)**
- 12. I am better able to accept the way things work out. (III)**
- 19. I discovered that I'm stronger than I thought I was. (III)**

Spiritual Change

- 5. I have a better understanding of spiritual matters. (IV)**
- 18. I have a stronger religious faith. (IV)**

Appreciation of Life

- 1. I changed my priorities about what is important in life. (V)**
- 2. I have a greater appreciation for the value of my own life. (V)**
- 13. I can better appreciate each day. (V)**

1. Trauma Response as a Precursor to PTG

- Shattered beliefs form the foundation for later posttraumatic growth.
- Basic physiological and psychological responses are *normal* in trauma.

2: Emotion Regulation Enhancement

- Managing dysregulated sympathetic nervous system responses and intrusive thinking
 - Responses that are adaptive for survival in trauma can provoke long-term maladaptive functioning
 - jitteriness, hypervigilance, sleep disruption, appetite suppression, etc.
- Encouraging reflective rumination in contrast to brooding.

3. Constructive Self-disclosure.

- Allows emotional support, coherent trauma narrative, models for healthy trauma response, PTG.
- *Telling the story* of the trauma, especially the experience of the aftermath of trauma.
- Learning how to use social connections and establish new ones; “continuing bonds.”

4. A Trauma Narrative with PTG Domains.

- A coherent narrative with the trauma as a catalyst, turning point.
- Appreciate paradox—
 - loss & gain
 - support & individual strength
 - control & lack of control
 - grief & gratitude
 - vulnerability & strength
- Refer to 5 domains of PTG.

5: Develop Life Principles Robust to Challenges.

- Altruism
- Accepting growth without guilt as benefiting others.
- Accepting social identity as a trauma survivor, a wise person, somewhat separate but more closely connected to the human condition.
- Concept of the hero as an ordinary person who survives the extraordinary, returns to express important truth about life.

Encounters with Posttraumatic Growth

Clinicians must remember this is possible, and listen for it.

A woman who became a nurse after her teenage son died

- *I've become very empathic towards anybody in pain and anybody in any kind of grief. I think that's one reason why I went into oncology nursing was because I felt so comfortable around grief. I would rather be around someone who was in pain rather than someone who wasn't. And I felt very comfortable around death and dying because I've learned so much about it and love talking about it.*

A Sailor whose legs were amputated in a shipboard accident

- *A lot more good things have happened to me since that accident that probably wouldn't have happened. I don't regret it. I don't wish it hadn't happened.*

A bereaved father

- *We realize that life is precious and that we don't take each other for granted. In fact my daughter in Raleigh, I talk to her almost every day on the phone, and I've found I've become much more protective than I've been before. And I'm also very much more generous with her than I have been with her previously.*

A bereaved mother

- ***The main thing is the strength. The understanding that God is going to get you through anything and that gives you a different outlook on life. That takes away a lot of the fear and trepidation that most of us walk through life with, and that doesn't mean I don't have any fear or that I don't think about the future or any of that stuff. I do, just like normal people. But I'm not constantly worried about it.***

A bereaved mother

- ***And I realized before, well you say you realize, you realize things, you read 'em and say yeah that's right you know like God first. And you think your marriage then your family and children and read that and say something like this happens and you know it becomes more real to you, that priority and what's important. So you know it maybe intellectually before, but you realize it in a different way.***

A bereaved mother

- ***Immediately the night Chris died Bill and I both, we talked about it and we knew we had to take the situation and make the best out of it, if you can do that. I think we have. I appreciate, I have always loved my family. So, I guess it made me have even a greater appreciation for family and friends and people.***

Normalizing Trauma Response & Emotion Regulation

There are things clients who are traumatized may not understand, and you can supply the information, and sometimes an intervention.

- ***BP: I don't understand why I'm having so much trouble with this. Here I am still crying and choking on my words in the group, while other people seem to be so calmed down. I can't get calm about this. I don't see how they do it.***
- ***T: There are some differences in what you and the other group members have been through, you know.***

- ***BP: I know it was horrible what I went through. But I can see how everyone in the group had their own horrible part. Betsy had to watch her son just waste away for months with cancer. At least it was quick for Marty. I don't think he suffered like Betsy's boy. I'm grateful for that.***

• T: So in some way, you are grateful that he died the way he did, compared to what he could have gone through?

• BP: I have thought that. But, still, it was so horrible to see him die like that.

• T: Right. There is not a good way to have your child die.

• BP: So why am I still such a mess? This is now into the second year.

• T: One thing you have to deal with the is different, is the images of Marty's death. Others didn't have to watch their children die. Or, if they did, it was something more peaceful and expected like with Betsy. The shock that you encountered is so vivid, that it has power to override your attempts to suppress it. You are in a struggle with those images, while others aren't. Witnessing something like this often produces reactions that are beyond grief, and include elements of what is called posttraumatic stress. Have you ever heard of that?

- **BP:** *Like the Vietnam vets had?*
- **T:** *Yes, veterans exposed to violent deaths have often suffered this.*
- **BP:** *So I'm like one of those veterans.*
- **T:** *Yes, you witnessed something horrific happen to the person you loved most.*
- **BP:** *So will I ever get over it?*

- **T:** *Your grief and loss will always be there in some form, but not as painful. The images that come to you we can minimize, too. You have to make peace with them, be ready to look at them, rather than fear and avoid them. We can work on that together.*
- **BP:** *I need some relief.*

**Cognitive Regulation:
Encouraging Reflective
Rumination**

Cognitive processing of trauma should be “reflective” rather than “brooding” to produce PTG.

- ***I just keep thinking that she's dead, and that she's in that cold ground out there, and she's cold. When it snowed last week , it really upset me. You must think I'm crazy.***
- ***T: Actually, I don't.***
- ***C: Well, I wonder about me. I know those are crazy things to think. But that's how I feel.***

- ***T: You were always her mother. You always tried to protect her. We can't expect you to stop thinking that way right now.***
- ***C: But I'd better stop. It's like I can't think of anything else. And I can't protect her anymore.***
- ***T: What is there to protect her from—the cold?***

- ***C: It doesn't make sense, does it?***
- ***T: I guess these thoughts aren't very useful, to you or to her.***
- ***C: No, its not helping anyone.***
- ***T: Maybe when you find yourself thinking such things, you can consider why you are thinking like this, and what it means for your relationship with Julie now.***

- **C:** *I'm not sure what you mean.*
- **T:** *Like I was saying before, when you are thinking about Julie being cold, you can think that its because you are her mother, her protector. Instead of just thinking she's cold, think about how it actually makes sense that you think this.*
- **C:** *It won't feel so crazy.*

- **T:** *Right. Also, you might give some thought to your mother-daughter relationship now.*
- **C:** *That I'm still her mother.*
- **T:** *How does that feel.*
- **C:** *OK. I hate to think that I'm not a mother anymore.*
- **T:** *That's another thought that disturbs you.*
- **C:** *Yes, I think that a lot.*

- **T:** *So, you can think about that differently. You are always a mother. I know that when soldiers die, their mothers are called gold star mothers—they were still mothers, you see.*
- **C:** *Right. So am I.*
- **T:** *Yes, and you can think about how to be a mother now.*
- **C:** *How to be a mother to a dead child.*
- **T:** *Does that make sense?*

• C: Well, I start thinking about the pictures I have. Collecting them together.

• T: See, now you start thinking about something to do, that's better than just going over and over in your mind, "she's cold, I can't protect her anymore, I'm not a mother anymore" and thoughts like that.

• C: You know how some people make scholarships and things like that in honor of a loved one? I was just thinking that I wonder if I could do that. It would take some money, but I have some from the insurance, and I have hated that money in a way. I don't want to want it or like it, it's like blood money or something, I know that sounds weird. But I wonder if I could do something for her.

• T: That sounds like something worth thinking about.

• C: I have no idea about any of that stuff, how it works.

• T: Most of us never have to think of such things.

• C: Yeah, I'm one of the lucky ones. I get to have a scholarship named after my daughter.

• T: Even the good things connected with her are going to be painful now.

• C: The pain is always there.

• T: But some thoughts just emphasize the pain, like “she’s cold, and I’m not a mother.” Other ways of thinking may ease it a little? Like about the photos or the scholarship?

• C: Its like a combination of pain and something sweet.

• T: Like that term “bittersweet.”

• C: Exactly. Bittersweet is maybe the best I’m ever going to get.

• T: Maybe so.

• C: But I don’t want to be just bitter.

• T: I hope not.

• C: So, I’m trying to get more to the bittersweet.

• T: And you have some choice in that. Like in your thinking. I can’t see how you can’t think of her.

• C: Oh no, I wouldn’t want to not think of her.

• T: And you can’t not think of her, anyway—you’re her mother after all.

• C: Yes.

• T: But maybe you can think in these more useful, bittersweet ways, than the purely painful, bitter ways.

More Rumination...

*When Ordinary Talk Fails,
Try Metaphors*

Helping with reasonable action

- **BF:** *I realize that Sharon has been living with her mother for five years now, but I'm still her father, and I think I should be consulted before she goes ahead with these things.*
- **T:** *Like the clothes.*
- **BF:** *Yeah. And Donny thinks he can just call all the shots—like he did with Sharon's clothes.*

- **T:** *What other decisions are on the horizon that you have strong feelings about, that you wish to have a say in?*
- **BF:** *The marker for one thing. And the memorial fund. And whether we should sue the guy that hit her. I don't have any idea how that would work.*

- **T:** *It's good that you can see what things you have some preferences about, so you have a chance to work things out before Lisa and Donny go ahead with these things.*
- **BF:** *What really bugs me is they treat me like I have no standing in this. Like Donny is the father and not me.*

- **T:** *So part of it has to do with how they treat you, which is no different than it was while Sharon was alive.*
- **BF:** *True.*
- **T:** *But the other part is about how they are treating Sharon's memory.*
- **BF:** *And Lisa is real weak, as usual, and I don't trust her to do the right thing.*

- **T:** *It must feel like they still have custody.*
- **BF:** *That's what they act like.*
- **T:** *Who really has custody of Sharon? And Sharon's memory?*
- **BF:** *(Long pause) You know, that's a really strange thought. I'm thinking God has custody of Sharon.*

• T: How does that feel?
• BF: Good, I guess. I mean I wish he didn't –I mean I wish she were alive—but I'd rather think of God having custody of her than Lisa and Donny. Well, Donny, especially. And you know, it makes sense. That's right. God has custody.

• T: What does that mean about all these issues? Does realizing this change anything about these conflicts?
• BF: I'm not sure. I still want the marker like I told you.
• T: I think things like that are more about Sharon's memory, if God has custody.
• BF: You mean how to remember her.

• T: Right. And who has custody of her memory?
• BF: I don't know. How could anyone? I mean I have my memories of Sharon, other people have theirs. That doesn't make sense to me.
• T: You know, that's what I was thinking. You have your memories of Sharon. No one can take custody of those, and any way you choose to share them. Donny's always ticked you off. But maybe it's not so important to struggle with him about some things.

• BF: Somehow in my mind, I guess I've been struggling with reclaiming her from him. What does that matter now? I can go ahead and remember her, and tell people about her, any way I want.

• T: Of course, there are some things, like the insurance settlement, the lawsuit, her marker, that you may have to come to terms with them on. But a lot of things you can choose to do as you wish. But I'm thinking that if you keep in mind who has custody now, it will all be easier to deal with.

• BF: You may be right.

Cognitive Regulation & Narrative

Take the counterfactuals seriously--they are a frequent part of ruminations. But offer some comfort, too.

BP: It was late in the afternoon, and I was starting supper. Clark was talking to someone on the phone and I wasn't paying much attention. He said that he had to go out, and I thought that I'll be getting supper soon, so I said that he couldn't go far because it was almost time to eat. But he was almost out the door by then.

• Looking back, this was a little strange, but I dismissed it, or didn't even really give it much thought. I should have told him he had to stay home, that it was too late to go out then. Then maybe he wouldn't have gotten shot.

• T: Of course, this was pretty much a typical day for you at the time. You had no inkling then of what was about to happen.
• BP: Right, but how I wish I had just said something.
• T: Like what?
• BP: Don't go!

- **T:** *What do you think Clark would have said?*
- **BP:** *Well, I don't know, but with those boys he was mixed up with, he probably felt he had to. He probably would have said, "I'll be right back for supper," and gone out. So maybe I couldn't have changed it.*

- **T:** *Of course, if you knew then what was about to happen you would have done anything to change it.*
- **BP:** *I would have tied him up!*
- **T:** *Of course, at that time, not knowing what you know now, that would have looked a little overboard.*
- **BP:** *Yeah, of course. I guess I should have seen earlier what kind of things he was getting into, and taken a stronger stand.*

- **T:** *You didn't think he was in this kind of danger?*
- **BP:** *No, well, yes, I was worried. But I didn't know the whole story. I should have known better what was going on.*
- **T:** *I remember you said he was always a good kid, and his grades were good. Maybe that helped you think that things were basically OK.*
- **BP:** *I think so, but I was fooling myself, it turned out.*

- **T:** *Fooling yourself? Like trying not to see reality?*
- **BP:** *I don't think that so much. I guess I just trusted him, and thought that stuff like that wasn't happening to my kid. I guess I was naïve.*
- **T:** *Not anymore.*
- **BP:** *But it's too late for Clark. I failed him. He needed a parent who was more in touch. Tougher, maybe.*

- **T:** *You didn't get a chance to adjust your parenting to these circumstances. When those boys killed him, they took away your chances as well as Clark's. I'll bet you made plenty of adjustments over the years as Clark grew up, and you figured out what he needed. I think parenting is a lot of those adjustments.*

- **BP:** *Yeah, I'd think I just had things under control and figured out with him, and then he'd be on to another phase. I hadn't figured out this teen age phase yet.*
- **T:** *You might have with a little more time.*

- **BP:** *I know I am being too hard on myself for not seeing what would happen. But as a mother, I am supposed to know how to take care of my child, to protect him from danger.*
- **T:** *Of course, good parents feel this way.*
- **BP:** *That's it, how could I be a good parent? Clark's dead.*

- **T:** *If you met another parent whose child had died because they had not prevented the child from doing something that led to their death, would you think of them as a bad parent?*
- **BP:** *It depends on what they overlooked. Like, if they left a loaded gun out for a five year old to find, I think that is pretty bad.*

- **T:** *Is your circumstance like that?*
- **BP:** *No, not really. The gun thing is obviously a problem. You could see that coming.*
- **T:** *So you don't think parents should be able to anticipate and protect against all dangers? Like maybe the school bus will wreck? Or that a plane will crash into the school building? Or a tree will fall on him?*
- **BP:** *Some things are just so unlikely, you'd drive yourself crazy trying to worry about all of them. Probably drive your kid crazy too.*

- **T:** *So, in your situation with Clark, with those boys and him being involved with drugs, was that more like the five year old and the gun, or the school bus crash?*
- **BP:** *Somewhere in between, I think.*

**Narrative & Life
Principle Development**

**Balancing acceptance with
perseverance**

- **P:** *I am not sure I can handle school like this.*
- **T:** *The time it takes to write would make it tough.*
- **P:** *Not just the physical part, but getting my thoughts together. I can do it pretty well when speaking, but writing doesn't come so easily anymore.*

- **T: You have certainly been working on it.**
- **P: I wonder how much more improvement I will make. I have to get a follow-up on the neuropsych tests again soon. I'm not sure they'll look too good.**

- **T: I know it was discouraging last time.**
- **P: Yes, especially the recommendation I should apply for disability. How do they know I'm all washed up?**
- **T: You do have a determination that they may not have taken into account.**

- **P: They don't know me.**
- **T: You've been going at this like you did your swimming. You have made progress.**
- **P: I'm not sure it will be enough, but I'm not giving up now.**

T: You can still be determined, even in this new reality.
P: I know I've lost a lot, I just want to make sure I don't lose any more.
T: You are recognizing these losses almost every moment, even when you are determined to push on.

P: Well, just when I am doing certain things.
T: Sometimes they are more obvious.
P: (Starting to cry) Yes, some things are.
T: And you grieve these losses.
P: Grief—that's it.

T: Like there have been some deaths.
P: Yes, but that's not all. I see the gains, too.
T: What gains do you notice?
P: Oh, I have more understanding for people.
T: Understanding?

• P: Like that people are all dealing with something, and you can't assume things about people. Everyone has something they are dealing with that is affecting them. People assume things about me that aren't fair, accurate. I've learned not to do this with others.

**• T: You can't know what is going on with people that might figure into how they seem to be.
P: I knew this last summer—I could think it, even when I couldn't really talk yet. You learn this hanging around with TBI and stroke victims all summer. It's like I know things old people know, but I'm only twenty-five.**

**• T: You have a different feel for people.
P: I'm more compassionate.
T: Are there other ways you see yourself differently?
P: I'm still figuring that out. Trying to figure out what I have, and what may come back. I know I've lost stuff. I'm not sure what I can do.**

T: Still figuring that out, and it is a moving target, isn't it, you are still getting changes.
P: And that's a good thing—I'm still improving.
T: Yes, it just makes it hard to plan what you will be able to do.

P: I'm pushing as hard as I can, and I know John wants me to, to take advantage of this window for recovery. But sometimes I just need to take a break for a day, and just be what I am right now, and not really do anything.
T: Is that OK by you?

P: Well, I think John can get upset, so I don't tell him. I think he wants me to give 100%. He's had to put up with a lot, more than I remember, because I don't remember much of anything about the beginning, and I was in the coma. So I want to do all I can.
T: But a break for a day seems to be a normal thing for everyone from time to time.

**• P: Not me. I might have given myself a half a day, if I worked hard the first half. That's how I've been.
T: You've changed a little on this?
P: Yes, sometimes I just have to let it all be.
T: You are figuring out how to do this your way.
P: I'm not sure what I am doing.**

**• T: You are making it up as you go, a new life.
P: I really don't know what it is, or will be. But I know that to some extent I need to let myself be who I am, or who I am becoming.**

**• T: I'm thinking that you've spent your whole life prior to the stroke learning about who you are—your capabilities, tendencies, mental and physical abilities, personality, and such. You've been observing yourself and evaluating yourself for a lifetime. Now you are different, and you have only had a few months to assess, and like I said before, you have been changing all along.
P: That's true.**

• **T: So it's hard to know yourself like you used to, and hard to know who you will become.**
P: Hard to figure out what to do with myself.
T: How could you know that now?
P: It would be easier if I did, and easier on John, too. I think he wants those questions answered.

• **T: That clarity would be easier to adjust to.**
P: Everyone seems to want me to have this sorted out. I guess I disappoint them like this. My sister wants me to find God, and she keeps talking to me about it. But you know, I'm not ready for that.

• **T: She has her own notions about that.**
P: Yes, but I don't want to be talking about spirituality and such right now. I don't think about why this happened to me. I just figure it did, why not? And statistically if it happened to me it doesn't happen to someone else, like you.

• **T: But it doesn't work exactly that way.**
P: Well, I mean statistically. And I think, it happened to me, and I saved someone else from this kind of thing.

• **T: But there are questions your sister wants you to consider.**
P: Yes, well, it's just not something I'm interested in discussing with her, because I can tell she wants me to think a certain way.
T: Maybe it will be okay sometime to discuss it with someone who doesn't have a certain agenda about it.
P: Yeah, but everybody seems to.

• **T: How about me?**
• **P: No, that's why I come here. This is the place I figure things out on my own. Well, I mean you help, but here I can just be free to think on my own. I need that. Because there are lots of changes, bad ones, sure, but some good ones that I am trying to do, too.**

**Reflecting on PTG
Earned**

Ultimate narrative
completion in a dying man

- **C: I do have my regrets, but at least the cancer gave me enough time to change.**
- **T: So that you could use your hindsight now.**
- **C: Yeah, I got a chance to do things better. I sure had it backwards. My customers were my family.**
- **T: And your family got shortchanged.**

- **C: I have straightened that out, though.**
- **T: And your customers also cared about you. These were not merely business relationships.**

•C: Right. But still, I wasn't investing my time wisely. I might never have seen how much my family loves me if it weren't for having to deal with this cancer. Boy, have they been troopers. Despite the crap I've given Pam over the years, she stood by me.

•T: And she got a better Fred in the bargain.
•C: Amazing. In the pain, fear, money problems, and plain nastiness of this disease, we had a better time than ever.
•T: Because you were at your best.

•C: I was. I do feel good about how I've handled this. Proud of myself, more than I've ever been. I just hope I can keep it together through this part. I'm getting pretty scared at times.
•T: So, how are you getting through this part?

•C: That's where God comes in. Man, I need Him now. I can feel pretty stupid while feeling proud. How many times do you hear to put God first, family second, then yourself? I had it the wrong way around. Now, it's God and family. I had to live it to get that. I wish it didn't have to come to me like this. Well, I just try to do this part better.
•T: This part is important.

•C: Yeah, well. It's the only part I got left. It's real important. So I'm focused.
•T: Like how focused you were in that game in high school.
•C: The championship game.
•T: Right.

•C: That pales in comparison to the end of this game.
•T: I was thinking of the story you told me about getting fired that time.
•C: What do you mean?

•T: Remember how you messed up that big account?
•C: Oh, did I!
•T: And how you went to all that trouble and your own expense to straighten it out and they fired you anyway?
•C: Yeah, and I was mad at them, and mad at myself, and I couldn't decide who deserved it more.

•T: And then the customer hired you!
•C: Yeah, I impressed them with my efforts and taking it on the chin, I guess.
•T: You kept trying to work it out, even when all seemed lost, and was. That's you, that's how you do it. You keep going, trying to get it right.

•C: That is me. That's what I'm doing.
•T: What do you think of that?
•C: It might look futile.
•T: To others?
•C: Sure.
•T: To you?

•C: You know, I was thinking, 'I couldn't live with myself if I gave up.' That's funny isn't it?
•T: That's you, too.

•C: Yeah, I've always been funny. You know, I think I'm just more me. More determined, more funny, and more able to put my love in the right places, the right people. More connected to God. I guess this is an OK way to go out. More, rather than less.

Creating a narrative that emphasizes strength
Expert Companionship in the context of debriefing

- **Debriefer:** *Linda mentioned that she is watching customers more closely now. Are any of you others doing that?*
- *(Almost all the employees respond affirmatively).*
- **Debriefer:** *Why are are you doing this?*
- **Linda:** *Well, I want to make sure we're not robbed again.*
- **Bob:** *I'd like to get a head start on the next one.*
- **Linda:** *You got a pretty good head start this time, Bob! (Laughter)*

- **Debriefer:** *So, you're all looking for ways to protect yourselves and each other.*
- **Linda:** *Yeah, if we can.*
- **Debriefer:** *Do you think you can?*
- **Connie:** *To some extent, but you can't stop all the crazy people who decide they want to rob us.*
- **Debriefer:** *What do you do about them?*
- **Linda:** *Well, like Kim said, run like hell! (Laughter)*
- **Connie:** *Yeah, but sometimes you can't. Bob made it out, but you and me and the others couldn't.*

- **Debriefer:** *Then you're left with trying to cope with the situation. How do you think you did?*
- **Connie:** *I think we did pretty well. No one got really hurt. Beth was amazing the way she kept talking to the guy, trying to keep him calm. You were great Beth!*

• Beth: It was weird, I just felt some sort of calmness come over me after I started praying. I felt God was with me, and what I'd do would be OK. You know, I feel bad he killed himself, even though he didn't hurt us, and I'm mad at him for putting us all in danger, he didn't have to do that.

• Bob: Hey, better him than us!
• Beth: I know, but I still wish it hadn't ended like that.
• Linda: Yeah, me, too, but only because I've got this picture in my mind of his head blowing apart. Thanks a lot, fella.

• Debriefers: Has anyone else here had pictures come to mind like Linda has?
• Connie: Yeah, but I try to put them out of my mind.
• Bob: I wasn't here for that but with all this talk of it, I feel like I'm making my own movie of it.
• Kim: Yeah, I really don't want to think about that.
• Linda: Sure, I saw it, I can remember it, but like Kim said, I try not to think about it.
• Beth: I'm afraid I'll have nightmares about it, and sometimes it just pops into my head.

• Debriefer: So all of you have had some experience of these pictures, even Bob, who has heard the story but did not see it. This is all quite expected in a situation like this--you're all going through something similar. It will be unpleasant at times to have these pictures pop up, but I'd like you to view this as some unpleasantness, and not something to get worried about. Connie, how do you try to put the pictures out of your mind?

• .

• Connie: I just try to think about something else instead.

• Debriefer: How does that work for you?

• Connie: Pretty good, but it's not perfect.

• Debriefer: Sure. Connie's way is a good one. Don't try to battle any of the pictures from this incident. Just acknowledge to yourself that this is the unpleasantness I mentioned would likely happen for a while, and then gently turn your thoughts to something else. Do you think you can do that?

• Kim: Yeah, but they'll still come back for a while?

- **Debriefer:** *Sure. It's a memory you can always have, just like you remember other things from your life, good and bad. Now this is part of your life, too. OK?*
- *(Assent from various members of the group)*

- **Debriefer:** *But you know what else there is to remember from this? (Here the debriefer pauses for effect.) To me, listening to this group, I'm struck by the way you helped each other through this.*
- **Bob:** *I have to admit I wasn't much help.*

- **Debriefer:** *Does anyone here begrudge Bob taking off at the beginning of the robbery?*
- **Connie:** *I would have gotten out if I could have.*

- **Beth: And Bob got next door right away to call the police.**
- **Linda: I think Bob helped, too, because he told the cops who was in there and everything--they had details they wouldn't have had.**
- **Debriefer: OK, Bob?**
- **Bob: Yeah, I just didn't want you all thinking I was a wimp.**

- **Debriefer: Instead, it sounds like you played an important role in everyone coming out OK, too. In fact, that was what I was going to say. Each of you did the right thing. Beth, you were able to talk with the guy like Connie said. And all of you were able to calm yourselves and each other enough so as not to unnerve this guy further. You did a great job.**

- **Like Connie said, all of you came out unhurt. You can remember that fact, and that you did the right things in very difficult circumstances. It's understandable and normal to be shaken by this, but at the same time, your fears didn't prevent you from doing the right thing.**

- **Linda:** *That's right. And Beth, I don't think you could have kept that man from killing himself, any more than the rest of us. He did all this out of his own choice. That's a fact, too.*
- **Connie:** *Yeah, Beth, give yourself a break on that one.*
- **Kim:** *Beth's always hard on herself.*

- **Debriefers:** *Hear what they're saying, Beth?*
- **Beth:** *Yes.*
- **Debriefers:** *What do you think?*
- **Beth:** *I guess they're right.*
- **Debriefers:** *Not too sure?*
- **Beth:** *Not totally.*
- **Debriefers:** *This is an issue for you that you may have to take more time to sort out. But it is clear to me that the people who were there with you respect what you did. So don't ever forget that, OK?*

- **Beth:** *Right, they were there.*
- **Debriefers:** *Right. And you said you prayed.*
- **Beth:** *Yeah, and I guess I felt like God was with me.*
- **Debriefers:** *So, God is probably all right with you too, because he was there, too.*
- **Beth:** *I hadn't thought of it that way.*

- **Debriefers:** *This looks like a good strong group to me. And I wouldn't be surprised if you felt even closer to each other after this.*
- **Connie:** *I think so. We've really been through something together.*

- **Debriefers:** *Yes, after people go through things like this they sometimes feel stronger in various ways--stronger personally, stronger in their relationships, in their faith, various things. I have to wonder what it has been like for Kim and Bob, our married couple.*
- **Kim:** *You know, when we went home after this, Bob never looked better! (Laughter)*

- **Bob:** *You looked great to me coming out of this place OK. I'll never forget the police taking you out, and there you were, OK after all. If you had gotten hurt, I don't know that I could ever live with myself, leaving like that.*
- **Kim:** *Bob, the guy had me right there. There was nothing you could have done. Thank God you got out and got over there. If you'd tried to be some kind of movie hero we might all be dead.*

- **Bob: OK, I hear ya.**
- **Debriefer: So you two feel pretty tight after this?**
- **Bob and Kim: Oh, yeah!**

- **Linda: I went home and hugged my kid that night, you can believe that!**
- **Beth: Exactly!**
- **Debriefer: Things like this make you appreciate things a bit more.**
- **Linda: That's right. It's shaken me up, but maybe in a good way, too.**

- **Debriefer: Is that what you're experiencing too, along with the anxieties?**
- **Beth: I think so. I thank God that He got me through this. He showed I can depend on Him.**
- **Linda: I just wish God would keep the crazies out of here.**
- **Connie: Well, I guess we can handle them if they show up again.**

• Debriefer: Yes, I think so. You can review with each other how you would handle similar situations in the future, now that you have some experience to go on, where you did very well. And I'd also encourage you to help out Beth and Bob with some of their doubts about themselves in this, since we all know that they did all they could to help.

• The company wants me to come out and check on employees after these kinds of things to make sure you're doing OK. I see no reason to believe you won't be OK. And I can see that you are handling it in ways that might really benefit you.

• Like I said, this is part of your life now- a terrible thing, but in some ways a strengthening thing, too. So let's recognize the bad and the good together in all this, OK? You can let me know if you want to talk again, the EAP folks can put you in touch.

Vicarious PTG

- **In addition to vicarious traumatization, expert companions may experience vicarious PTG.**
- **Same domains of PTG, from close work with trauma survivors from whom we learn.**

Vicarious PTG

- **Qualitative study of 21 trauma therapists. All reported aspects of PTG similar to the 5 domains.**
- **Also reported various negative aspects of trauma work. (Arnold, Calhoun, Tedeschi & Cann, 2005)**

Vicarious PTG

- **Use of PTGI to assess vicarious PTG in 118 trauma therapists.**
- **More v-trauma, more PTG.**
- **Empathy positively related to PTG.**
- **Highest levels of empathy: weakest relationship of v-trauma exposure & PTG**
- **Lower levels of empathy: strongest relationship of v-trauma & PTG. (Brockhouse, et al., 2011)**

Vicarious PTG

- **58 Pediatric physicians and 66 nurses, assessed with PTGI**
- **Higher secondary trauma more PTG**
- **Higher professional self-esteem more PTG (Taubman-Ben-Ari & Weintroub, 2008)**

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