

Psychotraumatology, Post-traumatic Growth and Resilience – How we address the Disturbed Reality

37th Social Psychiatry Conference „Promoting mental health resilience“

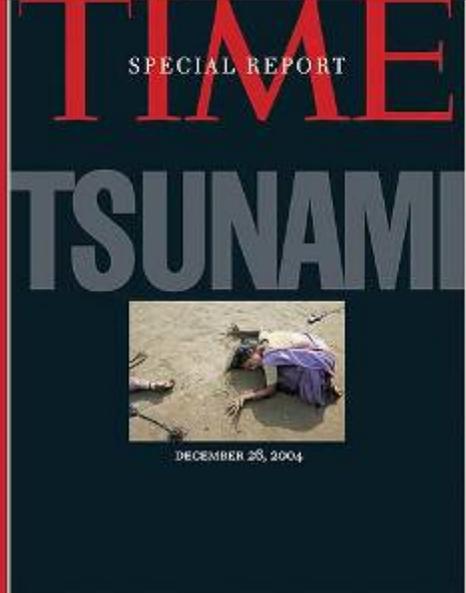
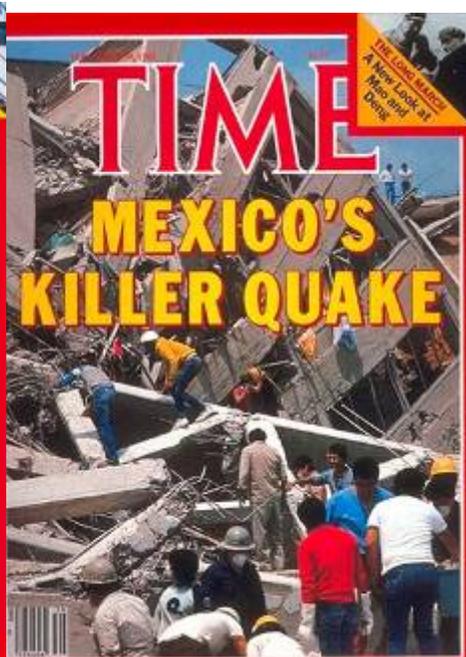
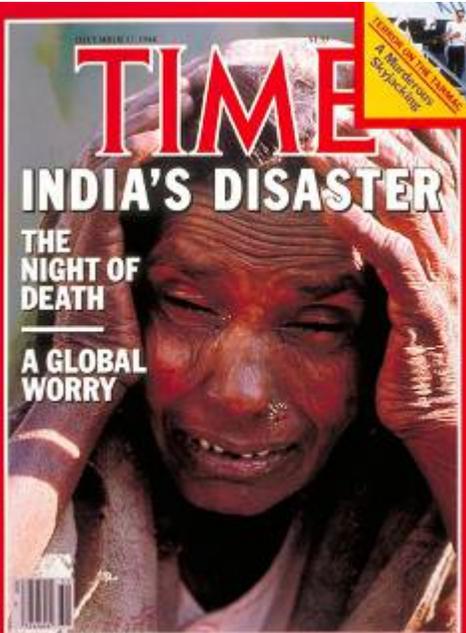
Clarion Congress Hotel Ústí nad Labem.

October, 5, 2023

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Foundation Global Initiative on Psychiatry –Tbilisi (GIP-T)



Everyone feels helpless and wants to help !!!

NEWS

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Ukraine in maps: Tracking the war with Russia

3 days ago

Russia-Ukraine war

By The Visual Journalism Team

BBC News

Ukraine has been widening the breach in Russia's defences in the southern Zaporizhzhia region as its counter-offensive continues to make slow progress against Moscow's forces.



ALAMY STOCK PHOTO Iranian made Shahed drones pictured in Tehran.

DRONE ATTACK

Russian drones hit Ukrainian port of Izmil overnight

The Ukrainian air force said 33 Russian attack drones were launched during the night in several groups.

Different Types of Disasters/Traumas

- Natural disasters
 - Earthquake
 - Flooding
 - Eruptions of volcano's
- Man-made disasters
 - War
 - Technological disasters (explosions, collapse of bridges, traffic accidents, plane crashes, ships, trains, collapse of dams, nuclear radiation)
 - Terrorist threat and attacks
 - Other military and paramilitary actions

What is trauma?

- Trauma is the Greek word for "wound". Although the Greeks used the term only for physical injuries, nowadays trauma refers to emotional wounds as well.
- Psychological trauma is an emotional response caused by severe distressing events such as accidents, violence, sexual assault, terror, or sensory overload (APA).
- Impact of the trauma is felt at all domains – individual, family, community and society (when the trauma is massive)

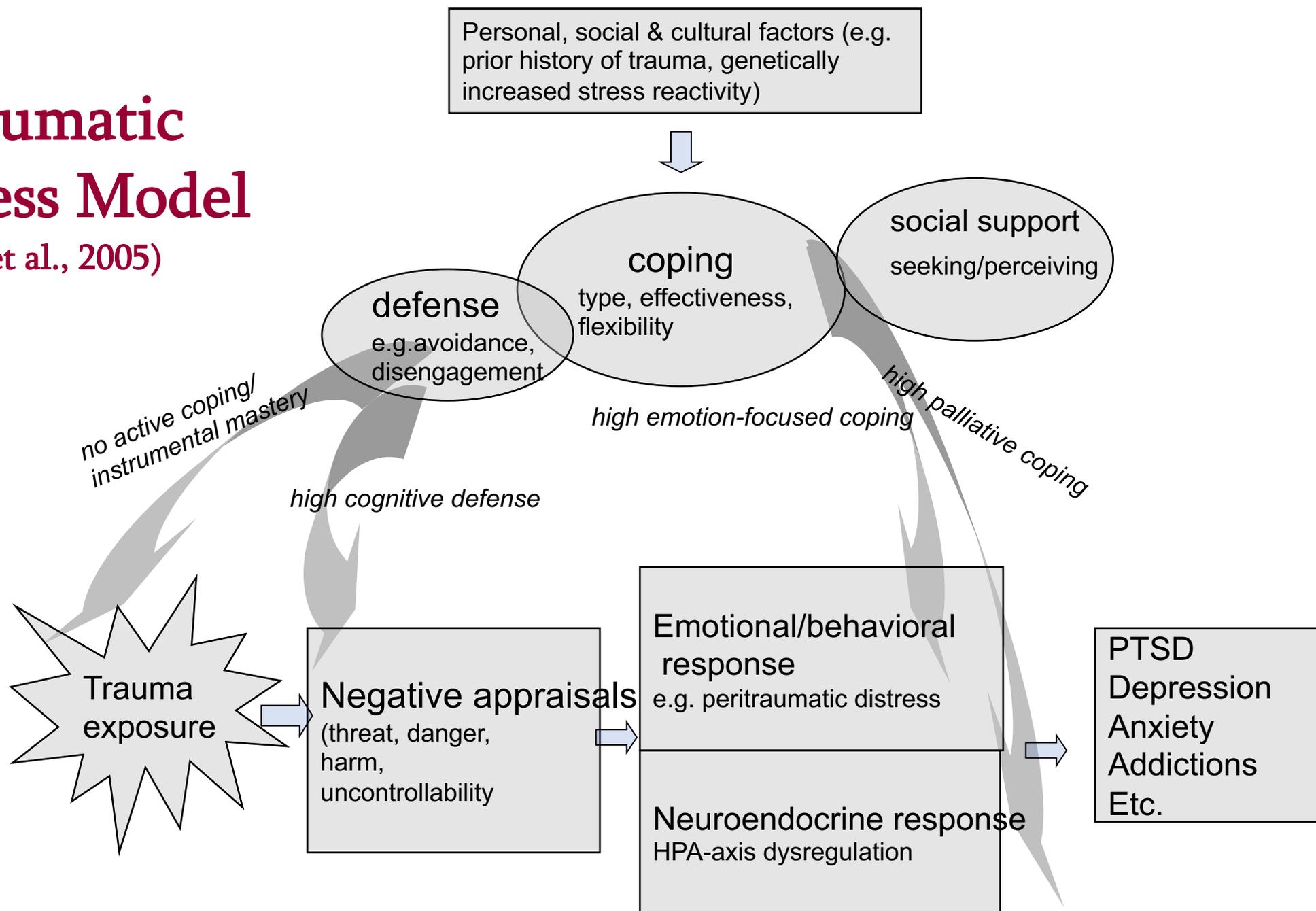
What is psychotraumatology?

- In the early 1980s, the scientific field of psychotraumatology arose with the first description of posttraumatic stress disorder (PTSD) as a new diagnostic category in DSM-III (Maercker & Augsburger, 2019)
- Psychotraumatology is a base field of study that focuses on the reactions of people and societies to trauma-based situations or experiences as well as the psychotherapies and prevention policies of traumas (Ozturk et al., 2021)



Traumatic Stress Model

(Olf et al., 2005)



Some mental health conditions after disasters

Acute stress
reactions

Posttraumatic
stress disorder
(PTSD)

Complex PTSD

Depression

Anxiety Disorders

Medically
unexplained
physical symptoms
(MUPS)

Addictions

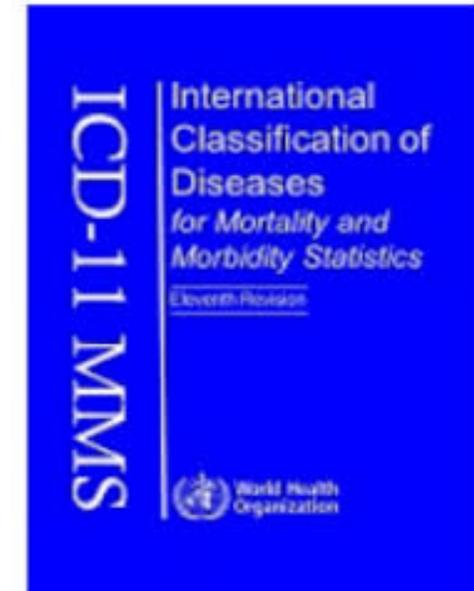
WHO ICD-11 (WHO, 2019/21): Disorders specifically associated with stress

ICD-11 DIAGNOSTIC GUIDELINES Disorders Specifically Associated with Stress

Note: This document contains a pre-publication version of the ICD-11 diagnostic guidelines for Disorders Specifically Associated with Stress. There may be further edits to these guidelines prior to their publication.

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PTSD in ICD- 11

- PTSD is a syndrome that develops following exposure to following exposure to an extremely threatening or horrific event or series of events:
 - e.g. experiencing natural or man-made disaster, combat, serious accident, life-threatening illness, sexual assault or rape, or the sudden, unexpected or violent death of a loved one; witnessing the violent death of others. Traumatic events also include experiences that may be repeated or occur for long periods of time from which escape was difficult or impossible such as being the victim of torture, childhood sexual or physical abuse or domestic violence, other forms of sustained violence
- 3 main criteria/clusters:**
- Re-experiencing
 - Avoidance
 - Persistent perception of heightened current threat
-
- The significant impairment in personal, family, social, educational, occupational or other important areas of functioning.
 - Time frame: at least 4 weeks (min. 1 month).

Complex PTSD

- A new diagnosis in ICD 11
- PTSD plus symptoms of disorganisation of self organisation (DSO)
- Multiple Trauma
- Traumatized under age of 26
- Developmental impact
- Attachments impact
- CPTSD is also a syndrome that develops following exposure to an extremely threatening or horrific event or series of events
- ... *most commonly* prolonged or repetitive events from which escape is difficult or impossible (e.g., torture, slavery, genocide campaigns, prolonged domestic violence, repeated childhood sexual or physical abuse).

Comparison of Criteria of PTSD and Complex PTSD

06 B 00 “Gatekeeper” Criterion: Traumatic Stressor

06B40 PTSD	06B41 Complex PTSD
Re-experiencing	Re-experiencing
Avoidance	Avoidance
Persistent perception of heightened current threat	Persistent perception of heightened current threat
	Affect dysregulation
	Negative self concept
	Interpersonal disturbances

Prevalence of PTSD, treatment seeking and factors associated with the condition (Koenen et al., 2017)

- Data were analyzed from 26 population surveys in the World Health Organization World Mental Health Surveys. A total of 71 083 respondents ages 18+ participated.
- The cross-national lifetime **prevalence of PTSD was 3.9%** in the total sample and **5.6% among the trauma exposed**.
- Half of respondents with PTSD reported persistent symptoms.

Psychol Med. 2017 October ; 47(13): 2260–2274. doi:10.1017/S0033291717000708.

Posttraumatic stress disorder in the World Mental Health Surveys

K. C. Koenen^{1,*}, A. Ratanatharathorn², L. Ng³, K. A. McLaughlin⁴, E. J. Bromet⁵, D. J. Stein⁶, E. G. Karam^{7,8}, A. Meron Ruscio⁹, C. Benjet¹⁰, K. Scott¹¹, L. Atwoli¹², M. Petukhova¹³, C. C.W. Lim^{11,14,15}, S. Aguilar-Gaxiola¹⁶, A. Al-Hamzawi¹⁷, J. Alonso¹⁸, B. Bunting¹⁹, M. Ciutan²⁰, G. de Girolamo²¹, L. Degenhardt²², O. Gureje²³, J. M. Haro²⁴, Y. Huang²⁵, N. Kawakami²⁶, S. Lee²⁷, F. Navarro-Mateu²⁸, B.-E. Pennell²⁹, M. Piazza^{30,31}, N. Sampson¹³, M. ten Have³², Y. Torres³³, M. C. Viana³⁴, D. Williams³⁵, M. Xavier³⁶, and R. C. Kessler¹³ on behalf of the WHO World Mental Health Survey collaborators

- Treatment seeking in high-income countries (53.5%) was roughly double that in low-lower middle income (22.8%) and upper-middle income (28.7%) countries.
- Social disadvantage, including younger age, female sex, being unmarried, being less educated, having lower household income, and being unemployed, was associated with increased risk of lifetime PTSD among the trauma exposed.

Prevalence of Complex PTSD

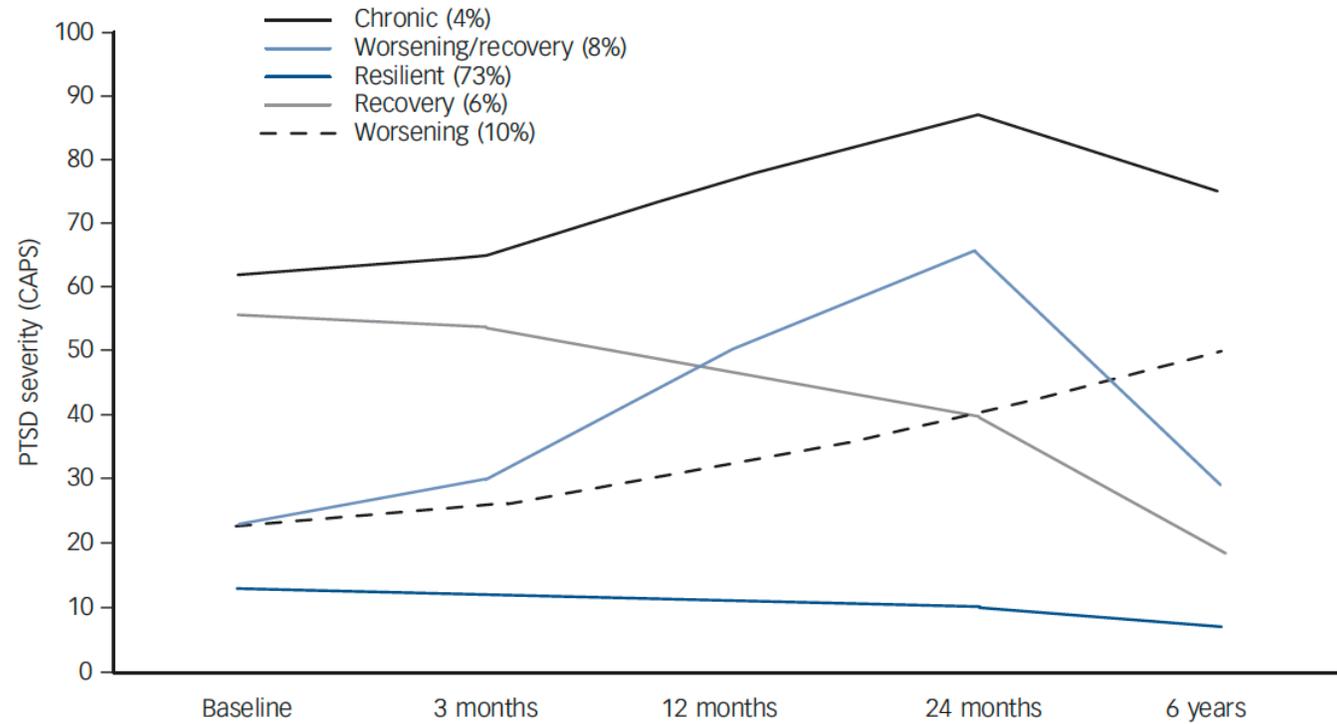
- Limited data available
- Nationally representative adult samples
- US sample (N=1839) total prevalence = 7.2% (Cloitre et al., 2019)
 - 3.4% = PTSD
 - 3.8% = CPTSD
- Israel: PTSD = 6.7% & CPTSD = 4.9% (Hyland et al., 2020)
- Ireland: PTSD = 5.0% & CPTSD = 7.7% (Hyland et al., 2021)
- Those with CPTSD were the most psychologically distressed.

Predictors of PTSD & CPTSD

- Limited data available
- Gender
 - Women 2.5 x more likely to be diagnosed with PTSD; 1.8 x likely to be diagnosed with CPTSD
- Evidence of a relationship between cumulative childhood trauma and PTSD (OR 2.6 for ≥ 4 traumas).
- Evidence of a much strong relationship between childhood trauma and CPTSD (OR 21.9 for ≥ 4 traumas)

Trajectories of psychosocial reactions

(Bryant, 2018)



Different Outcomes of Trauma exposure (Papadopoulos, 2004)

THE TRAUMA GRID

<i>Levels</i>	Negative			‘Neutral’	Positive
	INJURY, WOUND			RESILIENCE	ADVERSITY- ACTIVATED DEVELOPMENT (AAD)
	Psychiatric Disorders, PTSD	<i>Distressful Psychological Reactions</i>	Ordinary Human Suffering		
Individual					
Family					
Community					
Society/culture					

Post Traumatic Growth

“Positive psychological change experienced as a result of the struggle with highly challenging life circumstances”



Five broad domains

- Appreciation of life
- New possibilities
- Spiritual change
- Closer relationships
- Personal strength



1,620,704 views | Majd Mashharawi • TEDWomen 2018

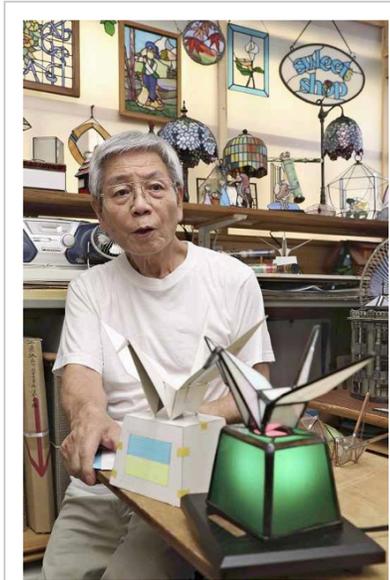
Like (48K)

How I'm making bricks out of ashes and rubble in Gaza

Majd Mashharawi was walking through her war-torn neighborhood in Gaza when an idea flashed in her mind: What if she could take the rubble and transform it into building materials? See how she designed a brick made out of ashes that's helping people rebuild their homes -- and learn about her new project: bringing solar-powered energy to families living in darkness.

By Madoka Mamezuka / Yomiuri Shimbun Staff Writer

6:00 JST, August 5, 2022



The Yomiuri Shimbun
Okihito Terao speaks of his wish for peace in Asa-Minami Ward, Hiroshima City.

HIROSHIMA — An 81-year-old stained-glass artist, who experienced the 1945 atomic bombing of Hiroshima, made an artwork depicting a paper crane and gave it to the Ukrainian Embassy in Japan, with hopes for peace.

Okihito Terao of Asa-Minami Ward in the city said that the scenes of Ukrainian cities devastated by Russia's aggression overlapped with his memories of Hiroshima in the aftermath of the atomic bombing. That prompted him to create the work to convey his wish for peace from the atomic-bombed city.

Terao plans to speak about his thoughts on Ukraine, which has been under attack, at a storytelling event on Aug. 6, the date when an atomic bomb was dropped on Hiroshima 77

years ago.

At the age of 4, Terao heard a loud explosion while playing with one of his two brothers in Gion, now Asa-Minami Ward, where they had taken refuge during World War II. The force of the blast blew them off their feet.

The Mental State of the World Report 2020

(Newson et al., Mental State of the World 2020, Mental Health Million Project, Sapien Labs, March 15th, 2021, doi:10.5281/zenodo.4603620)

- The survey was conducted in eight English-speaking countries (Canada, the United States, the United Kingdom, South Africa, Singapore, Australia, New Zealand, and India).
- 49,000 adults (IV- XII, 2020).
- Respondents were categorized as clinical, at-risk, enduring, managing, succeeding, and thriving.



- The study showed that 57% of respondents experienced some COVID-19-related adversity or trauma;
- Roughly one quarter ($\frac{1}{4}$) showed clinical signs of or were at risk for a mood disorder;
- 40% described themselves as "succeeding or thriving."

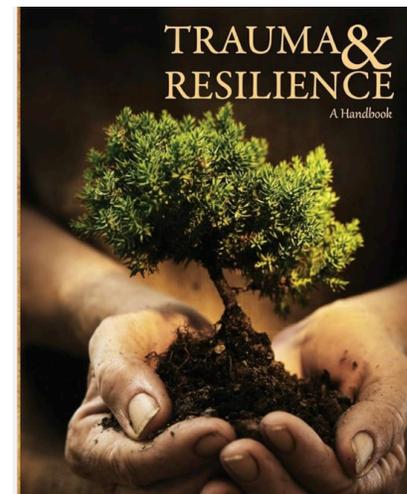
What is resilience?



- The American Psychological Association (2014) defines resilience as “the process of adapting well in the face of adversity, trauma, tragedy, threats or even significant sources of stress” — such as family and relationship problems, serious health problems or workplace, financial stressors and traumatic experiences.
- Resilience is the capacity and dynamic process of adaptively overcoming stress and adversity while maintaining normal psychological and physical functioning (Russo et al., 2012; Rutter, 2012; Southwick and Charney, 2012).



- Being resilient does not mean that a person doesn't experience difficulty or distress.
- Emotional pain and sadness are common in people who have suffered major adversity or trauma in their lives.
- In fact, the road to resilience is likely to involve considerable emotional distress.



- Resilience is not a trait that people either have or do not have. It involves behaviors, thoughts and actions that can be learned and developed in anyone.
- However, in reality, resilience more likely exists on a continuum that may be present to differing degrees across multiple domains of life (Pietrzak & Southwick, 2011).
- Resilience may change over time as a function of development and one's interaction with the environment (e.g., Kim-Cohen & Turkewitz, 2012).

Factors in Resilience

- A combination of factors contributes to resilience.
- Many studies show that the primary factor in resilience is having caring and supportive relationships within and outside the family.
- Relationships that create love and trust, provide role models and offer encouragement and reassurance help bolster a person's resilience.

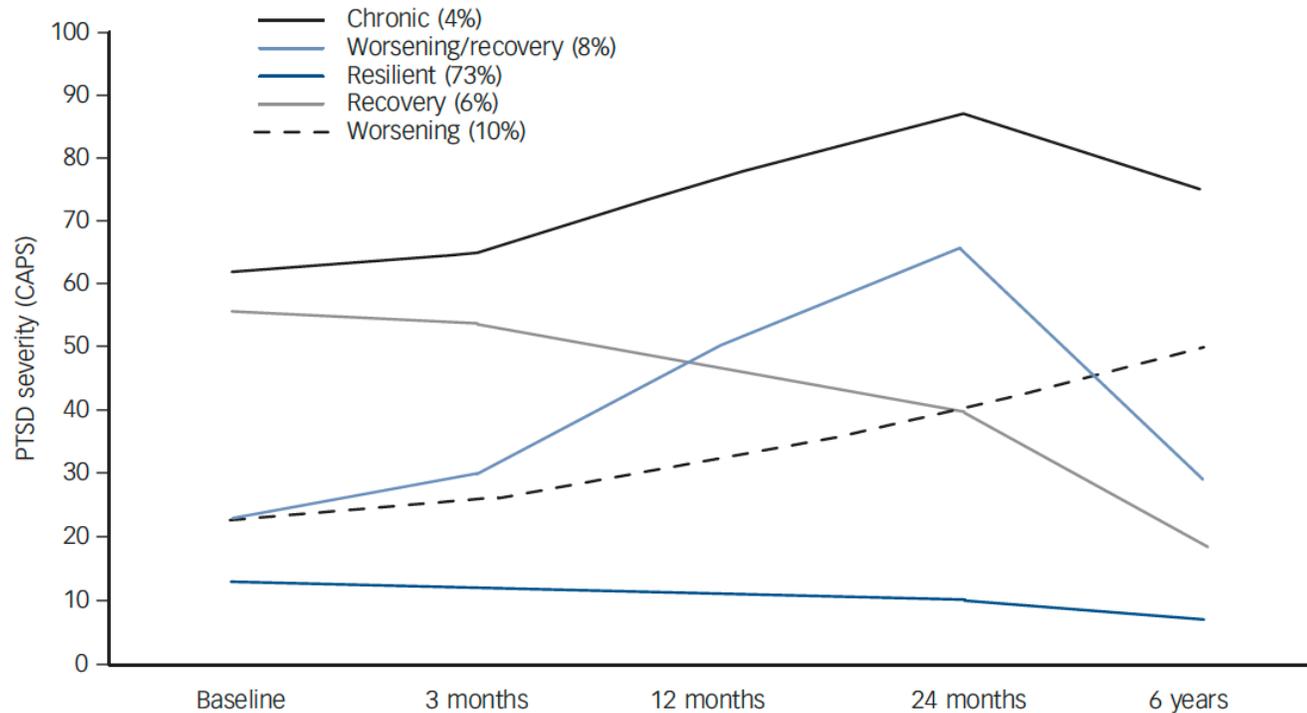
Benard, 1994, 1996; Mandleco, 2020.

Several additional factors are associated with resilience, including:

- The capacity to make realistic plans and take steps to carry them out.
- A positive view of yourself and confidence in your strengths and abilities.
- Skills in communication and problem solving.
- The capacity to manage strong feelings and impulses.
- All of these are factors that people can develop in themselves.

*Wu et al, 2013; Marriot et al., 2014; Huey et al, 2020;
Feder et al, 2013*

Loss, Trauma, and Human Resilience: Have We Underestimated the Human Capacity to Thrive After Extremely Aversive Events? (Bonano, 2004)



The resilience paradox (Bonano, 2021)

- Decades of research have consistently shown that the most common outcome following potential trauma is a stable trajectory of healthy functioning, or resilience.
- However, attempts to predict resilience reveal a paradox: the correlates of resilient outcomes are generally so modest that it is not possible accurately identify who will be resilient to potential trauma and who not.
- Recent research indicates that behavioral adjustment to traumatic stress is an ongoing process that necessitates flexible self-regulation.

Summarising the first part of the lecture:

- *The nature of trauma, trauma consequences as mental health disorders (PTSD and CPTSD), their prevalence and factors associated with them;*
- *Concepts as Post Traumatic Growth and Resilience*

Now, the second part:

- *What could we do with this knowledge?*

Questions? Comments?

THANK YOU!

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