AN EXPLORATION OF RESILIENCE, SPIRITUALITY AND POST TRAUMATIC GROWTH IN THE FACE OF TRAUMA

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Abstract
Traumatic events acquire both negative and positive qualities that reflect a person’s life. The negative side includes psychopathologies and the positive side includes transformation in lifestyle. The focus of the present research is to explore the positive transformation of females experiencing trauma as a result of Breast Cancer, Sexual Abuse and Spousal Bereavement. It was hypothesised that there would be significant group differences among the three traumas on the measure of Post traumatic growth, Resilience, Spirituality and also to examine their relationship. The data was collected using purposive sampling method and the size of the total sample was 90 (i.e. 30 females in each group). A three group design was followed where Post traumatic growth inventory by Tedeschi and Calhoun (1996) and Spirituality and Resilience Assessment Packet by Kass and Kass (2000) was administered on the three groups of trauma to meet the objectives. The results revealed significant differences between the groups indicating breast cancer cases mean scores to be highest. Also, significant positive relations were found between the variables, supporting positive growth in the sample. Overall, it can be concluded that an increase in the above factors is associated with self-reported positive life changes over time. Further research on related topics, based on the findings of the present and other studies, will undoubtedly advance our understanding of the positive psychological changes following breast cancer, sexual abuse and spousal bereavement.

Keywords
Post traumatic growth, Resilience, Spirituality, Trauma

INTRODUCTION
Trauma is defined as (1) the person experienced, witnessed or was confronted with an event or events that involved actual or threatened death or a serious injury, or a threat to the physical integrity of self or others and (2) the person's response involved is intense fear, helplessness or horror (APA, 2000). Some of the traumas are a sudden injury/serious accident, a physical/sexual assault, observing the death or serious injury of another person, natural disasters, chronic illnesses and others (Joseph, Williams, & Yule, 1997). Traumatic events acquire both negative and positive qualities that reflect a person’s life. The negative side includes psychopathologies and the positive side - transformation in lifestyle. The focus of the present research is to explore the positive transformation among females experiencing trauma as a result of Breast Cancer, Sexual Abuse and Spousal Bereavement.
A recent focus in the trauma literature has been on the possibility of positive psychological changes in the aftermath of
adversity and suffering. The topic of growth has become a magnet for research, with the pioneering work of Tedeschi and Calhoun who coined the term ‘Posttraumatic Growth’ (PTG) in 1995. They stated PTG as an individual's experience of significant positive change arising from the struggle with a major life crisis (Tedeschi & Calhoun, 2004).

It is important to understand that PTG is not simply a return to baseline functioning after a difficult life experience; rather, it represents a transformation that exceeds the baseline functioning. It is transformative positive change that (a) occurs most distinctively in the aftermath of trauma rather than during lower level stress, (b) appear to go beyond illusion, (c) is experienced as an outcome rather than a coping mechanism and (d) require a shattering of basic assumptions about one’s life that traumas provide but lower level stress does not (Tedeschi & Calhoun, 2004). The concept of PTG has two important implications. Firstly, in order for PTG to occur, a person has to be exposed to an event that is perceived as extremely undesirable and intense in nature (Tedeschi & Calhoun, 1996). Minor stressors or normal developmental processes are therefore not associated with the emergence of PTG. Secondly, positive changes occur only after the struggle has taken place (Bellizzi & Blank, 2006; Tedeschi & Calhoun, 2004).

A growing body of research suggests that majority of adults who are exposed to potentially traumatic events are resilient (Bonanno, Galea, Bucciarelli, & Vlahov, 2007). Scales, Benson, Leffert and Blyth (2000) conceptualized resilience as overcoming negative events and quickly returning to pre-trauma levels of functioning. Resilience has largely been conceptualized by most investigators as a dynamic process involving interactions of biological/psychological/social factors that ameliorate the negative effects of stressful life events to promote successful adaptation over an individual's life (Luthar & Zigler, 1991). When being confronted with specific stressful life events, resilient individuals find opportunities to exercise their decision making, confirm their priorities in life, set new goals and other complex activities. They experience similar events as compared to less resilient individuals, but they appraise the events as less stressful and maintain their optimism about their ability to cope with them (Alfred & Smith, 1989).

Although similar, PTG and resilience differ from one another in some subtle but important ways (Calhoun & Tedeschi, 2006). Carver (1998) distinguished between the two constructs by referring to resilience as a return to the previous level of functioning after adversity and by associating PTG with not merely returning to the previous level of functioning but exceeding it on some dimension. Implicit in this distinction is the assumption that for PTG to occur, a person has to display resilience and return to a healthy functioning before moving towards more effective subsequent functioning.

Spirituality comes from the Latin word Spiritus, meaning ‘breath of life’. It includes a personal sense of ultimate purpose, meaning and values and a sense of connectedness. It can encompass belief in and relatedness to, a transcendent reality, higher being or higher power. Studies investigating spirituality as a philosophy or attitude have found that individuals who report greater spirituality have improved subjective states of well-
being, improved quality of life and an increase in longevity (Levin, 1996). Spirituality can enhance a person's ability to cope with negative life events and that negative life events can cause enhanced spiritual growth. Spiritual involvement provides an important mechanism for coping with challenging traumatic events by alleviating symptoms such as depression, anxiety, hostility, better quality of life and an experience of more positive emotions (Fallot & Heckman, 2005).

Previous review has stated positive transformation in females experiencing various traumatic events (breast cancer, sexual abuse and spousal bereavement). In spite of the negative consequences associated with illness, breast cancer patients often try to find meaning and purpose in life (Tedeschi & Calhoun, 1995). Patients reported positive changes like better appreciation for the smaller things in life (Thornton, 2002), closer intimate relationships, spiritual growth and an enhanced sense of personal strength (Cordova & Andrykowski, 2003) following breast cancer diagnosis. Also, McMillen, Zuravin and Rideout (1995) found some benefit from the sexual abuse. Cobb, Tedeshi, Calhoun and Cann (2006) found that appreciation of life was the sole domain related to severity of abuse in a sample of sexual abuse victims. Moreover, finding an answer to the meaninglessness of a death is a critical part of the bereavement process that is related to positive outcomes such as PTG (Miles & Crandall, 1983). These positive changes may enhance wisdom and maturity, a new life perspective, increased independence and purpose in life (Kessler, 1987).

Resilience and spirituality also play a role in dealing with traumatic events. Wenzel et al. (2002) found a significant proportion of their sample of cancer survivors reported experiencing resilience and personal growth, which in turn promoted a sense of wellbeing. Gall, Charboneau and Florack (2011) investigated the role of spirituality in relation to perceived growth following a diagnosis of breast cancer. Also, spirituality was associated with improved quality of life and positive psychological adjustment styles suggesting additional benefits of enhanced spirituality (Cotton, Levine, Fitzpatrick, Dold, & Targ, 1999). Ahrens, Abeling, Ahmad and Hinman (2010) examined predictors and outcomes of spirituality and resilience among sexual assault survivors. Results suggested that spirituality and resilience was high in those who had PTG. Flynn (2000) suggested that spirituality leads to undoing the damage of the abuse and creating new aspects of the self and experience. Hyman and Willians (2001) concluded that resilience is a protective factor and helps the victim to bounce back from the adversities of sexual abuse.

Finding meaning in one’s life following a loved one’s death can represent a spiritual change that may result from bereavement. Continued connection with the deceased can encourage deepening of spirituality representing spiritual growth (Cait, 2004). Brown, Nesse, House and Utz (2004) found that loss of a spouse caused bereaved individuals to increase their self rating of the importance of their spiritual beliefs and an increased appreciation for life. Substantial amount of bereaved people indeed show resilience (Bonanno, Wortman & Nesse, 2004). Resilient pattern does not imply that such people experience no upset related to the loss of aversive event, but rather that their overall level of functioning is
essentially preserved (Bonanno, Moskowitz, Papa & Folkman (2005)).

Not all people who experience traumatic events actually become psychologically traumatized. Individuals report positive change following a serious life event and that the event provides them a learning opportunity to live life more fully (Park, Mills- Baxter, & Fenster, 2005). The data for present research was collected from females because they are more likely to suffer from adverse effects of traumatic events and develop growth more than males (Frans, Rimmo, Aberg, & Fredrikson, 2005). Also, there is a need to study the phenomena of positive growth in its cultural context. This is because most researches have been carried out in the west and may not lend insight into the nature of positive growth that women experience after adversity in the Indian cultural context. Overall, the present study was undertaken to understand the positive psychological change or PTG and the ability of individuals to bounce back in the face of trauma.

Based on the objectives, the following hypotheses are formulated:

1. There would be significant difference among females experiencing trauma as a result of breast cancer, sexual abuse and spousal bereavement on the measure of PTG with its dimensions, resilient and spiritual worldview.
2. There would be significant relation among the dimensions of PTG and Resilient/Spiritual Worldview in the females experiencing trauma as a result of breast cancer, sexual abuse and spousal bereavement.

METHODOLOGY

The purpose of the present research was to explore resilience, spirituality and PTG in the face of trauma.

PARTICIPANTS

The study population consisted of females experiencing trauma as a result of (a) breast cancer (b) sexual abuse and (c) spousal bereavement. The data was collected using purposive sampling method. The size of the total sample was 90 (i.e. 30 females in each group).

Identification of breast cancer cases was done with the help of doctors of Medical Oncology in various hospitals of New Delhi. Of 30 cases, 16 were from stage I and 14 were from stage II. Stage III and IV cases were not included. The information regarding sexual abuse cases was taken from the working staff of various NGO’s in New Delhi. The sample of bereaved women who lost their husbands, consisted of 30 cases aged between 30-60 years. Only those participants were included whose time since abuse was between 6 to 18 months.

TOOLS

Post Traumatic Growth Inventory (PTGI): The Posttraumatic Growth Inventory (PTGI) developed by Tedeschi and Calhoun (1996) was used to measure positive growth from the trauma. The current version consists of 21, positively worded items, with a 0-5 response choice. It assesses five dimensions of growth which are New Possibilities, Relating to Others, Personal Strength, Appreciation to Life and Spiritual Change. The PTGI has shown a high degree of internal...
consistency with Cronbach’s alpha coefficient $\alpha = 0.93$. (Cohen, Cimbolic, Armeli, & Hettler, 1998).

Spirituality and Resilience Assessment Packet (SRA): The Spirituality and Resilience Assessment Packet is a multidimensional self report instrument developed and revised by Kass and Kass (2000). It is a structured questionnaire which identifies the resilient, self defeating aspects of their worldview and the potential value of spiritual and psychological growth. The Cronbach’s alpha coefficients were found out to be $\alpha = 0.93$.

RESULTS AND DISCUSSION

The data were analyzed using descriptive and inferential statistics. Percentage of cases and range of PTG, resilient and spiritual worldview were depicted using bar diagrams. One-way Analysis of Variance (ANOVA) was used to analyze the significant differences between the means among the three groups (i.e. breast cancer, sexual abuse and spousal bereavement). Pearson Product Moment method of coefficient of correlation was used to see the relation of PTG with resilient and spirituality in total sample.

From table 1, it can be seen that the mean of breast cancer cases is highest for Resilient and spiritual worldview, overall PTG with its dimensions i.e. new possibility, appreciation to life and spiritual change. The mean for other two dimensions i.e. relating to others and personal strength is highest for spousal bereavement cases. Graph 1 shows PTG is found highest for sexual abuse followed by the same percentage for breast cancer and spousal bereavement cases. High PTG has same percentage for both the breast cancer and spousal bereavement followed by sexual abuse cases.

Table 1: shows Mean and S.D’s of Breast Cancer, Sexual Abuse and Spousal Bereavement cases on the measure of Post Traumatic Growth (PTG) with its dimensions, Resilient and Spiritual Worldview (N=30)

<table>
<thead>
<tr>
<th>Groups</th>
<th>Breast Cancer</th>
<th>Sexual Abuse</th>
<th>Spousal Bereavement</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>S.D.</td>
<td>Mean</td>
</tr>
<tr>
<td>Overall PTG</td>
<td>68.57</td>
<td>9.55</td>
<td>57.47</td>
</tr>
<tr>
<td>New Possibility</td>
<td>18.60</td>
<td>3.19</td>
<td>15.73</td>
</tr>
<tr>
<td>Relating to Others</td>
<td>18.77</td>
<td>3.29</td>
<td>17.37</td>
</tr>
<tr>
<td>Personal Strength</td>
<td>12.70</td>
<td>2.38</td>
<td>11.50</td>
</tr>
<tr>
<td>Appreciation to Life</td>
<td>10.17</td>
<td>1.74</td>
<td>7.17</td>
</tr>
<tr>
<td>Spiritual Change</td>
<td>8.30</td>
<td>1.23</td>
<td>5.77</td>
</tr>
<tr>
<td>Resilient Worldview</td>
<td>5.16</td>
<td>0.30</td>
<td>4.00</td>
</tr>
</tbody>
</table>
Graph 1 shows percentage of cases and range of Post Traumatic Growth (i.e. Low, Medium and High) for Breast Cancer, Sexual Abuse and Spousal Bereavement (N=30).

<table>
<thead>
<tr>
<th>Spiritual Worldview</th>
<th>23.90</th>
<th>3.73</th>
<th>19.87</th>
<th>5.08</th>
<th>21.20</th>
<th>4.63</th>
</tr>
</thead>
</table>

Graph 2 and 3 show low, medium and high resilient and spiritual worldview, which is found highest for spousal bereavement followed by breast cancer and sexual abuse cases. Resilient worldview is found highest for breast cancer followed by spousal bereavement and sexual abuse cases. High spiritual worldview is found highest for breast cancer followed by sexual abuse and spousal bereavement cases. Medium-low resilient and medium-low spiritual worldview is highest for sexual abuse followed by spousal bereavement and breast cancer cases; with not a single case of low resilient worldview in breast cancer cases. Low spiritual worldview has same percentage for sexual abuse and spousal bereavement cases with not a single case found in breast cancer cases.
Graph 2 shows percentage of cases and range of Resilient Worldview (i.e. Low, Medium Low, Medium High and High) for Breast Cancer, Sexual Abuse and Spousal Bereavement (N=30).

Graph 3 shows Percentage of cases and range of Spiritual Worldview (i.e. Low, Medium Low, Medium High and High) for Breast Cancer, Sexual Abuse and Spousal Bereavement (N=30).
Table 2 shows summary results of ANOVA on the measure of Post Traumatic Growth (PTG) and Resilient/Spiritual Worldview with its dimensions.

<table>
<thead>
<tr>
<th>Measures</th>
<th>Source of Variance</th>
<th>SS</th>
<th>df</th>
<th>MS</th>
<th>F-ratio</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall PTG</td>
<td>Between Groups</td>
<td>1971.49</td>
<td>2</td>
<td>985.74</td>
<td>8.14</td>
<td>0.001</td>
</tr>
<tr>
<td></td>
<td>Error</td>
<td>10540.33</td>
<td>87</td>
<td>121.15</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>12511.82</td>
<td>89</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New Possibility</td>
<td>Between Groups</td>
<td>136.07</td>
<td>2</td>
<td>68.03</td>
<td>5.50</td>
<td>0.006</td>
</tr>
<tr>
<td></td>
<td>Error</td>
<td>1076.03</td>
<td>87</td>
<td>12.37</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>1212.10</td>
<td>89</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relating to Others</td>
<td>Between Groups</td>
<td>64.95</td>
<td>2</td>
<td>32.48</td>
<td>2.16</td>
<td>0.122</td>
</tr>
<tr>
<td></td>
<td>Error</td>
<td>1309.53</td>
<td>87</td>
<td>15.05</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>1374.49</td>
<td>89</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Strength</td>
<td>Between Groups</td>
<td>37.80</td>
<td>2</td>
<td>18.90</td>
<td>2.54</td>
<td>0.085</td>
</tr>
<tr>
<td></td>
<td>Error</td>
<td>647.80</td>
<td>87</td>
<td>7.44</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>685.60</td>
<td>89</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appreciation to Life</td>
<td>Between Groups</td>
<td>137.69</td>
<td>2</td>
<td>68.84</td>
<td>20.75</td>
<td>0.000</td>
</tr>
<tr>
<td></td>
<td>Error</td>
<td>288.63</td>
<td>87</td>
<td>3.32</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>426.32</td>
<td>89</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spiritual Change</td>
<td>Between Groups</td>
<td>97.07</td>
<td>2</td>
<td>48.53</td>
<td>28.56</td>
<td>0.000</td>
</tr>
<tr>
<td></td>
<td>Error</td>
<td>147.83</td>
<td>87</td>
<td>1.70</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>244.90</td>
<td>89</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall Resilient Worldview</td>
<td>Between Groups</td>
<td>20.58</td>
<td>2</td>
<td>10.29</td>
<td>14.04</td>
<td>0.000</td>
</tr>
<tr>
<td></td>
<td>Error</td>
<td>63.78</td>
<td>87</td>
<td>0.73</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Total</td>
<td>84.36</td>
<td>89</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Overall Spiritual Worldview</td>
<td>Between Groups</td>
<td>253.35</td>
<td>2</td>
<td>126.68</td>
<td>6.22</td>
<td>0.003</td>
</tr>
<tr>
<td></td>
<td>Error</td>
<td>1772.97</td>
<td>87</td>
<td>20.38</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>2026.32</td>
<td>89</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

It is observed from table 2 that the F-ratio is statistically significant for spiritual and resilient worldview, overall PTG with its dimensions namely, new possibility, appreciation to life and spiritual change.
Table 3 shows inter-correlation of dimensions of Post Traumatic Growth and Resilient/Spiritual Worldview in total sample (N=90).

<table>
<thead>
<tr>
<th>Measures</th>
<th>PTG</th>
<th>NP</th>
<th>RO</th>
<th>PS</th>
<th>AL</th>
<th>SC</th>
<th>RW</th>
<th>SW</th>
</tr>
</thead>
<tbody>
<tr>
<td>Post Traumatic Growth (PTG)</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>New Possibility (NP)</td>
<td>0.86*</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relating To Others (RO)</td>
<td>0.84*</td>
<td>0.79*</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal Strength (PS)</td>
<td>0.77*</td>
<td>0.41*</td>
<td>0.47*</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appreciation To Life (AL)</td>
<td>0.82*</td>
<td>0.57*</td>
<td>0.47*</td>
<td>0.80*</td>
<td>--</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spiritual Change (SC)</td>
<td>0.64*</td>
<td>0.42*</td>
<td>0.29</td>
<td>0.63*</td>
<td>0.62*</td>
<td>--</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resilient Worldview (RW)</td>
<td>0.89*</td>
<td>0.77*</td>
<td>0.68*</td>
<td>0.69*</td>
<td>0.76*</td>
<td>0.62*</td>
<td>--</td>
<td></td>
</tr>
<tr>
<td>Spiritual Worldview (SW)</td>
<td>0.61*</td>
<td>0.44*</td>
<td>0.50*</td>
<td>0.49*</td>
<td>0.57*</td>
<td>0.50*</td>
<td>0.61*</td>
<td>--</td>
</tr>
</tbody>
</table>

*p< 0.05; ** p< 0.01

Table 3 shows inter-correlations of PTG and Resilient/Spiritual Worldview in the total sample. It can be seen that significant moderate to high correlations are found between overall PTG and its dimensions and the variables of resilient and spiritual worldview.

DISCUSSION

The purpose of the present research was to explore resilience, spirituality and PTG in the face of trauma. The present study was taken to understand what positive changes these women could experience as a result of exposure to traumatic events that were severe in nature and to what extent these experiences would enhance the meaningfulness in their lives.

It was hypothesized that there would be significant differences among females experiencing trauma as a result of breast cancer, sexual abuse and spousal bereavement on the measure of overall PTG with its dimensions, Resilient and Spiritual Worldview. The hypothesis was supported as significant differences were found between three groups on the measure of Resilience, Spirituality and overall PTG with its dimensions of new possibility, appreciation to life and spiritual change indicating that the mean was highest in the cases of breast cancer followed by spousal bereavement and sexual abuse. Previous studies have shown that 53%-83% of breast cancer patients reported positive changes after diagnosis and treatment (Sears, Stanton, & Danoff-Burg, 2003; Taylor, 1983).

It was observed that breast cancer cases were able to identify new possibilities in their lives and discovered the possibility of taking a new path. Many participants in the present research reported as life is unpredictable, they wanted to take advantages of opportunities by adapting to a new lifestyle in order to increase the quality of their lives. These
participants developed strength of mind, willpower and optimism post cancer. It helped them develop new life skills to handle future crises with greater ease. The above results also indicated that breast cancer cases reported positive changes in life philosophy such as appreciating each new day and reported a major shift in how they approach and experience their daily lives. In this context, Thornton (2002) also reported that an increase in benefit finding among cancer patients was linked to a better appreciation for smaller things which endorsed a sense of discovering new possibilities in everyday life.

Breast cancer cases got involved in spirituality much more than before. The results were supported by Gall, Charbonneau and Florack (2011) who investigated the role of spirituality in relation to perceived growth following a diagnosis of breast cancer. Specifically, the participants in the present study depended on prayer as they viewed it as a mediator which would help them in dealing with their condition. This might be because they viewed God’s role in illness management. In this context, a participant reported that “I thank my God everyday for the faith in my heart because it is this faith that sustained me.”

Moreover, Deshields, Tibbs, Fan and Taylor (2006) who contended that resilience is an important consideration in the context of breast cancer research because many women consider their cancer diagnosis as life threatening. In the present research, the reason for better resilience in breast cancer cases can be that they develop certain characteristics during the course of their illness like making a spiritual connection, having meaningful work, engaging in social activism, being a self-directed learner, living a healthy lifestyle and expressing a wide range of feelings which is also consistent with a brief review by Mulcahy (1996) on resilience. Many participants in the present research reported that their condition helped them to develop problem solving and positive thinking skills that led them to become self confident and resilient. A participant reported that “Cancer made me stronger than before. I feel I am stronger than ever and that is because of God’s blessing and my will power.”

Significant positive relations were found between PTG and its dimensions in the total sample. This indicated that finding new possibilities in life was highly linked to positive psychological change after struggling with a traumatic event. In the present study, women started engaging themselves in new and different path of life that led to a development of new directions which further enhanced PTG. They stated that those who experience positive changes after trauma not only positively change their viewpoints of themselves, but also experience strengthened relationships and meaningful engagement in activities (Davis & McKearney, 2003). In the present study, it was observed that these women perceived a control over their traumatic situation and developed personal strength. The strength and positive relation with others helped them develop new directions in life which ultimately led to positive psychological growth. The strength that participants reported referred to managing fear and negative emotions associated with their condition. They reported it coming in two ways, either becoming stronger than before or discovering strength one was unaware of.
Spiritual change also helped the participants to cope with the loss. This is because they established a stronger relationship with the higher existence that led to increased feelings of control and tendency to seek meaning in life. In this context, a participant reported that “after the event, I felt that my life was shattered. But then it is my continued belief in God that is helping me to deal with the abuse. My belief in God is helping me to cope positively.” Overall, the groups reported positive psychological changes, including increased independence and maturity, better relationships, improved ability to cope with other crises, a deepening of spiritual beliefs and an increased belief in them. These findings were consistent with previous research (Calhoun & Tedeschi, 1989-1990).

Qualitative and descriptive studies suggested that some people experience resilience, greater appreciation of life and changed priorities, better relationships with family and others and positive changes and spirituality as a result of their experience with cancer (Belec, 1992; Fromm, Andrykowski, & Hunt, 1996). Similarly, in the context of sexual abuse, Liem, James, O’Toole and Boudewyn (1997) found the relation between resilience and PTG. Overall, it can be stated that the resilient pattern reported by the three groups helped them to deal successfully with the adversities of their life. But it did not mean that they did not experience any upset related to an aversive event. Despite of their adversity, their overall level of functioning was essentially preserved. They also reported meaningfulness in life which gave them a sense of power to deal with future adversities.

Every research has some limitations. The present study consists of 30 participants in each group. This sample size does not provide a safe basis for generalization of the findings of the study. Generalizations were constrained since the sample was taken purely on convenience. Also, self report data could be biased and may not provide the most valid or accurate accounts of an individual’s behaviour. Future research should employ large samples and different research design to better understand the relationships between the variables used in the present study. Further studies should work towards articulating other characteristics like time since trauma, age, personality characteristics, coping styles etc and can also include other variables like social support, emotion regulation, etc.

CONCLUSION

Overall, it can be concluded that significant differences were found between the three groups indicating the mean of breast cancer cases to be highest. Also, significant positive relations were found between the variables indicating positive growth. The current study did reveal some intriguing findings with regard to the positive growth. It is hoped that it will add to the literature and motivate future researchers to explore in greater detail the experience of positive growth in those who find themselves facing traumatic events in the Indian context.

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