

THE POST-TRAUMATIC GROWTH AS THE FACTOR OF PERSONAL DEVELOPMENT IN CONDITIONS OF MODERN UKRAINE

Kostiuk O. I.

INTRODUCTION

According to researches in the developed countries, in particular, the USA, 60% of the population faces traumatic events at least once, in their life, about 13–17% has experienced 3 or more situations. Talking about military-conflict zones, the amount of people who have experienced traumatic situations there reaches 92%. The historical heritage of the Ukrainian people only for the last century includes Famine-Genocide and deportation to Siberia, the II World War and Soviet period repressions, an explosion of the Chernobyl nuclear power plant and of course contemporary war with Russia. There are no researches, which would record statistics of psychotraumatic events distributed among the population of Ukraine, but concerning the number of traumatic causes embracing modern Ukraine we can assume that our country is closer to those statistics, which are observed in hot spots of the planet. The socio-political situation in Ukraine puts new challenges in front of psychologists. Demolition of an old totalitarian system and the long transition period from Post-Soviet inheritance to finally creating the democratic society is complicated by external aggression which affects all aspects of life in Ukraine and not only in those regions that suffer from military operations.

Unfortunately, there is not only the problem of historical mass injuries and their transgenerational transmission in Ukraine but also the problem of actual psychotraumatic events that have neither social protection against them nor recovery programs for those who eventually had PTSD. For example, women who became victims of domestic violence or sexually and physically abused children. This situation has lead to PTSD symptoms being written into cultural norms of the nation and unfortunately, those norms are far away from the actual psychological standards. There are some spread phenomena in Ukrainian society that to our point of view are

the demonstrations of “PTSD of the national coverage” (metaphor made by UCU’s mental health institute).

Those phenomena are:

Very strict, sometimes even violent rules of behavior for children in public places that give no space to a child for self-development. Oppressing the activity of the child is not based on safeness but on making one more comfortable, invisible for strangers and relatives.

Dividing up the society on “my people” and “strangers” that leads to cautious or aggressive behavior towards those who received a marker “strangers”.

Having reduced interest in new opportunities and facing difficulties with choosing something new.

Behaving in learned helplessness style, having a high level of mistrust for people, new initiatives, ideas and their realization, preferring well known and usual not something better.

Being oriented towards someone else’s interests and behavior, not your own that leads to becoming extra loyal to the government and forgetting about personal concerns.

Dichotomous behavior: going easy from ‘victim’ position to ‘aggressor’ position and total lack of assertiveness.

That is why the problem of adaptation disorder that was caused by stress or traumatic situation and the ways to overcome it has become the subject of heightened interest among psychologists. The clinical picture of various adaptation disorders caused by psychological trauma is in detail investigated and brought to deep understanding nowadays, it is known how the person overcomes a trauma and what factors determine the process, the process itself and a possibility of intervention in it including psychotherapy.

Regardless, this pathologizing approach of consideration the psychological trauma has some barriers that prevent solving the problem. V. Klymchuk states: “by focusing on disabilities and their therapy we risk to:

To stigmatize by automatically putting a PTSD label on everyone who has ever dealt with trauma. To use wrong or unneeded interventions.

To not notice or ignore positive changes that have happened to a patient, for example rethinking their life position or appreciating it more, having a feeling of gratitude, etc.

To lose faith in the ability of mentality to recover by just having social and psychological support from patient's closest people, society and government.

To take too much pressure on yourself while worrying about a patient's mental wellness, without sufficient resources that would help to overcome it and eventually will be lead to emotional burnout.

In the last couple of dozens of years the explorers of psychological trauma started to notice a few new things:

About 70–80% of people overcome the consequences of psychological trauma without professional help.

Overcoming traumatic events often leads to positive changes in the life of the patient.

Both of these empirical observations made the researchers change the focus from concentrating on destructive consequences caused by stress into focusing on positive aspects of this process.

The first observation has generated research on the phenomenon called 'resilience', which can be explained as the ability to be happy again after something difficult has happened. It is based on one empirical fact that people are capable of recovering by themselves and that they have all the needed resources.

The second observation is focused on research about what particular positive changes and new opportunities become available while dealing with psychological trauma.

The research about this kind of post-traumatic transformation has rather young history and as well as the 'resilience' concept it has lots of synonyms: positive psychological changes, positive side effects, transformational coping, prosperity but still the main concept is post-traumatic growth.

It is important to state the difference between these two concepts. The resilience itself and all the researches that were made on it are based on a disposition of the personality towards their attitude for other people, themselves and the world in general. It is a productive way in today's research, and the practice based on it not only allows shaping the strong character but also heightens the level of effective functioning despite difficulties.

Unlike resilience, the term posttraumatic growth is a qualitative change in the functioning of the person. The change happens when a

person faces a struggle that requires a higher level of strength to overcome it, which makes one review their life position, their attitude to others and their relationship with themselves. Facing psychotrauma allows realizing that some moments in our life cannot be controlled; they are unpredicted and can, of course, cause a feeling of helplessness and hopelessness. This is exactly what pushes people to post-traumatic growth.

All European and eastern culture, philosophical, religious and literary works claimed that struggle always leads to a better understanding of life and yourself. Despite the previous fact it became a subject of scientific research in psychology not a long time ago.

1. The development of post-traumatic growth

It is difficult to state who were the actual pioneers of the post-traumatic growth concept but we can surely state that dr. N.Finkel (1975) was one of them. He studied post-traumatic experience on his students and noticed that most of them talked about the positive outcome of the struggle. Dunning and Silva (1981) in their research stated that by experiencing negative events people start to reevaluate their priorities and are capable of overcoming struggle faster in the future. Aldwing, Lewenson, and Spiro (1994) had a different approach. They studied coping strategies of overcoming stressful, traumatic situation and crises and recorded three types of coping:

- The one that leads to balance renewal
- The one that leads to negative transformation during which the person denies their acquired level by that time.
- The one that leads to positive transformation and allows getting new qualities.

As we see, in this case, the post-traumatic growth is considered as the third type, the adaptive mechanism that leads to positive transformation after overcoming stress. Maercker and Zoellner's (2006) research also states the significant correlation between posttraumatic growth and adaptation. The authors consider growth as a two-component process, the first component of which is a functional coping, based on overcoming fears and bars, also the revaluation of the principles and having a different point of view on the particular situation, being able to overcome the crisis. The second component is illusory coping, based on avoiding the crisis,

diverting from a traumatic situation. The person is focused not on overcoming a situation but on distress removal.

O'Leary, Alday & Ickoviks, 1996, offered a similar model based on empirical researches. They consider a traumatic event as an interruption of usual functioning. Thus, the results of overcoming the traumatic situation can be the following:

- The lower level of functioning than before a trauma – survival
- Returning on the previous level of functioning – renewal
- Reaching a higher level of functioning – prosperity

The last option, namely prosperity, is the author's understanding of how an exit from a traumatic situation looks like before growth.

The term "posttraumatic growth" became common after Tedeschi and Calhoun, 1996 research. They explain it as the positive outcome reported by the people who have experienced traumatic events. At first, they describe the positive experience as growth, comparing to the previous level and significant transformation that happens to a person at least in three spheres: strengthening their perceptions of self, others, and the meaning of events. There are five main parameters of post-traumatic growth which are presented in their scale: New Possibilities, Relating to Others, Personal Strength, Spiritual Change, and Appreciation of Life.

Researchers state that post-traumatic growth conducts positive self-perception, confidence, and the ability to overcome crises, increases self-trust, ability to accept difficulties, and imperfection of the world in which live. It is very important to note that not only self-confidence, determination, and feeling of mental strength are the result of posttraumatic growth, but also understanding of personal weaknesses and restrictions. The interpersonal relations also change, there is a higher level of selectivity, and some of the relations that happened before the trauma get broken up or almost broken up, on the other hand, family relations or relationships with close people get better, become stronger and what is important they are valued more. A further component of the interpersonal elements of posttraumatic growth is the experience of a greater sense of compassion for others who experience life difficulties. The transformation of life philosophy due to posttraumatic growth expresses itself in the higher level of life valuation, realization of new possibilities, and making better life choices. Religious, spiritual, and existential components of life get more attention too.

Tedeschi & Calhoun's model of posttraumatic growth is a functionally descriptive model that is based on the socially cognitive processes of the person who faced psychological trauma. Posttraumatic growth appears as the result of the cognitive process in this model, the result of reevaluation and reconstruction of ideology that was made based on traumatic experience. There are two terms made by R. Janoff Bulman "ready for action" and "assumptive world" that play a big role in this model. She stated that people who faced psycho trauma are capable of reacting to the crisis more calm and confident because there is a new addition to the "assumptive world" of this person like the possibility of getting injured, losing someone close, bankrupting, natural or technical accidents. Assuming this factor, people who have ever faced psychological trauma are more confident in non-standard situations and ready to solve the problem right away.

Joseph has a different point of view, he states that posttraumatic growth is a process that leads to congruence the "I" concept and new traumatic experience, that it is a process of reintegrating the new sides of the personality caused by trauma that will eventually lead to deepening the "I" concept. The reintegrating process can go two ways, the assimilation of new knowledge or it's accommodation. The accommodation is the main mechanism, which provides ideology change, and it's deepening while posttraumatic growth. The major point of accommodation is meaning. The cognitive processing of trauma is processed by giving it a meaning. The person looks for the reason at first but after looks for the sense of what they have been through. Joseph's model of the posttraumatic disorder is personally centered. It is based on Rogers's humanistic theory. This concept is based on posttraumatic growth as a natural process provided by our organism that is directed on actualizing its potential in a way of accommodation and cognitively processing a traumatic experience. The need for self-improvement and self-actualization is the main source of posttraumatic growth. The evaluation of traumatic experience, whether it had a positive or negative impact on self-actualization is the navigator in this process due to "organismic valuing theory".

The next model is a bio-psycho-social model of posttraumatic growth made by Christopher. According to this model, posttraumatic growth is the inherited meta-study mechanism. This mechanism is activated when a person needs to change their meta scheme in new conditions. This way the

researcher emphasizes the evolutionary meaning of posttraumatic growth, which provides the adaptive process of humankind's development in the history on one side and the biological base on the other side. Christopher points out that the natural, biological reaction to traumatizing events can go either PTSD way or posttraumatic growth way. One of the main factors that have an impact on which way it is going to be is a connection with the environment. The same symptoms can become either pathologizing or they can become a basis for self-growth. For example concentration on triggers can be a starting mechanism for intrusions, ruminations, flashbacks or panic attacks or it can become a signal system that will help to avoid some unpleasant situations in the future. The biological system side of a person's connection with the environment changes very slowly in contrast to the socio-cultural system, which needs more flexibility and time for adaptation due to the speed. This exact conflict makes people vulnerable and can trigger the process in PTSD way. Christopher shows how to escape this situation by changing the cognitive schema of the personality; he states that we need to develop neuron connections of neocortex and brain in general because of the influence on hypothalamic-hypophyseal-adrenal axis in this particular situation is highly unlikely.

Just like in the previous model the major point of posttraumatic growth is to find meaning. The process of meta-study, the formation of the new ideology and new priorities can be started by transforming anxiety into sense. Posttraumatic growth changes the personality in a way that is close to social solidarity and support; the change of "I" concept, integrative and deeper thinking. PTSD, on the other hand, is based on avoiding social groups, breaking connections with people, isolation, and concentration on negativity and toxic experiences. Christopher also points out that not only the environment impacts posttraumatic growth but the growth itself changes the environment. PTSD and posttraumatic growth are both based on biological mechanisms, only posttraumatic growth is a more natural reaction to stress. Both of the reactions make an impact on biological, psychological and social levels and depend on the combination of physical health, mental health, and socio-cultural context. Christopher insists on the fact that cognitive work is the most effective way to work with a traumatizing situation.

All the aforementioned researches about posttraumatic growth show the process from the evaluative side and cognitive structure of the

individual. Christopher's model is made in the most complex and high-level style but mostly points to biological aspects. It is paradoxical that when the author mentions different posttraumatic growth mechanisms he ignores those biological aspects and only talks about neocortex.

Levin P. in his works reviews the recovery after trauma from a totally different side, he claims that it is the process of corporal, psychological and spiritual health awakening to be specific. He also says that the main principle for recovery is a somatic experience. Levin states that psychological trauma happens when the natural response of our organism to stress factors was stopped or blocked. He reviews the natural response to stress as a "hit and run" theory, the basic coping strategy. The energy produced for a fight or getaway that was not used leads to the appearance of trauma symptoms. It is possibly enough to just let emotions come out and show your inner instincts to get over the trauma. A full recovery is possible only by working with your body through the somatic experience. By somatic experience, P. Levin means corporal feelings that were experienced in the moment of trauma or after the trauma, living through them in the actual moment, activation of those feelings or their deactivation. It is the way of talking to your body that has the main symptoms of the trauma but also the answer to how to get away from it. Feeling something with your body activates corporal feelings that were blocked because of trauma, it ends them and transforms the person itself.

The theoretical basis of this method is the existential approach and psychosomatic principle of human unity. The energy that was blocked because of symptoms, that eventually got free and was mobilized in the right direction cannot just heal the trauma but also transform a human and bring them to new heights. From Levin's point of view, trauma is the existential challenge for ordinary life, it puts a task in front of a person- to change ordinary. Overcoming trauma awakens blocked and hidden strength inside a human. This way trauma can be considered as a chance given to a person for transformation and changing their ideology. Levin does not use the term posttraumatic growth, he says "posttraumatic awakening" specifically talking about mental, social and spiritual awakening. The important aspect of awakening is that it can change not just the person itself but also their environment. On one side, the feeling of empathy for a traumatized person is one of the resources for the awakening, on the other side awakening is the start for social

transformation. The main thing is that those processes generate the new quality of social relations, which Levin calls “empathy presence” relationship.

Levin’s approach gives us the model of posttraumatic growth from the side of the biological system, it points out at unblocking the hypothalamic-hypophyseal-adrenal axis and using the energy that got free for awakening and personal transformation. By speaking to the body and awaking the corporal strength and energy the somatic way of overcoming trauma also awakens spirituality.

Levin points out that unity of the body, consciousness, and spirit, can heal not just one personality but the whole community. He says that the person who awakened after a traumatic experience can be the initiator of socially important changes.

It is also important to say that the positive transformation of those who have overcome trauma does not necessarily exclude PTSD symptoms or comorbid disorders (depression, anxiety, OCD). Many studies show that they can exist together.

(Aldwin C., Levenson M., Spiro A., 1994; Joseph et al., 1993; Tedeschi & Calhoun, 2004, Hobfoll, Tracy, & Galea, 2006).

The integration of Ukrainian scientific psychology into world psychology and the aspects of Ukrainian entity have risen the interest in posttraumatic growth among Ukrainian scientists. The posttraumatic growth was described in the works of the following Ukrainian psychologists: V. Horbunova, D. Zubovsky, V. Klymchuk, V. Osyodlo, I. Prykhodko, O. Sheluh, S. Chachko. Many kinds of research and practical developments about posttraumatic growth made by Ukrainian psychologists are in the starting position. The following models that have been listed in this chapter reveal the different aspects of the process and complete each other, not compete. The completed integrative model of posttraumatic growth is still in the future.

2. Determinants of posttraumatic growth

The research of determinants that impact posttraumatic growth is a very important aspect. They allow us to find out different ways of possible influence on the process. The main determinants which were discovered during researches are:

- The intensity of stress factors

- Psychological characteristics of the personality
- Cognitive organization of the personality
- Behavior patterns of the personality
- Social determinants
- Gender specialties
- Emotions etc.

The list is not full. We do not know how the duration and periodicity of the stress factors influence posttraumatic growth, but we can assume that it has some impact.

The intensity of stress factors and their impact on posttraumatic growth is disputable, some researchers state that the connection between them is nonlinear and has U shaped curve which means that a small amount of stress leads to the assimilation of new experience and small ideology changes. Excessive stress, on the other hand, leads to disadaptation. The medium amount of stress is the most effective for posttraumatic growth. (Calhoun & Tedeschi, 2004; Carver, 1998).

More reserchers assume there is a linear connection between the intensity of the stress factor and positive personality growth. This point of view finds lots of proof in military cases: the shot power is directly proportional to the number of positive changes. Elder 1989; Aldwin, McMillan, Smith, Fisher, 2001; Park, Cohen & Murch, 1996; Fontana, Rosenheck, 1998)

The research made on the connection between individual psychological characteristics and posttraumatic growth shows the correlation between extraversion, the ability for positive thinking and being open to new experiences. Posttraumatic growth is also connected to the religiosity of the person who has experienced psychotrauma. It was also discovered that the functional growth of the personality could be correlated with resilience, open mind and integrity as much as the feeling of belonging to the community. The disposal of optimism and internal locus of control have linear dependence with adaptive and illusory posttraumatic growth.

Calhoun & Tedeschi state that posttraumatic growth can be reached through processing traumatic experience with cognitive mechanisms. Primary cognitive processing happens through obsessive thoughts and recollection of traumatizing events that happen in a form of intrusions, ruminations, and flashbacks. It is also called the distress phase. When the

distress level lowers, the cognitive work continues as random reflections. It is also stated that dialectical thinking and cognitive complexity have a positive impact on posttraumatic growth.

In an affective-cognitive processing model of post-traumatic growth described by Joseph, the self-concept and its world model are the main structures for the cognitive process. As it was already stated, the integration of the past into old constructs characterizes the process of renewal, but the rearrangement of those constructs is the posttraumatic growth itself.

The cognitive processing of the crisis is better described by Dorozhovets, who states that it goes in three different ways.

- Finding a meaning that leads to ideology change.
- The desire to bring back control under the situation which allows recovering the adaptive mechanisms.
- An attempt to recover the self-appraisal that was lowered because of trauma which leads to the self-concept change.

Illusions play an important role in this concept. The person who allows those illusions to evolve and supports them in front of traumatic events is more effective.

Solomon, who made a research on military men who have been freed after the captivity, she marks that coping behavior while captivity had a positive impact on personality that was shown after they came back home.

Affleck&Tennen describe the components of coping behavior in detail. It includes positive reframing, the ability to distract yourself from traumatic events and then come back to find the solution later, make an effort to fight the situation even though it is useless, the ability to ask others for help. Each of these aspects increases the chances of posttraumatic growth.

The social determinants of posttraumatic growth can be divided into two groups

The closest environment, friends, family, etc.

Socio-cultural community, social networks, culture, and traditions.

Joseph was the one who has pointed on the importance of social support.

Calhoun & Tedeschi state that social support is the main factor of posttraumatic growth and that it has a few elements to discuss. Is the person ready to open to the closest people and their environment? Are

those people ready to listen, discuss and help the one who has faced trauma?

The cooperation with the closest environment and referent groups has to be overviewed wider. For example, while discussing the psychotumatic event that happened to a person people can add cultural templates and examples, the example of someone who has faced and eventually overcame trauma is very important in a socio-cultural context. The other posttraumatic growth researcher whose name is D.McAdams thinks that posttraumatic growth is highly affected by American narrative, moreover, the process of opening to the public and the perception of this opening by the people happens in frames of these specific American narratives.

The cultural influence on the process of posttraumatic growth is still not very well researched, the main focus lies on the way the socio-cultural context influences positive and negative aspects of opening to the big social groups and more limited ones. Social support plays one of the main roles in the process of posttraumatic growth. Many researchers point out that the role of social support is brightly lightened in the studies that were made on military captives or people who have suffered war actions. D.S. Zubovsky says: ... the military men who come back home get different social reactions that eventually can play a very important role in further readaptation and become the basis for positive personal change. The positive impact of social support on the posttraumatic growth of those captivates who came back home to Israel confirms Z. Solomon's research. She thinks that this fact allows to correct the emotional condition of those who were freed from captivity to the positive side and that gives us an additional recourse for posttraumatic growth. The veterans of the Vietnam war, R.Rosenchek, and A.Fontana demonstrate the importance of social impact on posttraumatic growth from the other side. The positive personal change happened to a solid amount of veterans with almost all kinds of traumas except for those who were aggressive themselves, those had to deal with difficulties while trying to come back to the positive side. The authors state that this paradox is connected to a high level of social justice for particular kinds of actions.

The other side of personal posttraumatic growth from the social determinants point of view is its impact on society. P. Levin's "posttraumatic awakening" model demonstrates that a person who has reached posttraumatic growth brings new quality into a social relationship

with their environment and becomes an element that inspires social innovations.

S. Joseph and P. Linley bring a concept of social post-traumatic growth. Its main feature is that its main concern is not about the person, but about the community. This phenomenon is recorded in cases where community, social or political group has survived a common struggle: for example technogenic or natural disaster, political violence, tyranny, war or terrorist operations. Social post-traumatic growth is observed in parallel to personal when there are mutual assistance and support in the community with branched out connections and communication, etc.

In his scientific works, Christopher also marks out a higher level of sociocentrism than there was before the trauma, which leads to closer integration with community and more significant interchange. In the case of group trauma, very often the perspective of the whole group changes, they get new paradigms and the principles of the relation with the environmental, social and religious problems.

The Ukrainian researcher V. Gorbunova considers social determinants in terms of possible stigmatization of the person that had a psychological trauma, strengthening of PTSD symptoms and obstacles that can create adverse social conditions for post-traumatic development. She also gives recommendations about creating and setting the mechanisms of social support that can have a positive impact on posttraumatic growth. She considers that one of the important factors for posttraumatic recovery is of course help from relatives and the family, their quiet, non-pathological and supportive attitude.

Gender difference also has a significant influence on post-traumatic growth. Women tend to have a better positive outcome after trauma. Park makes a hypothesis that explains this phenomenon, but not with physiological characteristics that are typical for the particular gender. Park makes a statement that there are different coping strategies for women and men which are widespread in the social environment, and also different approaches to upbringing girls and boys.

The influence of emotions on posttraumatic growth is not well explored. T. Zoyellner, A. Mayerker mark that there is a considerable influence of positive emotions, in particular, the emotional side of being open to new experiences. It can be an important factor in the way of post-traumatic growth, more valuable than cognitive factors. The feeling of

accessory and gratefulness for trauma highly increases the chance of post-traumatic growth.

Empirical researches on the connection of posttraumatic growth with optimism and pessimism for the people who endured psychotraumatizing events showed that there is more correlation with optimism. Pessimism and posttraumatic growth are also connected though. Therefore scientists assume that optimism and pessimism are separate determinants that can have an impact on posttraumatic growth with different neurobiological mechanisms.

Christopher notes that toxic emotions of shame and fault reduce the probability of post-traumatic growth. R. Rosenchek and A. Fontani's who made researches on the American veterans confirm the same hypothesis.

Tadeski&Calhoun mention that the stronger the distress is the stronger the need for reorganization ideology is. The strong distress accompanies posttraumatic growth and has a positive correlation with it, but the high level of distress is crucial for the transformation of the ideology.

Despite the large size of works concerning determinants of post-traumatic growth of the personality and community, it is obvious that this subject is insufficiently and unsystematically revealed, the connections and interference of various factors also demand additional researches for full understanding and reflection of their results.

3. The mechanisms of posttraumatic growth

Even though we have already mentioned the fact that many researchers of posttraumatic growth have stated that this phenomenon is typical for all people, there are many obstacles in its way. The main reason why is the transition from PTSD to posttraumatic growth so important is very well described by V.Klymchuk. He says that posttraumatic growth is not always provoked by easing the distress but the growth itself lowers the stress level, impacts posttraumatic adaptation and improves physical condition. The fact that was stated above brings up the question about the need to support posttraumatic growth while getting help from a psychotherapist.

Both Ukrainian and world psychologists think that psychotherapy can be one of the main mechanisms for posttraumatic growth.

Following the idea of Tadeski & Colhoun, V. Gorbunova points on the importance of social support for posttraumatic growth, which to her

mind plays a key role in this process. She has a few ideas for the closest environment of the patient which would help to start the growth; to create emotionally stable space and conditions that would allow her to talk about trauma and come back to it and to reorientate the focus of attention on doing productive and interesting activities.

Tadeski&Colhoun think that the following mechanism is the facilitation of posttraumatic growth. Joseph has an approach to supporting prosperity: 1) working with the narrative; 2) working with hope and 3) working with changes- are the main mechanisms to initiate the transformation in his model.

P. Levin insists on the idea that those mechanisms have somatic character. He has a whole list of tools that could help to include them in the process of recovery and growth through the somatic experience.

Our experience in the field of psychotherapy lets us assume that posttraumatic growth can be activated by using at least some of the determinants listed above. For example by using the instruments for rising up the level of resilience.

We should mark that the topic of mechanisms for posttraumatic growth is the least researched for today and requires much effort but it is very perspective for posttraumatic management.

CONCLUSIONS

Posttraumatic growth is a natural mechanism that was created to deal with traumatic events. Posttraumatic growth has an individually-psychological and social dimension. Personal posttraumatic growth cannot be seen only as a personal problem. We don't know all the determinants and mechanisms of posttraumatic growth but we know that socio-cultural content has a huge impact on the way that the person deals with trauma or feels social support, the way that social norms present the examples of facing struggle and the level of feeling like belonging to the community. The outcome of the posttraumatic period highly depends on the conditions made in the society, whether it is going to be stigmatization, growth, reduction or changes. Posttraumatic growth leads to innovation in society. By overcoming trauma a person changes and so do their environment and living conditions.

These conclusions are not final, they point on the importance of the need to continue different researches on posttraumatic growth and its

practical meaning for personality and society. To find more connections between different elements of posttraumatic growth and their determinants and to look for new mechanisms of this process in a socio-cultural and individual form that can allow bringing the practice of posttraumatic growth to a new level is also significant.

New researches on posttraumatic growth can be very helpful for redirecting the psychotherapy approach to a different path. For example, it can be helpful for the development of new social mechanisms, like government programs for rehabilitation after military actions in eastern Ukraine or victims who were affected by home violence, also for the elaboration of protocols about immediate reaction and support in case of technical and natural catastrophes.

The created models of posttraumatic growth, determinants, and mechanisms presented in both Ukrainian and foreign psychology still need development and systematization.

SUMMARY

This section discusses the topic of post-traumatic growth as one of the most effective mechanisms for personal development. Here are presented the main directions of researches that were made on posttraumatic growth and modern scientific models of this phenomenon. This chapter demonstrates the fact that post-traumatic growth is a natural exit from traumatic situations as well as the factors contributing to personal development and those that prevent it in the post-traumatic period.

It is stated that pathologizing the personality and focusing on the treatment can stigmatize barriers on the way to posttraumatic growth, but paying attention to posttraumatic growth can influence personal development and the development of the society.

This paper reviews the posttraumatic growth phenomenon based on foreign and Ukrainian studies. Here are described the main attempts to create a model of this phenomenon and the main determinants of posttraumatic growth and their influence on it. This paper also shows the connection between PTSD, posttraumatic growth and resilience and gives a short review of the instruments and conditions for posttraumatic growth.

REFERENCES

1. Affleck G., Tennen H., Croog S., Levine S. Causal attribution, perceived benefits, and morbidity after a heart attack: An 8-year study // *Journal of Consulting and Clinical Psychology*. – 1987. – ¹ 55. – P. 29–35.
2. Aldwin C.M. Vulnerability and resilience to combat exposure: Can stress have lifelong effects? / C.M. Aldwin, M.R. Levenson, A. Spiro // *Psychology and aging*. – 1994. – № 9. – P. 34–44.
3. Aldwin C., Levenson M., Spiro A. Vulnerability and resilience to combat exposure: Can stress have lifelong effects? // *Psychology and Aging*. – 1994. – № 9. – P. 34–44.
4. Calhoun L.G. Facilitating Posttraumatic Growth: A Clinician's Guide / L.G. Calhoun, R.G. Tedeschi. – Routledge. 1999. – 184 p.
5. Christopher M.A broader view of trauma: a biopsychosocialevolutionary view of the role of the traumatic stress response in the emergence of pathology and/or growth / M. Christopher // *Clinical Psychology Review*. – 2004. – Vol. 24. – P. 75–98.
6. Elder G.H. Combat experience and emotional health: Impairment and resilience in later life / G.H. Elder, E.C. Clipp // *Journal of personality*. – 1989. – № 57. – Vol. 2. – P. 311–341 Erbes C. Posttraumatic Growth among American Former Prisoners of War / C. Erbes, R. Eberly, T. Dikel, E. Johnsen, I. Harris, B. Engdahl // *Traumatology*. – 2005. – № 11. – Vol. 4. – P. 285–295.
7. Erbes C. Posttraumatic Growth among American Former Prisoners of War / C. Erbes, R. Eberly, T. Dikel, E. Johnsen, I. Harris, B. Engdahl // *Traumatology*. – 2005 – № 11. – Vol. 4. – P. 285–295.
8. Fontana A. Psychological benefits and liabilities of traumatic exposure in the war zone / A. Fontana, R. Rosenheck // *Journal of Traumatic stress*. – 1998. – № 11. – Vol. 3. – P. 485–503.
9. Finkel N.J. Strens, traumas, and trauma resolution / N.J. Finkel // *American Journal of Community Psychology*. – 1975. – Vol. 3 (2). – P. 173–178.
10. Hobfoll S.E., Tracy M., Galea S. The impact of resource loss and traumatic growth on probable PTSD and depression following terrorist attacks // *Journal of Traumatic Stress*. – 2006. – ¹ 19 (6). – P. 867–878.
11. Joseph S. Client centred therapy, posttraumatic stress disorder and posttraumatic growth : Theoretical perspectives and practical implications /

Stephen Joseph // *Psychology and Psychotherapy: Theory, Research and Practice*. – 2004. – № 77. – Vol. 1. – P. 101–119.

12. Joseph S. Growth following adversity: Theoretical perspectives and implications for clinical practice / S. Joseph, P. A. Linley // *Clinical psychology review*. – 2006. – № 26. – P. 1041–1053.

13. Joseph S. *What Doesn't Kill Us: A guide to overcoming adversity and moving forward* / S. Joseph. – Piatkus, 2013. – 336 p.

14. Levin, Peter A. *Waking the Tiger-Healing Trauma. The Innate Capacity to Transform Overwhelming Experiences* / Peter A. Levin with Ann Frederick. Berkeley, California: North Atlantic Books, 1997.

15. Lindstrom C. The relationship of core belief challenge, rumination, disclosure, and sociocultural elements to posttraumatic growth / C. Lindstrom, A. Cann, L. Calhoun, R. Tedeschi // *Psychological Trauma: Theory, Research, Practice, and Policy*. – 2013. – Vol. 5. – 1. – P. 50–55.

16. Milam J. Posttraumatic growth and HIV disease progression // *Journal of Consulting and Clinical Psychology*. – 2006. – Vol. 74. – № 5. – P. 817–827.

17. O'Leary V.E., Alday C.S., Ickovics J.R. Models of life change and posttraumatic growth.// In R.G. Tedeschi, C.L. Park, & L.G. Calhoun (Eds.), *Posttraumatic growth: Positive changes in the aftermath of crisis* Mahwah, – NJ: Lawrence Erlbaum Associates, Publishers, 1996. – P. 1–22.

18. Park C.L. Religious and nonreligious coping with the death of a friend / C.L. Park, L.H. Cohen // *Cognitive Therapy and Research*. – 1993. – № 17. – P. 561–577.

19. Park C. L. Assessment and prediction of stress related growth / C.L. Park, H.C. Lawrence, R. L. Murch // *Journal of personality*. – 1996. – № 64. – Vol. 1. – P. 71–105.

20. Solomon Z. Positive and negative changes in the lives of Israeli former risoners of war / Z. Solomon, M. A. Waysman, Y. Neria, A. Ohry, J. Schwarzwald, M. Wiener// *Journal of Social and Clinical Psychology*. – 1999. – № 18. – Vol. 4. – P. 419–435.

21. Speed N. Posttraumatic stress disorder as a consequence of the prisoner of warexperience / N. Speed, B. E. Engdahl, J. Schwartz, R.E. Eberly // *Journal of Nervous and Mental Disease*. – 1989. – № 177. – P. 147–153.

22. Tedeschi, R.G., Calhoun, L.G. (1996). The posttraumatic growth inventory: Measuring the positive legacy of trauma. *Journal of Traumatic Stress*, 9, 455–471

23. Tedeschi R.G. Posttraumatic Growth: conceptual foundations and empirical evidence / R.G. Tedeschi, L.G. Calhoun // *Psychological Inquiry*. – 2004. – Vol. 15 (1). – P. 1–18.

24. Janoff-Bulman R. Assumptive worlds and the stress of traumatic events: Applications of the schema construct / R. Janoff-Bulman // *Social Cognition*. – 1989. – Vol. 7. – P. 113–136.

25. Zoellner, T. & Maercker, A. Posttraumatic growth in clinical psychology: A critical review and introduction of a two component model // *Clinical Psychology Review*. – 2006. – 26 (5). – P. 626–653.

26. Брієр Д. Основи травмофокусованої психотерапії / Д. Брієр, К. Скот / *Наук. ред. Вікторія Горбунова, Віталій Климчук*. – Львів: Свічадо, 2015. – 448 с.

27. Горбунова В.В. Сприяння соціального оточення відновленню та зростанню особистості при посттравматичних станах та розладах // *«Наука і освіта»* – 2016 – № 5 – С. 40–45.

28. Дорожевец А.Н., Соколова Е.Т. Исследования образа физического Я: некоторые результаты и размышления // В сб.: *Телесность человека: междисциплинарные исследования* (под ред. В.В. Николаевой, П.Д. Тищенко) – М., ИФАН, 1991, С. 67–70.

29. Дорожевец А.Н. Когнитивные механизмы адаптации к кризисным событиям // *Журнал практического психолога*, 1998, N4 – С. 3–16.

30. Зубовський Д. С. Феномен посттравматичного зростання як перспективний напрямок досліджень у вітчизняній психології // *Проблеми екстремальної та кризової психології*. – 2016. – Вип. 20 – С. 63–74.

31. Климчук В. Посттравматичне зростання та як можна йому сприяти у психотерапії // *«Наука і освіта»*, № 5, 2016, С. 46–52.

32. Левин П. Пробуждение тигра – исцеление травмы. – АСТ, 2007.

33. Огієнко В. Посттравматичний стресовий синдром і колективна травма в особистих наративах свідків Голодомору // *Україна модерна*, 2018 // Режим доступу: <http://uamoderna.com/md/ogienko-holodomor-trauma>

34. Осьодло В.І., Зубовський Д.С. Посттравматичне зростання особистості учасників бойових дій: сучасний стан та перспективи // *Ukrainian psychological journal*. – 2017. – № 1 (3). – С. 63–79.

35. Приходько І. І. Посттравматичне зростання як компонент емпіричної трансформаційної моделі психологічної безпеки особистості фахівця екстремального виду діяльності // *Вісник Національного університету оборони України* – 2013. – № 1 (32) – С. 269–273.

36. Романчук О. Психотравма та спричинені нею розлади: прояви, наслідки й сучасні підходи до терапії // *НейроNeus*. – 2012. – № 1. – С. 30–37.

37. Чачко С.Л. Пережить Холокост / С.Л. Чачко // *Альманах науч. статей*. – 2006. – № 5. – С. 26–34.

38. Чачко С. Л. Проблема посттравматического роста: попытка теоретического анализа / С.Л. Чачко // *Вісник Одеського національного університету ім. І.І. Мечникова*. – 2010. – № 15. – випуск 11. – С. 140–148.

39. Шелюг О.А. Багатовимірність феномену посттравматичного росту: біологічний, психологічний та соціокультурний складники особистісних трансформацій / О.А. Шелюг // *Психологія і особистість*. – 2014. № 1. – С. 112–129.

Information about the author:

Kostiuk O. I.

PhD (Psychology), Senior Lecturer at the Pedagogy, Psychology,
Medical and Pharmaceutical Law Department
of the P.L. Shupyk National Medical Academy
of Postgraduate Education
2/4, Glazunova str., Kyiv, Ukraine;
Psychiatrist at the Center of Psycho-Social Rehabilitation
of the National University “Kyiv Mohyla Academy”