

COMPARATIVE STUDY OF PSYCHOLOGICAL WELL-BEING AND POSTTRAUMATIC GROWTH INDICATORS IN IDP AND NON-IDP CITIZENS OF GEORGIA¹

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Abstract

Presented paper deals with revealing of psychological well-being and posttraumatic growth indicators in research samples. It uses Ryff's six factors model for the concept of psychological well-being and transformational model by Tedeschi and Calhoun for the concept of posttraumatic growth. When dramatic and potentially stressful and traumatic events happen, people tend to and are forced to revise their personal identities, relation to others and general life philosophy. These changes are reflected in the perceived level and structure of one's psychological well-being. As stated in literature, despite and/or alongside possible development of PTSD, traumatic event survivors report the experience of phenomenon that is known as posttraumatic growth. In August, 2008, Georgian citizens experienced short but intense armed conflict with Russian troops that challenged their national as well as personal identity, regardless were they either directly or indirectly introduced to War Theater. Preliminary observations, multiple case studies and day-by-day experience of working with affected people (IDPs mainly) made obvious the ongoing changes in the perception of one's psychological well-being as well as the experiences of posttraumatic growth. The paper seeks to find out how do Georgians (Internally Displaced People - IDP and non-IDP citizens) perceive their psychological well-being and experience the posttraumatic growth after armed conflict, 2008. Data show that there is no statistically significant difference between IDPs and non-IDPs regarding psychological well-being and posttraumatic growth totals, however, there are significant within group differences: non-IDPs with low social-economic status and IDPs with poor living conditions report significantly less psychological well-being than other subgroups. Finally, the level of psychological well-being can be reliably predicted by socio-economic status and self-perceived health condition.

Keywords: *psychological well-being, posttraumatic growth, IDPs*

1. Introduction

In August, 2008, Georgian citizens experienced short but intense armed conflict with Russian troops that challenged their national as well as personal identity, regardless were they either directly or indirectly introduced to War Theater. Preliminary observations, multiple case studies and day-by-day experience of working with affected people (IDPs mainly) made obvious the ongoing changes in almost all domains of their functioning and in particular in the perception of one's psychological well-being as well as the experiences of posttraumatic. After the armed conflict thousands of people were forced to flee from their homeland, and then lost their houses and property. In a few months it became possible to some of them to return to their homes but up to 19000 persons were settled in newly constructed settlements provided by the state. These people are known as internally displaced persons (IDPs). Thus, six years ago people who lost everything, found themselves in new places, having very limited resources to start their lives from the very beginning. This experience turned to be traumatic for majority of people, which forced them to search more or less new ways of living, to

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go through meaning-making process, and find strength and resources inside them to adjust to the new reality in new places. Though the loss they experienced six years ago still remains central in their lives resulting in various conditions and/or symptoms in their everyday life, affecting on their level and quality of functioning, mental health, interpersonal relationships, and self-perception.

The major objective of the study is to reveal the psychological well-being and posttraumatic growth indicators in research samples, since being aware of indicators and/or predictors of psychological well-being and posttraumatic growth (among the many others) is crucial and beneficial for those from helping professions (clinicians, psychologists, social workers) working with these people in order to be more effective in planning, conducting and evaluating the work they do. Furthermore, there are no accumulated and published empirical data on posttraumatic growth and psychological well-being in Georgian reality so far. Hence, this study will launch the series of research in the field.

There is a big volume of literature on trauma and posttraumatic experiences in various groups of people and after different kinds of traumatic events, ranging from natural disasters, wars and combat actions, through chronic illness and to dramatic changes in life course such as property loss, firing from one's job, marriage, child birth or death of loved one(s). All these (and huge amount of other) events may be perceived as stressful and traumatic, and cause long list of changes in one's physiological, psychological and/or social functioning. As usual, these are meant to be negative changes. However, the growing body of research shows (cf. Tedeschi & Calhoun, 2004; Taku, et. al., 2007) that there is a possibility of positive impact of negative events. In particular, there are at least some positive changes people report aftermath trauma when struggling with such tragedies as rape, incest, cancer, heart attacks, disasters, combats and being refugee/displaced (Tedeschi & Calhoun, 1996; Powell, et.al., 2003). The phenomenon known as posttraumatic growth for nowadays (Tedeschi & Calhoun, 1995). Given that elaboration of traumatic experience affects all domains of one's existence and functioning, and particularly on psychological health condition (Tedeschi and Calhoun, 2004c), it is reasonable to speak of influences and changes in perceptions of one's psychological well-being.

The study uses Ryff's six factors model for the concept of psychological well-being and transformational model by Tedeschi and Calhoun for the concept of posttraumatic growth. Prior to presenting actual work that has been done, the concept definitions and two theoretical frameworks are briefly examined.

2. Posttraumatic Growth: Transformational Model

Posttraumatic growth (Tedeschi and Calhoun, 1996) has been established as the most used term which describes the field of study and clinical practice. It represents positive changes experienced as a result of the psychological and cognitive efforts made in order to deal with challenging circumstances. It is a process when individual struggles with the new reality aftermath of trauma. Posttraumatic growth describes the experience of individuals, whose development, at least in some areas, has surpassed what was present before the struggle with crises occurred. The individual has not only survived, but has experienced changes that are viewed as important. This is not simply a return to baseline but an experience of improvement that for some persons in deeply profound (Tedeschi & Calhoun, 2004).

There are two leading theories of posttraumatic positive change, namely organismic valuing theory (Joseph & Linley, 2005) and transformational model (Tedeschi & Calhoun, 2004). The former approach attempts to provide an account of positive changes rooted in humanistic psychology wherein posttraumatic stress is viewed as indicative of normal, natural cognitive processes that have the potential to generate positive change. The latter, which serves as theoretical framework of the study, states that posttraumatic growth refers to a change in people that goes beyond their ability to resist and not be damaged by highly stressful event. It involves a movement beyond pretrauma levels of adaptation. Hence, it has a quality of transformation or, in other words, a qualitative change in functioning. Growth, however, doesn't occur as direct outcome of trauma

and the fact that growth occurred in some extent does not prevent individual from negative experiences. Moreover, this does not signal that the trauma itself stops to be a distressing event. Posttraumatic growth is most likely a consequence of attempts of psychological survival, and it can easily coexist with the residual distress of the trauma.

Three broad categories of perceived benefits have been identified from qualitative and quantitative data by the authors: changes in the perception of self, changes in the experience of relationships with others, and changes in one's general philosophy of life. Subsequently factor analysis yielded five-factor (personal strength, new possibilities, relating to others, appreciation of life, and spiritual change) approach to posttraumatic growth. However, as authors state (Calhoun & Tedeschi, 1996, 2006) there can be some alterations beyond this common core that are quite specific to the struggle with particular stressors and in particular culture.²

3. Psychological Well-Being: Multidimensional Model

Beginning from the 1970s the study of psychological well-being has been guided by two major conceptions of positive functioning: One is traceable to Bradburn's (1969, as cited in Ryff, 1995) seminal work, distinguished between positive and negative affect and defined happiness as the balance between the two. The second one, popular among sociologists, emphasizes life satisfaction as the key indicator of well-being. Viewed as a cognitive component, life satisfaction was seen to complement happiness, the more affective dimension of positive functioning (e.g., Andrews & McKennell, 1980; Andrews & Withey, 1976; Bryant & Veroff, 1982; Campbell, Converse, & Rodgers, 1976).

Ryff (1989, 1995, 2014) suggests the multidimensional construct of psychological well-being that is composed by six distinct components of positive psychological functioning. In combination, these dimensions encompass a breadth of wellness that includes positive evaluations of oneself and one's past life (self-acceptance), a sense of continued growth and development as a person (personal growth), the belief that one's life is purposeful and meaningful (purpose in life), the possession of quality relations with others (positive relations with others), the capacity to manage effectively one's life and surrounding world (environmental mastery), and a sense of self-determination (autonomy).

4. Research Objectives

The main research question is: how do Georgians (Internally Displaced People - IDP and non-IDP citizens) perceive their psychological well-being and experience the posttraumatic growth after armed conflict, 2008? Hence, research tasks covered in this piece of research are as follows: establishing posttraumatic growth and psychological well-being levels in IDP and none-IDP research participants, and compare two groups.

5. Method

5.1. Participants

For inventory adaptation 212 participant altogether and main research — 589 participants (52 IDP and 130 non-IDP citizens) were sampled based on simple probability sampling procedure; age 25-50, 2/3 were females.

5.2. Measures

Posttraumatic growth inventory (Tedeschi & Calhoun, 2004) is 21-item self-report measure based on transformational model of posttraumatic growth and consists of three major domains -- changes in self-perception, changes in relation to others, and changes in overall philosophy of life,

² This happened in Georgian case. Factor analysis revealed three factor solution being the most appropriate. Khechuashvili, L., *Posttraumatic Growth: How does it look like in Georgian Culture.* (writing up).

which are represented by five factor structure -- relation to others, new possibilities, personal strength, spiritual change, and appreciation of Life.

Psychological well-being scales (Ryff, 1989, 2014) is 84-item self-report measure based on multidimensional model of psychological well-being, which is composed of six dimensions -- autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance.

Both inventories have undergone through the process of cross-cultural adaptation (Beaton, et. al., 2000), with agreement of authors of original versions. The process resulted in final Georgian versions with Cronbach's alphas ranging between .70 and .91 (Khechuashvili, L., 2014).

Demographics. Gender, age, marital status, education, type of education, average monthly income, faith and habits associated with it, general health condition, and place of residence and living conditions of participants were recorded.

6. Results

Mainly total scores of posttraumatic growth and psychological well-being scales are analyzed since Georgian inventories' factor structure remains under question and needs further exploration³. The results are presented in two sections. First the possible differences in posttraumatic growth and psychological well-being between two samples are examined. Next the attempt to reveal the predictors of psychological well-being and posttraumatic growth is made.

IDP vs Non-IDP. Two samples are homogenous only according mean age, gender and confession (the majority qualifies themselves as orthodox Christians) and differ on the rest of the demographics. Controls are more educated, holding higher positions on workplace, have better socio-economic status, living conditions and self-perceived health condition ($p=.000$).

There were no significant differences on the subscales and the total score of psychological well-being scales, and the total score and four out of five factors of posttraumatic growth between two groups. IDPs ($M=9.54(7.2)$) score less on New Possibility factor of posttraumatic growth inventory than non-IDPs ($M=13.72(6.53)$) ($t(588)=-4.282, p=.000, [-6.094 - -2.260]$) (Table 1).

Table 1. Descriptives for Posttraumatic Growth and Psychological Well-Being Scales.

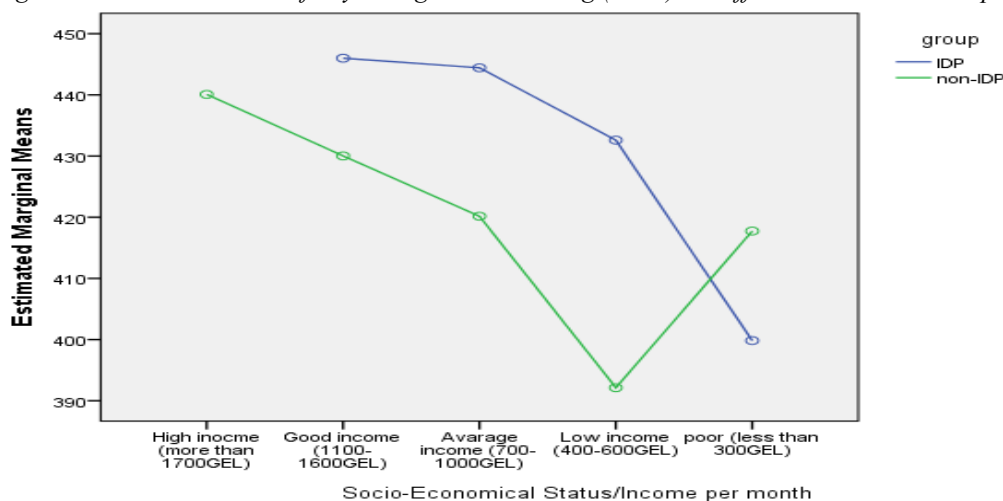
Variable	Group	
	IDPs	Non-IDPs
Posttraumatic Growth Inventory	M (SD)	M (SD)
Relation to Others	18.29 (10.14)	16.45 (8.73)
New Possibilities	9.54 (7.19)	13.72 (6.53)
Personal Strength	11.40 (6.97)	12.33 (5.1)
Spiritual Change	5.35 (3.76)	4.65 (3.391)
Appreciation of Life	5.96 (3.5)	5.27 (2.73)
Posttraumatic Growth Total	50.54 (26.21)	52.43 (20.84)
Psychological Well-Being Scales		
Autonomy	57.69 (10.663)	58.26 (10.861)
Environmental Mastery	56.42 (9.722)	54.76 (10.964)
Personal Growth	60.44 (10.353)	62.45 (10.361)
Positive Relation to Others	63.81 (2.327)	61.06 (10.830)
Purpose in Life	62.81 (10.953)	62.92 (9.801)
Self-Acceptance	54.35 (10.004)	55.29 (11.972)
Psychological Well-Being Total	419.33 (53.424)	415.82 (53.077)

A 2 (IDP status) x 2 (income) ANOVA revealed IDP status by income interaction ($F(3)=2.791, p=.041$). Non-IDP people with low income score less on Psychological Well-Being Scales than those with other amount of income ($M=417(45), p=.017$), whilst IDPs with poor condition score

³ Khechuashvili, L. (writing up) Factorial Structure of the Georgian Version of Posttraumatic Growth Inventory.

less than other subgroups (M=399(61)) (Fig. 1). No significant effect status by income on posttraumatic growth is established. Besides, there is no significant effect of living condition by status and health condition by status interaction on both, psychological well-being and posttraumatic growth.

Figure 1. Estimated Means of Psychological Well-Being (Total) in Difference Income⁴ Groups



Predictors. Multiple hierarchical regression revealed that socio-economic status and self-perceived health condition are reliable predictors for psychological well-being in both groups (see table 2). Two variables (that correlated the most) were entered in equation. However, there are no predictors in the list of variables for posttraumatic growth. The combination of above mentioned variables (socio-economic status and health condition) explained only 8% of variance in posttraumatic growth scores whilst this figure is 20% for psychological well-being.

Table 2. Multiple Regression Model Predicting Psychological Well-Being.

	B	SE B	β
Step 1			
Constant	516.762	40.069	
Socio-Economic Status/Income	-22.720	9.197	-.33*
Step 2			
Constant	544.854	40.242	
Socio-Economic Status/Income	-18.979	8.958	-.28*
Health Condition	-17.654	7.566	-.30*

Note: $R^2 = .109$ for Step 1, $\Delta R^2 = .09$ for Step 2 ($p < .05$) * $p < .05$

7. Discussion

The data analyzed in this paper are drawn from larger mixed method study of posttraumatic growth and psychological well-being of internally displaced people. Hence, possible explanations for the outcomes can be found in narrative accounts of the very same participants.

Thus, data show that there are no statistically significant differences in psychological well-being between IDP and non-IDP participants, as well as in posttraumatic growth, however two groups respond differently on the items about opening new possibilities aftermath trauma. Taking into account IDPs' everyday life and living conditions this outcome fits into the context. People left without anything and forced to build the life from the beginning don't see much new possibilities around them. They struggle for existence and basically don't care for searching something novel.

⁴ 1 EURO = 2.19 GEL (GEL – Georgian Lari)

However, there are interesting within group differences: data show that non-IDPs report less psychological well-being if their income is low than other groups, even those who earns less than 300 GEL and are qualified as poor. Similar figures are obtained in IDPs just slightly shifted towards lower incomes since there are no people with high income in this group. This suggests to think of psychological well-being as strongly associated with one's socio-economic status regardless a person is IDP or not. Furthermore, it is logical that is good predictor of the level of psychological well-being (alongside the health condition) and explains at about 15% of variance. This outcome corresponds to data obtained in the scope of the nationwide study of the perceptions and correlates of reported overall happiness, which reports that the highest predictive value for well-being and perceived happiness in the evaluation current economic situation of household (Tsuladze, et. al. 2013). One of the explanations for strong linkage of well-being and income can be found in the recent history Georgia, the post-soviet country which went under socio-economic and political turmoil, economic downturns and wars during last two decades.

8. Limitations

The most important and influential limitation of the study was the status of posttraumatic growth inventory. Although it's been undergone through complete process of adaptation and internal validity checking, factor structure of Georgian version still remains unclear. Preliminary factor analysis show that (Khechuashvili, writing up) Georgian version does not match to original, and three factor structure is under consideration. This may explain that there were no significant differences neither between groups nor within group, and also none of other variables could predicted or correlate with posttraumatic growth components.

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