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Post Traumatic Growth

My friend Mary was the mother of five children – a boy, a girl, and then, after a space, three boys, all in rapid succession. Her youngest sons were all gay, and all contracted AIDS. It was 1987; within months, all three were all dead.

From diagnosis to deathbed, Mary was the primary caregiver for each of them. By the third of those three memorial services, I was pretty sure that hers was next. She told the stories over and over, and the shattering endings were always the same. There was nothing I could do but listen, staggering a little under the weight of keeping vigil with her grief.

And then a chance meeting changed everything. One day, as Mary was leaving my study, the person waiting to see me was another surviving mom. I introduced them. It could have gone any number of ways, or nowhere, but it went so well that I never got a word in edgewise. I stood watching, amazed, as, within the first few minutes, Mary found her true calling. From that moment, on, and for as long as she lived – a long life of love and service – as the lives of other parents, partners, and friends threatened to spin into a terrible darkness, Mary was there to steady them.

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I've been obsessed with *resilience* from the moment I learned the word. Apparently, there's "a research principle called 'falling up,' which refers to how some 'positive outliers' ... manage to [grow] not despite a trauma, but because of it."¹ All of us have heard of PTSD – Post Traumatic Stress Disorder. But have you heard of Post Traumatic Growth?

Trauma – a reversal of fortune, catastrophic illness or injury, natural disaster, war, untimely death – trauma is never good; I have nothing good to

¹ Shawn Achor, founder of Good Think, Inc. He is the author of *The Happiness Advantage* (please see the chapter entitled "Falling Up") and *Before Happiness*.

say about it. But given that 75 percent of us² will experience trauma at some point in our lifetimes, it's deeply encouraging to know that it doesn't have to be the unhappy ending to the story, or the event that bifurcates our lives into "before" and "after," with everything good on the "before" side. It can be the catalyst for a far better outcome to "What now?"

In the 1980s, scientists Richard Tedeschi and Lawrence Calhoun began to study what it is that makes the difference between people for whom trauma is a dead end and trauma is a springboard. To their surprise, they found that "the majority of trauma survivors' lives had changed for the better.... [They] had much greater inner strength than they ever thought [possible, and] were closer to friends and chosen family members.... They were reorienting their lives towards more fulfilling goals ... [and] life had more meaning." In 1996, Tedeschi and Calhoun coined the term Post Traumatic Growth.³

They found three through-lines to growth:

First, these survivors believe that their choices, their behavior, still matter.

Second, their lives are deeply rooted in social support.

And third, they're able to change the way they tell the story of their trauma, focusing on the good that has come in its wake.⁴

In a TED talk entitled *The Best Gift I Ever Survived*, Stacey Kramer describes her "adventures" with a brain tumor, and cautions that, despite the good news of post-traumatic growth, the path that begins at brokenness and leads to healing is rarely smooth or short. It demands acceptance of the past and a commitment to define and redefine what recovery looks like. And it's critical that we not burden each other or ourselves with the expectation of growth. That said, Dr. Karen Reivich, co-author of *The Resilience Factor*, says that resilience is founded on a set of skills that any of us can cultivate. There are six:

One: Choose optimism. "Pessimists," she says, "underestimate how much control they have. They tend to focus their mental energy on things

² Paul Rendon, "Post-Traumatic Stress's Surprisingly Positive Flip Side," New York Times *Magazine*, March 22, 2012. Please see nytimes.com/2012/03/25/magazine/post-traumatic-stress-surprisingly-positive-flip-side.html?_r=0

³ Rendon, *op cit*

⁴ Achor, *op cit*

they can't change. "With some mindfulness," Dr. Reivich says, "[we] can direct [our] attention toward positive aspects of the situation and what [we] can control.... It is a habit that can be developed." She encourages everyone to keep what she calls a "hunk of good stuff" journal. "People who make a habit of gratitude" have better sleep, better health, less stress, less depression, and better life satisfaction.

Two: Increase mental agility. "Mental agility is the ability to see situations fully, accurately, and from multiple perspectives." Dr. Reivich points out two of the most common "thinking traps:" the "me-me-me trap," the tendency to blame ourselves; and the "them-them-them" trap, meaning it's always someone else's fault. The trick to mental agility is to avoid those pitfalls.

Three: Cultivate self-awareness. Pay attention to thoughts, feelings, and inclinations. Self-knowledge is a multi-tool in the recovery toolkit.

Four: Don't catastrophize! We can learn to self-regulate.

Five: Focus on strengths. The trick to resilience is building the muscles – including the spiritual muscles – that will carry us through our recovery. We can recruit people with complementary strengths to carry what's too heavy for us; and

Six: Deepen connections. Recovery is not a solitary endeavor, and to rely on others is not a sign of weakness.⁵

The United States Army now teaches a ten-day Master Resilience Trainer course, designed "to help create a more psychologically fit army." It's shepherded by Brigadier General Rhonda Cornum, a physician, pilot, and competitive equestrian. Serving as a flight surgeon on a rescue mission in the first gulf war, Dr. Cornum's Black Hawk helicopter was shot down. She woke up under the wreckage, pinned to the ground. Both her arms were broken. She was taken prisoner of war and held for eight days.

In her book, *She Went to War*, Rhonda Cornum writes, "I was badly injured, but I knew that I would heal eventually. The crash had been so

⁵ Amanda Enayati, *Steps to help you thrive in hard times*, CNN, August 24, 2011. Please see cnn.com/2011/HEALTH/08/24/thrive.in.hard.times.enayati/

devastating that I should have died then, and I regarded every minute I was alive as a gift. The Iraqis could have killed us easily when they found us at the crash site, but they chose not to. Then in the circle of men, a slight pressure on a single trigger would have been enough to kill us, but we had been spared. It was just good-enough luck for me to grab onto and hold. I vowed to survive.”

When New York Times reporter Jim Rendon suggested to Dr. Cornum that most people would be hard-pressed to find anything resembling luck in that situation, she laughed. “It’s the only way I would think. I’ve been practicing that my whole life. If you don’t do that, why would you ever proceed with anything?”⁶

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The traditional view of trauma was that you either got PTSD or you were fine. Obviously, it’s messier than that. Trauma survivors lose sleep, have recurring flashbacks, and experience fear or guilt. Most experience a spectrum of symptoms – not necessarily right away, and sometimes years after the trauma – and are molded by it in complex ways. The majority do recover,⁷ but there’s “an intricate dance between post-traumatic stress and post-traumatic growth.”⁸

Stephen Joseph, author of *What Doesn’t Kill Us*, writes, “Post-traumatic growth does not ... mean that the [survivor] will be free of the memories of what has happened to them, the grief they experience, or other forms of distress, but that they live their lives more meaningfully in the light of what happened.”⁹

“Imagine that ... you accidentally knock a treasured vase off its perch,” he continues. “It smashes into tiny pieces. What do you do? Do you try to put the vase back together...? Or do you pick up the beautiful colored pieces and use them to make something new, such as a colorful mosaic? When adversity strikes, people often feel that ... some part of them ... has been smashed – ... their view of the world, their sense of themselves, their relationships.... Those who try to put their lives back together exactly

⁶ Rendon, *op cit*

⁷ Allegedly, some 85 percent of soldiers have no lasting adverse reaction to combat; interesting if true. Please see Rendon, *op cit*

⁸ Stephen Joseph, *What Doesn’t Kill Us*. Please see huffingtonpost.com/stephen-joseph/what-doesnt-kill-us-post_b_2862726.html

⁹ Joseph, *op cit*

as they were remain fractured and vulnerable. But those who accept the breakage and build themselves anew become more resilient and open to new ways of [being]....¹⁰

“We can learn to cultivate growth in ourselves,” Stephen Joseph concludes, “understanding the significance of our experiences in ways that construct meaning,” establish “hopefulness,” and encourage us to view ourselves “as survivors and ... ‘thrivers.’”¹¹

Jim Rendon adds, “We bend, we break, we repair and rebuild, and often we grow, changing for the better in ways we never would have if we had not suffered.”¹²

Dr. Rachel Naomi Remen is the co-founder and medical director of the Commonweal Cancer Help Program in Bolinas, California. This is her story – well worth repeating:

“... A man [came] into my practice with bone cancer. His leg was removed at the hip to save his life.

“He was twenty-four years old, ... and he was ... very angry [and bitter]. He felt a deep sense of injustice and a ... deep hatred for all well people, because [his life] seemed so unfair to him.

“I worked with [him] through his grief and rage and pain, using [imagery and art] and ... psychotherapy. After ... more than two years, there came a profound shift.... [and] he started to visit other people who had suffered severe physical losses....

“Once, he visited a young woman [about his age]. It was a hot day in Palo Alto and he was in running shorts, so his artificial leg showed when he came into her hospital room. The woman was so depressed about the loss of both her breasts that she wouldn’t even look at him....

“The nurses had left her radio playing.... Desperate to get her attention, he unstrapped his leg and began dancing around the room on one

¹⁰ Joseph, *op cit*

¹¹ Joseph, *op cit*

¹² Rendon, *op cit*

leg, snapping his fingers to the music. She looked at him in amazement, and then burst out laughing.... ‘Man,’ [she said,] ‘if you can dance, I can sing.’

“... [When] we sat down to review our work together, ... I opened his file and ... handed ... him ... several drawings.... ‘Oh,’ [he said,] ‘look at this.’ He showed me one of his earliest drawings. I had suggested he draw a picture of his body. He had drawn a ... vase, and running through the vase was a deep ... crack.... He had taken a black crayon and ... drawn the crack over and over again, ... grinding his teeth with rage.... It was very, very painful because it seemed to him that this vase could never function as a vase again; it could never hold water.

“...‘This one,’ [he said,] ‘isn’t finished.’ [I extended] the box of crayons. ‘Why don’t you finish it?’ He picked a yellow crayon and [put] his finger on the crack.... ‘You see here, where it’s broken.

This is where the light comes through.’

And with the yellow crayon, he drew light streaming through the crack in his body. *We can grow strong at the broken places.*”¹³

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Beloved spiritual companions,

Here’s to resiliency:

choose optimism, increase mental agility, cultivate self-awareness, don’t catastrophize, focus on strengths, and deepen connections.

Here’s to post-traumatic growth:

“We bend, we break, we repair and rebuild,
and often we grow,
changing for the better in ways we never would have
if we had not suffered.”¹⁴

May we “fall up,” survivors and thrivers.

The light streams through the crack.

May we “build ourselves anew.”¹⁵

May we “grow strong at the broken places.”¹⁶

¹³ Dr. Rachel Naomi Remen, *Kitchen Table Wisdom*

¹⁴ Rendon, *op cit*

¹⁵ Joseph, *op cit*

¹⁶ Remen, *op cit*