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POSTTRAUMATIC GROWTH AND PSYCHOLOGICAL DISTRESS IN ADULTS WITH ACQUIRED PHYSICAL DISABILITY

Farida Ishaq¹, Nida Khalil², Munazza Tariq² Riphah International University, Lahore, Pakistan

Abstract

The aim of the present study is to examine the relationship between post-traumatic growth and psychological distress in adults with acquired physical disability. Purposive sampling technique was used to collect sample of 120 participants form different Hospital. Post Traumatic Growth Inventory (Tedeschi & Calhoun, 1996) and Kessler's psychological distress scale (Kessler, 2002) was used as an assessment measure in the current study to check the level of posttraumatic growth and psychological distress. Results showed that there was a significant positive relationship between posttraumatic growth and psychological distress. Findings also revealed that posttraumatic growth was significant predictor of psychological distress. The authors conclude that higher level of posttraumatic growth leads to higher level of psychological distress. Organizations that wish to jointly address mental health and performance at work would benefit from reducing psychological distress.

Keywords: Posttraumatic Growth, Psychological Distress, Acquired Physical Disability

INTRODUCTION

The concept of posttraumatic growth (PTG) corresponds to the set of positive changes following a traumatic event. More precisely, it describes the process of individuals experiencing these changes in certain areas of their lives through the re-evaluation of their worldview (Gori et al., 2021). Although PTG is considered a salutogenic concept (Hamama-Raz et al., 2020), Tedeschi and Calhoun (2004a) clarify that, while PTG occurs more frequently in the context of suffering and inner struggle, it can also emerge in the lives of individuals who have not experienced specific trauma (Tedeschi & Calhoun, 1996), particularly in occupational settings (Sattler et al., 2014). For example, Stanton et al. (2006), in their review of the literature on the subject, suggest that cancer patients can experience PTG by, among other things, seeking more social support or using positive and adapted coping strategies. Accordingly, the constraints associated with the pandemic situation, e.g., successive lockdowns, may have both traumatic and constructive consequences (for a narrative review on PTG in the workplace during COVID-19, Finstad et al., 2021; Vazquez et al., 2021).

Tedeschi and Calhoun (1996, 2004b) identified five areas that are central to the concept of PTG: personal strength, new possibilities in life, relationships with others, appreciation of life, and spiritual change. First, people who experience an increase in personal strength feel that they can better handle everyday tasks and events that had been perceived as insurmountable, e.g., hard-to-achieve goals or internal conflicts. Second, PTG involves the identification of new possibilities for oneself and one's life, such as taking a different path than one had planned, e.g., career reorientation or a change in career development) (Tedeschi & Calhoun, 2004b). Third, PTG is characterized by potentially more intimate interpersonal relationships. Individuals thus become more aware of the importance of their relationships and cherish them more. This change also results in increased compassion for others, e.g., during a restructuring or job loss (Tedeschi & Calhoun, 2004b).

Fourth, greater appreciation of life can also qualify as a PTG experience. For example, many aspects of daily life, however, small, are associated with small joys that can take on special

meaning. The sense of priorities is profoundly altered such that "little things" are more valued, e.g., time spent with loved ones (Tedeschi & Calhoun, 2004b). Finally, the PTG experience can include positive changes in spirituality. People who experience PTG, be they religious or not, often engage in spiritual and existential reflection, which helps them cope with painful emotions or loss (Tedeschi & Calhoun, 2004b). To summarize, the PTG experience allows individuals to engage in a cognitive process, e.g., positive reinterpretation, positive reframing, interpretive control, and the reconstruction of events, that imparts meaning to their experiences and future perspectives. It allows them to develop resources with which to cope with new and undesirable situations (Hobfoll, 2002; Sattler et al., 2014).

Psychological disorder is to define an individual's overall behavior, integrating depressive symptoms, fear, and potential tension (Kessler, 2002). Mental misery is a term used to depict hostile disposition or feelings that impact you're sorted out of working. At the closure of the daytime, it is mental disquiet that center with your exercise of step-by-step living. Mental trouble can convey concerning negative perspectives on others and the character. Setback, stress, uneasiness, inconvenience, interruptions, distraction and the reaction of useless habits are appearance of mental trouble. Evidence from western literature suggests the development of PTG is associated with various demographic and clinical variables (Bellizzi & Blank, 2006). In the current study, we aimed to examine the relationship between post-traumatic growth and psychological distress in adults with acquired physical disability

METHODOLOGY

Research Design

The Correlation study method was utilized in the current research that was to explore the linked between post-traumatic growth and psychological distress with adults in acquired physical disability.

Sampling Strategy

The non-probability purposive sampling method was utilized for the present investigation.

Sample

The study sample size was defined through G-Power review. 120 adults with acquired physical disability were recruited for present study.

Assessment Measures

Following assessment measures were used in the present study.

Posttraumatic Growth Inventory (PTGI)

Posttraumatic Growth Inventory (PTGI) was created by Tedeschi and Calhoun (1996) which translated by Saghir and Kausar (2007). It has 21 items scale. Posttraumatic growth inventory is an overview measure to intend a general appraisal of positive happening occurring after a trauma. In current study translated version of questionnaire was used. This scale is consisting of 6 point Likert was utilized with 0 = none, 3 = normal, and 5 = extraordinary level of PTG. It has 0-105 absolute score range and the higher score showed that more significant level of PTG. The scale revealed a high Cronbach's alpha coefficient (.90).

Psychological Distress (K10)

Kessler's Scale of Psychological Distress developed by Kessler for the (Kessler, 2002). It was a translated by Hussain and Kausar, (2014). The purpose to check one's psychological condition and the level of Stress, Anxiety and depression. It is 10 items 5 point likert scale. All the items of scale measures stress, level of anxiety and depression separately. It's highly reliability and easy to administer scale and have no reverse scoring 5 items of the scale is for the purpose to measure severity and intensity of symptoms over the period of time. Scale has very good reliability (.79-.83) and validity. The Cronbach's alpha of this questionnaire in current research is (.81).

RESULTS

The recent research was to evaluate relationship between Posttraumatic Growth and Psychological Distress in Adults with Acquired Physical Disability. The data was analyzed by using Statistical Packages for Social Sciences Version 21 (SPSS-21). The Cronbach's Alpha of the scale was obtained using reliability investigation. The descriptive statistics reveal the value of frequency and percentage of demographic variables. Pearson product moment correlation analysis was carried out to assess the relationship between Posttraumatic Growth and Psychological Distress. Regression analysis through enter method was used to assess the prediction of Posttraumatic Growth on Psychological Distress.

Table 1Pearson Product Moment Correlation Between Posttraumatic Growth and Psychological Distress (N=120)

Variable	1	2	M	SD
1. Posttraumatic Growth	-	.42**	69.1	14.9
2. Psychological Distress	-	-	19.5	8.45

^{*,} Correlation is significant at the 0.05 level (1-tailed)

M = Mean, SD = Standard Deviation

Table 1 findings indicate that there was significant positive relationship between posttraumatic growth and psychological distress. (r=.42, p < 0.01). Findings showed that the participants who experience posttraumatic growth had high level of psychological distress in their life.

 Table 2

 Linear Regression Analysis for Prediction of Psychological Distress

Model	В	SE B	β	R^2	F	Sig.
Constant	14.08	3.14				.00
Posttraumatic Growth	0.15	0.09	0.14	.02	2.40	.01

Note: *p < .05, **p < .01, ***p < .001

Tables 2 present the results of Simple Linear Regression Analysis computed to evaluate whether posttraumatic growth predicted psychological distress among adults who acquired physical disability. The results of regression indicated that posttraumatic growth accounted for 02% variance in the score of psychological distress (R^2 =.02 F (1, 119) = 2.40, p<.05). The results suggest that posttraumatic growth significantly predicted psychological distress (β =.14 p<.05) among adults.

DISCUSSION

The present study investigated the relationship between posttraumatic growth and psychological distress in physical disability. The first hypothesis of their study was formulated to find out relationship between posttraumatic growth and psychological distress. Analysis of the current study revealed that a positive relationship between post traumatic growth and psychological distress. Previous study Chan and Rhodes (2013) found that individual's high score on posttraumatic growth, had low level of psychological distress. A cross sectional study results found

^{**,} Correlation is significant at the 0.01 level (1-tailed),

the participants with high level of posttraumatic growth had less psychological distress such as anxiety and depression (Holtmaat, 2016). Another study by Turner (2012) concluded positive relationship between posttraumatic growth, coping strategies and psychological distress in adults. High level of posttraumatic growth reveled low level of psychological distress.

The second hypothesis showed that posttraumatic growth was a significant predictor of psychological distress. Literature supported the findings of present study and provided evidence. Another study was conducted to examines the direct and indirect relationships between psychosocial climate (PSC) and work performance through two indicators of psychological health, psychological distress and post-traumatic growth, during a health crisis, i.e., prior to the second confinement in France. To this end, 2,004 participants from the French workforce completed a survey in October 2020. The results of mediation analyses indicate that PSC has a direct and positive influence on post-traumatic growth (PTG) and performance, as well as a direct negative influence on psychological distress. PSC also has an indirect positive influence on performance via psychological distress (Sandrin et al., 2022).

In addition, a study was conducted to examined the relationship of demographic characteristics, and post traumatic disorder, with posttraumatic growth among individuals exposed to a suicide bombing attack. Results showed no significant relationship between Posttraumatic Growth scores and severity of Post-Traumatic Stress symptoms was however noted. A significant positive correlation between three subscales of PTGI, and hyperarousal (a crucial symptom of PTSD) measured on IES-R was established. There also existed a significant but negative relationship between sub-scale of intrusion (IES-R) and personal strength (PTGI) and a positive significant relationship between subscales appreciation of life (PTGI) and avoidance (Kiran et al., 2010). Another study was conducted to measure the predicting role of posttraumatic growth with psychological distress aming adults. Findings revealed that there is significant prediction between posttraumatic growth and psychological distress (Thakur et al., 2022).

CONCLUSION

Overall, this research sheds light on the role of posttraumatic growth (PTG) in psychological distress. This expands the scope of studies that have primarily considered the effects of PGT on psychological distress, thus attempting to answer the call of Ipsen et al. (2020) to consider psychological distress and performance simultaneously rather than separately, as is most often the case in research and practice. Given the deterioration of mental health in many workplaces as a result of the pandemic and critical and pervasive labor shortages in several work sectors, it is crucial that leaders develop better practices, policies, and procedures to ensure that workers can work in psychologically safe environments.

REFERENCES

- 1. Bellizzi KM, Blank TO. Predicting posttraumatic growth in breast cancer survivors. Health Psychol 2006; 25 (01) 47-56
- 2. Gori, A., Topino, E., Sette, A., and Cramer, H. (2021). Pathways to post-traumatic growth in cancer patients: Moderated mediation and single mediation analyses with resilience, personality, and coping strategies. *J. Affect. Disord.* 279, 692–700. doi: 10.1016/j.jad.2020.10.044
- 3. Hamama-Raz, Y., Hamama, L., Pat-Horenczyk, R., Stokar, Y. N., Zilberstein, T., and Bron-Harlev, E. (2020). Posttraumatic growth and burnout in pediatric nurses: The mediating role of secondary traumatization and the moderating role of meaning in work. *Stress Health* 37, 442–453. doi: 10.1002/smi.3007

- 4. Tedeschi, R. G., and Calhoun, L. G. (2004b). Posttraumatic growth: Conceptual foundations and empirical evidence. *Psychol. Ing.* 15, 1–18. doi: 10.1207/s15327965pli1501_01
- 5. Tedeschi, R. G., and Calhoun, L. (2004a). Posttraumatic growth: A new perspective on psychotraumatology. *Psychiatr. Times* 21, 8–14.
- 6. Sattler, D. N., Boyd, B., and Kirsch, J. (2014). Trauma-exposed firefighters: Relationships among posttraumatic growth, posttraumatic stress, resource availability, coping and critical incident stress debriefing experience. *Stress Health* 30, 356–365. doi: 10.1002/smi.2608
- 7. Finstad, G. L., Giorgi, G., Lulli, L. G., Pandolfi, C., Foti, G., León-Perez, J. M., et al. (2021). Resilience, coping strategies and posttraumatic growth in the workplace following COVID-19: A narrative review on the positive aspects of trauma. *Int. J. Environ. Res. Public Health* 18:9453. doi: 10.3390/ijerph18189453
- 8. Hobfoll, S. E. (2002). Social and psychological resources and adaptation. *Rev. Gen. Psychol.* 6, 307–324. doi: 10.1037/1089-2680.6.4.307
- 9. Vazquez, C., Valiente, C., García, F. E., Contreras, A., Peinado, V., Trucharte, A., et al. (2021). Post-traumatic growth and stress-related responses during the COVID-19 pandemic in a national representative sample: The role of positive core beliefs about the world and others. *J. Happ. Stud.* 22, 2915–2935. doi: 10.1007/s10902-020-00352-3
- 10. Kessler, R. C., Green, J. G., Gruber, M. J., Sampson, N. A., Bromet, E., Cuitan, M., et al. (2010). Screening for serious mental illness in the general population with the K6 screening scale. *Int. J. Methods Psychiatr. Res.* 19, 4–22. doi: 10.1002/mpr.310.Screening
- 11. Sandrin Émilie, Brun Jean-Pierre, Nguyen Christophe, Biron Caroline, Ivers Hans. (2022). Psychological distress and post-traumatic growth in France during the COVID-19 pandemic: A mediation model of psychosocial safety climate as a determinant of work performance. Frontiers in Psychology. DOI=10.3389/fpsyg.2022.993458
- 12. Mubashara Kiran, Mowadat H Rana, Muhammad Azhar. (2010). Post traumatic disorder, with posttraumatic growth among individuals exposed to a suicide bombing attack. Journal of Pakistan Psychiatric Society.
- 13. Monika Thakur, Roopali Sharma, Anand Kumar Mishra and Kulranjan Singh. (2022). Posttraumatic Growth and Psychological Distress among Female Breast Cancer Survivors in India: A Cross-Sectional Study. Indian J Med Paediatr Oncol. DOI: 10.1055/s-0042-1742441.
- 14. Ipsen, C., Karanika-Murray, M., and Nardelli, G. (2020). Addressing mental health and organisational performance in tandem: A challenge and an opportunity for bringing together what belongs together. *Work Stress* 34, 1–4. doi: 10.1080/02678373.2020.1719555
- 15. Turner-Sack, A. M., Menna, R., Setchell, S. R., Maan, C., & Cataudella, D. (2012). Posttraumatic growth, coping strategies, and psychological distress in adolescent survivors of cancer. *Journal of pediatric oncology nursing : official journal of the Association of Pediatric Oncology Nurses*, 29(2), 70–79. https://doi.org/10.1177/1043454212439472
- 16. Holtmaat, K., van der Spek, N., Cuijpers, P., Leemans, C. R., & Verdonck-de Leeuw, I. M. (2017). Posttraumatic growth among head and neck cancer survivors with psychological distress. *Psycho-oncology*, 26(1), 96–101. https://doi.org/10.1002/pon.4106

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