RESILIENCE IN THE AFTERMATH OF TRAUMA: WAYS TO BOLSTER RESILIENCE

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WHAT IS RESILIENCE

RESILIENCE is the capacity of people to effectively cope with, adjust, or recover from stress or adversity.

RESILIENCE is the process and outcome of successfully adapting to difficult or challenging life experiences and the ability to rise above one's circumstances.

RESILIENCE reflects the ability to confront and handle stressful life events, ongoing adversities and difficulties, and traumatic experiences, both while deployed and also when being reintegrated into civilian life.

RESILIENCE reflects the ability to maintain a stable equilibrium and relatively stable healthy level of psychological and physical functioning, even in the face of highly disruptive stressful and traumatic events.

RESILIENCE reflects the ability to

- "bounce back"
- "beat the odds against them"
- transform one's emotional and physical pain into something "positive"
- evidence a relatively stable trajectory of healthy functioning across time
- move from being a victim to being a "survivor", and even to becoming a "thriver"
- be "stress hardy", adapting to whatever life sends, and for some, even evidencing "post- traumatic growth"
- Post Traumatic Growth (PTG) is the ability to gain some benefits from overcoming trauma

As a result of experiencing traumatic events a person can learn to live life to the fullest, experience a greater appreciation of family and friends and value each day.

Perhaps the concept of **RESILIENCE** was best captured by Helen Keller who was born blind and deaf when she observed,

"Although the world is full of suffering, it is also full of overcoming it".

As one returning vet commented:

"Resilience is moving from taking orders or completing other people's missions to creating your own missions and bringing on-line your own decision-making abilities. I have a deeper meaning of life as a result of my deployments"

As often observed:

"Man has never made a material more resilient than the human spirit."

SOME FACTS ABOUT RESILIENCE

Following a natural catastrophe or a traumatic event no one walks away unscathed and impacted by such events, but neither do most survivors succumb in the aftermath to despair. Most show remarkable levels of resilience.

The ceiling for harmful effects is about 30% of those exposed.

People are much more resilient under adverse conditions than they might have expected.

A person may be resilient in some situations and with some type of stressors, but <u>not</u> with other stressors, or at one time in one's life, but <u>not</u> at other times.

Resilience is more accessible and available to some people than for others, but <u>everyone</u> can strengthen their resilience.

Resilience may be available and more accessible to a person at one period of time in his/her life than at other times in his/her life. Individuals may go through periods of extreme distress, negative emotions and poor functioning and still <u>emerge resilient</u>.

Resilience (positive emotions) and negative emotions can co-occur side-by-side.

Research indicates that individuals who have a ratio of 3 times as many experiences of positive emotions to 1 of negative emotions on a daily basis (3-to-1 ratio) are more likely to be resilient and have a successful reintegration.

Resilience does <u>not</u> come from rare and special or extraordinary qualities or processes. Resilience develops from the everyday magic of ordinary resources. Resilience is <u>not</u> a sign of exceptional strength, but a fundamental feature of normal, everyday coping skills.

There are many different pathways to resilience. A number of factors contribute to how well people adapt to adversities, predominant among them are:

- a) the perceived availability of <u>social relationships</u> and the ability to access and use social supports;
- b) the degree of perceived <u>personal control</u> and the extent to which individuals focus their time and energies on tasks and situations over which they have some impact and influence;
- c) the degree to which they can <u>experience positive emotions</u> and <u>self-regulate negative emotions</u>;
- d) the ability to be <u>cognitively flexible</u>, using both direct-action problem-solving and emotionally-palliative acceptance skills, as the situations call for;

e) the ability to engage in activities that are consistent with one's <u>values</u> and <u>life priorities</u> that reflect a stake <u>in the future</u>;

There are many roads to travel and many forks along the pathway to resilience. It is possible to change course at many points.

Individuals who are low in resilience are at risk for experiencing stress, depression, anxiety and interpersonal difficulties.

A **RESILIENCE REINTEGRATION PROGRAM** can promote subjective well-being.

EVIDENCE OF RESILIENCE IN RETURNING SERVICE MEMBERS AND THEIR FAMILY MEMBERS

- Most returning veterans (approximately 80%), are **RESILIENT**.
- From the time of World War I to the present, veterans as a group resume "normal" lives and are well adjusted. They are more likely to get a higher education, achieve more job success as civilians, get arrested less often than their peers who never served.
- Veterans of war and peacekeeping who had been deployed reported <u>more positive</u> than negative effects. They indicated that deployment had an overall positive meaning on their lives, contributed to better psychological adjustment and to higher levels of life satisfaction and higher occupational attainment.
- The majority of veterans (70%) judge the impact of their service on their present lives as "very meaningful" and that their service to their country was still highly important in their lives. Veterans have positive feelings of making a significant contribution. They feel part of a greater cause for their country having helped to protect their family and community.
- Veterans report that their combat experience taught them how to cope with adversity, to be self-disciplined and instilled feelings of greater independence, honor and accomplishment.
- Military training facilitated the veteran's ability to establish and maintain healthy relationships both in and outside of the military. For example, divorce rates of U.S. Air Force Academy graduates are lower than divorce rates in the general population.
- Many returning soldiers report enhanced meaning and comradeship ("Band of Brothers/Sisters") as a result of their service. They take pride in their service.
- They have learned many things while serving that they can apply <u>positively</u> in their civilian life.
- Currently, 71% of officers and 40% of enlisted personnel are married. 42% of all service members have children. Women make up 14% of the total military force.

- Like returning service members, military families are generally **RESILIENT** and a healthy and robust group.
- Most spouses of returning service members believed that deployment has strengthened their marriages. Only 10% felt that deployment weakened their marriages.
- Deployment contributed to the development of new family skills and competencies, a sense
 of independence and self-reliance. The majority of military spouses reported that
 deployment of their mate provided them with opportunities for personal growth such as
 becoming more self-confident in handling problems and stressors.
- Military families were found to be <u>comparable</u> with civilian families in terms of physical and mental health despite having to deal with the unique demands of military life such as moving often, foreign residence and deployment.
- Military family-specific resiliency factors include access to comprehensive health care, education, consistent employment for active duty soldiers, legal assistance and social support services such as Yellow Ribbon, Military One Source, Family resilience campaign and activities, Spouse Battlemind Training, writing projects, child supports.
- Since the start of the conflicts in Iraq and Afghanistan, over two million children have been directly affected by the deployment of a parent.
- Children in military families are also typically resilient, even after experiencing significant traumas and losses.
- Following combat exposure, somewhere between 10% and 30% of returning soldiers may evidence PTSD, depression, anxiety and related readjustment problems. But, the majority (over 70%) do <u>not</u>.
- There are effective, short-term treatments to help those who have readjustment problems.
- "Overall, military experience is a <u>positive experience</u> for most who serve. Time spent in the military allows many individuals to develop deep bonds with others who serve beside them, fosters feelings of pride and fulfillment in serving one's country, and it may also provide a broader perspective on life." (Selby et al. 2010, p. 304)
- Finally, if you want to understand what <u>Resilient Service Members</u> do, consider the research findings of Drs. Dennis Charney and Steven Southwick. They studied 250 American Prisoners of War during the Vietnam War who were held captive for up to eight years and subjected to torture and solitary confinement. Remarkably years after their release, they had lower-than-expected incidence of depression and PTSD. To determine how these men handled such a dire experience, yet in many cases came out stronger than before, they studied them intensely and came up with the following prescription for a **RESILIENT LIFE**. As you consider this list of attributes, research has indicated that the same markers

were found in women who had suffered severe trauma, especially sexual and physical abuse and combat exposure.

- **Establish and nurture a supportive social network** - Emotional strength comes from close meaningful supportive relationships.
- **<u>Be optimistic</u>** - Optimism is strongly related to resilience
- **Develop cognitive flexibility** - ability to reframe stressful events. Resilient POWs regard their years in captivity as horrendous, but they learned valuable things about themselves that they would not have learned in any other way.
- <u>Develop a personal "moral compass" or shatterproof set of beliefs</u>. Use of one's faith or sense of spirituality as a guiding force. Many POWs never lost their faith and prayed every day of their captivity.
- **Be altruistic** by helping others and being part of a group who survived together aided their coping abilities with extreme stressors. The belief in a survivor's mission can be a lifesaver to traumatized people.
- <u>Find a resilient model in a mentor or heroic figure</u>. Role models can be inspiring and provide valuable coping tips.
- Learn to be adaptive in facing your fears. Recognize that fear and other intense emotions like sadness, grief, anger are "normal" and can act as a guide. It is not that one has such intense feelings, but what one does with these emotions that is critical to adjustment.
- <u>Develop active coping skills</u>. Resilient individuals have a broad repertoire of coping skills that they can call upon to meet the demands of the situation. Sometimes they use direct action problem-solving coping skills and sometimes they use emotionally palliative acceptance coping strategies. Resilient Service Members also express confidence in their abilities to adapt to stressful situations.
- Have a sense of humor and laugh frequently. Positive emotions fuel resilience.
- <u>Keep fit</u>. Exercise is good for physical and psychological well-being and also enhances brain health and plasticity.

This **ROADMAP TO RESILIENCE** Handbook takes a page out of the playbook of Resilient Service Members and spells out in detail what they do to bolster their Resilience and deal with post-deployment stress effects. Resilience can be developed through focused training and by stress-inoculation training procedures. You can learn to recognize your own strengths and engage them to deal with challenging situations. We all have things we can do very well. The idea is to build on them when you are faced with stressful situations. You can learn to leverage your **RESILIENCE** into life changes.

EVIDENCE OF RESILIENCE IN CIVILIAN POPULATIONS

- Following a major natural disaster or as a result of intentional human-designed violent acts such as a terrorist attack, most individuals will be upset immediately following the trauma and may experience a variety of symptoms; but they will recover within a matter of days to weeks.
- 50% to 60% of the adult population in North America are exposed to traumatic events, but only 5% to 10% go on to develop psychiatric problems such as Post Traumatic Stress Disorders (PTSD) and related problems.
- There are approximately 110 million women in the United States. Epidemiological data indicates that some 68 million of whom will be victimized over the course of their lives. One in four females will experience some form of sexual and physical abuse and/or emotional neglect. 12% will be raped. Domestic violence occurs every 15 seconds. Some 38% of women will be repeatedly victimized. Yet, of those 68 million women, only 10% (about 7 million) will develop clinical problems that require professional assistance. While impacted by such victimization experiences, most women show remarkable resilience.
- Following the terrorist attack in New York City on 9/11, a survey 5 to 8 weeks post-incident found that only 7.5% of adults living in the vicinity of the attack developed Post Traumatic Stress Disorder (PTSD). A follow-up study in February, 2002 found that only 1.7% met the criteria of PTSD.
- In London, England, following the subway bombing in July 7, 2005, less than 1% sought professional help. 71% had been able to turn to friends or relatives for help.
- Up to 75% of people who are confronted with irrevocable loss do not show intense distress.
- Holocaust survivors, bereaved individuals, cancer and HIV/AIDS survivors, torture victims, victims of sexual abuse, rape, survivors of terrorist attacks, wars and natural disasters evidence remarkable resilience.
- Such resilience is <u>not</u> confined to adults. It is estimated that 25% of American youth experience serious traumatic events by their 16th birthday. These traumatic events include living in high risk crime-saturated poverty areas, witnessing violence at home, or experiencing neglect and abuse. Such risk factors often co-occur and pile-up over time and it is the cumulative number of risk factors that determine the mental and physical consequences. In spite of the widespread exposure to traumatic events, research indicates that ½ to 2/3 of such children evidence resilience and do <u>not</u> develop clinical problems, nor get into trouble with the law.
- Following the <u>natural disaster</u> of the 2004 Asian tsunami that was responsible for 280,000 deaths and more than one million displacements, researchers found that the prevalence rate for PTSD was only 6.4% among those from devastated Indian coastal villages. Coping

mechanisms existed at both the individual and community levels that enhanced resilience in the face of adversity and enabled normal functioning in the majority of those affected.

- In Thailand after the 2004 tsunami, the rate of PTSD in displaced people was only 12% two months post-incident. At 9 months post-incident, this rate dropped to 7%. In addition, the rates of depression and anxiety also decreased significantly.
- On May 12, 2008 in Sichuan Province in Western China, a 7.9 earthquake killed approximately 70,000 people. Despite horrific devastation, the New York Times columnist David Brooks observed that the local villagers were generally upbeat and optimistic, displaying few signs of mental disorders. He noted that

"These people have stripped down, pragmatic mentality. Move on or go crazy. Don't dwell, look to the positive. Fix what needs fixing. Work together".

The survivors quickly set about burying the dead, clearing rubble and reconstructing schools and other communal buildings. Such community-building efforts helped survivors cope and thrive.

APPENDIX A

RESILIENCE CHECKLIST

MY PERSONAL RESILIENCE PLAN

Creating A Vision of the Future

In each of the following **FITNESS** areas, identify the specific things you plan to do in order to improve your level of **RESILIENCE**. How much confidence do you have that you will be able to follow through on each Resilience Bolstering Behavior?

<u>P</u> <u>PHYSICAL FITNESS</u>
1. Take care of my body.
2. Exercise regularly.
3. Get good sleep.
4. Eat healthy.
5. Avoid mood-altering drugs, overuse of alcohol.
6. Manage pain (physical and emotional).
7. Avoid high-risk dangerous behaviors.
8. Other examples of ways I can KEEP PHYSICALLY FIT.
<u>I</u> <u>INTERPERSONAL FITNESS</u>
9. Recognize deployment changes everyone and that readjustment takes time.
10. Reconnect with social supports.
11. Lean on others and seek and accept help.
12. Give back and help others. Share my "islands of competence" with others.
13. Participate in a social network.
14. Share my emotions with someone I trust.
15. Strike a balance between my war buddies and my loved ones.

16. Overcome barriers to seeking help.
17. Renegotiate my role at home.
18. Use my communication (speaker/listener) skills and my social problem-solving skills.
19. Use my cultural or ethnic traditions, rituals and identity as a support aide.
20. Find a role model or mentor.
21. Use community resources such as Websites, telephone hotlines.
22. Be proud of the mission that I served with my "Band of Brothers/Sisters".
23. Use pets to maintain and develop relationships.
24. Other examples of ways to DEVELOP AND USE RELATIONSHIPS.
E EMOTIONAL FITNESS
25. Cultivate positive emotions (hobbies and pleasurable activities).
26. Engage in an UPWARD SPIRAL of my positive emotions, thoughts and behaviors.
27. Make a "BUCKET LIST" of emotional uplifting activities and then JUST DO IT!
28. Show " GRIT " ability to pursue with determination long-term goals. ("Choose hard right, over easy wrong").
29. Use positive humor.
30. Cope with intense emotions by using opposite actions.
31. Give myself permission to experience and share emotions (feel sad, cry, grieve, become angry).
32. Face my fears.
33. Engage in constructive grieving (memorialize and honor those who have been lost).
34. Share my story and the "rest of my story" of what led me to survive (share lessons learned).
35. Allow myself to share my "emotional pain" with someone I trust.

36. Journal use "writing cure".
37. Use creative expressive techniques (art, music) to process my feelings.
38. Enjoy the benefits of self-disclosure.
39. RESTORY my life and share evidence of my RESILIENCE.
40. Take specific steps to EMOTIONAL FITNESS.
41. Change my self-talk.
42. Engage in non-negative thinking and become more STRESS-HARDY.
43. Show gratitude.
44. Other examples to improve my EMOTIONAL FITNESS.
<u>T THINKING FITNESS</u>
45. Be psychologically flexible.
46. Use constructive thinking and consider alternative solutions/pathways.
47. Look at things differently.
48. Establish achievable goals.
49. Establish realistic expectations.
50. Nurture hope.
51. Be realistically optimistic.
52. Have self- confidence and self-efficacy.
53. Engage in benefit-finding. (Search for the silver lining).
54. Engage in benefit-remembering.
55. Engage in downward comparison. (Consider those less fortunate).
56. Go on a <u>meaning making mission</u> . List and share positive military experiences with others.

57. Engage in altruistic (helping) behaviors.
58. Find meaning in my suffering and move toward "post-traumatic growth".
59. Consider lessons learned from my deployment.
60. Be mindful stay in the present.
61. Maintain my "moral compass". Stick to my key values.
62. Be careful of the "stories" I tell myself and others. Use "RE" verbs in my story-telling
63. Change the messages that I send to my brain.
64. Avoid "THINKING TRAPS". (See list of what to avoid).
65. Nurture a positive view of myself, others and the future.
66. Celebrate small triumphs
67. Other examples of ways to improve my THINKING FITNESS.
B- BEHAVIORAL FITNESS
68. Develop safe regular routines.
69. Stay calm under pressure. Keep my cool.
70. Prepare for possible high-risk situations.
71. Break tasks into doable subtasks.
72. Get unstuck from the past.
73. Improve my "people-picking" skills. Avoid people, places and things that get me into trouble.
74. Take a "news holiday".
75. Co-exist with my difficult memories and use positive emotions to UNDO negative memories.
76. Self-disclose to a trusted person

77. Join a social group that gives my life a sense of purpose
78. Renegotiate my role and responsibilities.
79. Adopt a CAN DO attitude.
80. Read to find comfort.
81. Gather information (visit websites).
82. Avoid making things "worse".
83. Continue my "journey of healing" and view setbacks as "learning opportunities".
84. Use my ACTION PLANS and BACK-UP PLANS .
85. Other examples of ways to improve my BEHAVIORAL FITNESS.
S- SPIRITUAL FITNESS
86. Use POSITIVE religious/spiritual ways of coping.
87. Avoid using NEGATIVE religious/spiritual ways of coping.
88. Maintain HOPE.
89. Visit the Chaplain or some other clergy person for assistance.
90. Use some form of spiritual/religious/devotional activities.
91. Participate in spiritual and religious group.
92. Engage in spiritual/religious rituals.
93. Engage in commemorative services.
94. Forgive others and also forgive myself.
95. Use my religious beliefs as a coping tool. Create a Spiritual Family Tree. Write my Epitaph of what I want to be remembered for.
96. Share the spiritual lessons learned from my deployment.
97. Reset my "moral compass" and refocus on my core values and attributes that I brought home from my deployment.

98	8. Walk away from HATE and the desire for REVENGE.
99	9. Make amends with those who I have hurt.
10	00. Recognize that life is short and make the most of every moment.
1	01. Other examples of ways to improve my SPIRITUAL FITNESS.