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The role of disclosure and resilience in response to stress and trauma

Alana Bowen

Thesis submitted in fulfilment of the requirements for a Doctor of Philosophy Degree

with James Cook University

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Alana Bowen

Date

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Abstract

Selye (1950, 1984) described the human body's physiological response to stress as a means of coping with adverse conditions. It is plausible that cognitive processes have also been selected to assist humans in coping and achieving resilience in adversity. The core objectives of this dissertation were to extend emotion processing theory (Foa & Kozak, 1986) by examining the relationships among emotional disclosure, resilience, and health-related consequences following stress and traumatic events. Three studies were conducted employing different research designs: correlational, experimental, and observational. A sample of university students and individuals from the wider community ($N = 109$) participated in the first study that examined whether disclosure and a number of resilience factors (hardiness, self-efficacy, social support, and self-deception) were related to one's current feelings about stressful events. Results indicated that participants who received supportive reactions from others when discussing stressful experiences tended to hold positive assumptions about the self, others, and world. In addition, participants with high levels of resilience (hardiness, self-efficacy, social support, and self-deception) tended to report fewer psychological health concerns and had more positive beliefs about themselves, others and the world.

The second study utilized an experimental design to examine whether written emotional disclosure of stressful experiences was related to overall greater health. Results showed that individuals from the general population ($N = 90$) who wrote about personally distressing stressors three times over approximately three weeks tended to report significantly better psychological and physical health, when compared to those who wrote about non-stressful activities. A unique finding was that participants who wrote about their stressful life experiences reported fewer physical and psychological

symptoms if they also reported improved hardiness and self-efficacy following written expression of their most stressful life experiences.

The final study consisted of a sample of Vietnam veterans, peacekeepers, and police members (N = 65) attending a nationally approved PTSD treatment program. To study the results of disclosure within a group format, a disclosure checklist was developed to assess the length of time, the amount of distress, and the type of reactions received from others following trauma-related disclosure. Overall, participants diagnosed with PTSD had better psychological, physical health, world assumptions, and quality of life at both the start and the end of the PTSD program if they had high levels of initial resilience. These findings may have implications for screening procedures for military and paramilitary organisations to assist in identifying individuals who are more likely to recover following exposure to traumatic events. It was also found that participants who developed increased resilience (in particular, higher hardiness) and experienced less distress when discussing their traumatic experiences tended to report fewer psychological symptoms and greater quality of life at the end of the PTSD program. This suggests that efforts should be made by health workers to increase resilience in counselling sessions and to prevent distress levels escalating too far during trauma therapy. Alternatively, these results may reflect that participants were less likely to show distress when discussing their traumatic experiences if they were coping better and had less severe psychological symptoms to begin with. Taken together, the findings of the three studies undertaken suggest that the emotional processing model may be fruitfully extended by including resilience and disclosure as important predictors of response to stress and trauma and in the recovery from PTSD.