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The Heroic Journey: Therapeutic Writing and Trauma Narratives



Therapeutic Writing and Narrative Therapy 2

Objectives

1. To discuss the prevalence of and common etiologies of posttraumatic stress disorder (PTSD) and the disorder's resistance to treatment.
2. To introduce bibliotherapy as a valued therapeutic technique that can help individuals suffering from PTSD to examine traumatic events and to make meaning and gain clarity through their writing.
3. To examine the common themes gleaned from narratives on trauma and recovery, including key themes such as experiencing trauma, dealing with the dominating diagnosis of PTSD, surviving symptoms such as alcohol and drug abuse, seeking solace, looking for informed allies and effective treatments, the passage of time, and navigating recovery.



Therapeutic Writing and Trauma Narratives 3

Narrative Underpinnings

- This study on recovery from posttraumatic stress disorder (PTSD) had some underlying narrative threads woven throughout the research.
- The following themes were the foremost research threads. Victims of PTSD would:
 - Embrace the concept of the “heroic journey” as used in psychotherapy, since many regarded their recovery as both an exploration and an odyssey;
 - Regard therapeutic writing as useful, since respondents would compose written accounts of their recovery and convey personal significance to their finished work.



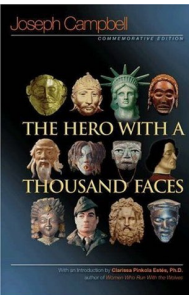
The Heroic Journey

- Many accounts of recovery from the literature have framed the individual's pursuit of happiness and wellness as a journey.

The concept of the heroic journey has been a familiar literary device throughout history.

• A common thread running through many stories and legends, the hero's journey has featured the protagonist successfully facing many challenges during a long and arduous journey.

Joseph Campbell



- Joseph Campbell¹, in his book, *The Hero with a Thousand Faces*, examined ancient hero myths, which he equated with man's eternal struggle for identity.
 - He asserted that while the individual's life journey is always a solitary one, the trip is taken in the company of others: not only loved ones and acquaintances, but also in the company of heroes and heroines who undertook similar past journeys.
 - In the case of PTSD recovery, this journey took place with the help of physicians, therapists, family members, and peers.

Joseph Campbell (cont.)



- Campbell¹ used the term “monomyth” to describe the hero’s journey into a region of supernatural wonder where the individual encountered fantastical forces and ultimately won a decisive victory.
- Storytellers such as Buddha, Moses, and Christ have relied on the monomyth in constructing their narratives, hence the resonant familiarity that such stories have conveyed.
 - Campbell identified 17 sequential stages in the monomyth, starting with departure, then initiation into the travails of the journey, and winding up with the return.

Joseph Campbell (cont.)

- Campbell was heavily influenced by the psychoanalytic theorists of his day, who had successfully appropriated the monomyth as a counseling method.
 - Clinicians have translated Campbell’s heroic journey into a conceptual metaphor—a counseling technique to make an abstract concept, such as travails from PTSD, more accessible to a client—to represent the dynamic process of human development and change².
 - Therapists have used the heroic journey metaphor to motivate clients and reframe daunting challenge³.
 - By recasting the victim of trauma as a hero whose difficulties have been shared by others taking the same journey, the victim can achieve hope that the journey will someday end and he or she will live the life they desire⁴.
 - In essence, the monomyth has served as a template for change.

Therapeutic Benefits to the Heroic Archetype

- First, the heroic archetype allowed an individual who had experienced trauma to recast him- or herself as a hero rather than a victim.
 - From that empowered perspective, the client felt better equipped to face challenges by successfully drawing on internal resources^{2, 5}.
- Second, the client’s transformation into the hero role reframed the therapist as a guide or companion on the epic journey rather than as an interventionist⁶.
 - Thus, the heroic metaphor has augmented therapist-client communication and supported change³.

Heroic Journey: Summary

- The conceptual metaphor of the heroic journey both normalized and celebrated a trauma victim's process of reclaiming his or her life from PTSD.
- The process itself was transformative.
 - The journey did not lead the victim back to the starting point, but rather to a new, more complex world viewed from a different perspective.
 - The therapist had functioned as companion and guide on this co-constructed journey.

The Value of Bibliotherapy

- Often therapists have advanced goals through the use of bibliotherapy to assess the patient's progress and to provide meaning to the client's struggle⁷.
- Bibliotherapy has typically involved using films, television shows, plays, and books to draw parallels between the protagonist and the client to help the client reframe the traumatic experience.
 - Narrative approaches, in which the client writes his or her own story, are one type of bibliotherapy.

Journaling and Writing

- Benefits clients with emotional and mental health problems and who have suffered traumas such as rape, health care crises, or who have experienced painful life experiences such as grief⁸.
- Onken⁹ summed up the therapeutic significance of an oral or written project to its creator:
 - "Dialogical action—telling one's narrative, uncovering the strengths and assets embedded within it, untangling and externalizing the negative dominant discourses—results in a transformative re-authoring of one's experience, triggering new meanings and personal and political growth" (p. 13).*
 - Re-authoring is a pivotal task in the recovery process, perhaps the primary mechanism of personal growth⁸.
 - Growth itself has been conceptualized as a nonlinear process, since regression may occur throughout the endeavor of contextualizing one's experiences.

Healing through Bibliotherapy

- The re-authoring process has incorporated the elements of coping, healing, wellness, and thriving.
 - The dual acts of taking hold of one's history and of conducting self-reflexivity have promoted recovery⁸.
 - "The act of telling one's narrative can facilitate a healing process that increases coping ability as one integrates the trauma experienced in conjunction with symptoms and stigmatization into a sense of self broadened rather than limited by experience."⁹
 - Delaney⁹ has noted that discovery of self and narrative have closely aligned with the ideas of Peplau¹⁰, who believed:
 - Psychiatric nursing was fundamentally about the nurse forming a relationship, or shared experience, by exploring a person's system of meanings.
 - It was important for the nurse to understand how the person defined illness and healing.
- Peplau¹⁰ also trained psychiatric nurses in the importance of helping the patient remember current happenings and past events so that experiences can be integrated.

Bibliotherapy as Psychotherapy

- Pennebaker¹¹ noted:
 - Bibliotherapy shared a fundamental process common with all psychotherapies: labeling a problem and discussing its causes and consequences.
 - Participation in therapy presupposed that an individual acknowledged the existence of a problem and openly discussed it with another person.
- **Writing experiment:** One group wrote about superficial topics and the second group wrote about deepest emotions and thoughts for up to 30 minutes a day, 3-5 days in a row.
 - The second group composed a remarkable array of submissions.
 - "The writing paradigm is exceptionally powerful. Participants—from children to the elderly, from honor students to maximum-security prisoners—disclose a remarkable range and depth of traumatic experiences. Lost loves, deaths, incidents of sexual and physical abuse, and tragic failures are common themes in all of the studies. If nothing else, the paradigm demonstrates that when individuals are given the opportunity to disclose deeply personal aspects of their lives, they readily do so (p. 162)".
 - A large number of participants who wrote about painful episodes in their lives reported crying or being deeply upset by the experience, but the overwhelming majority reported that the writing experience was valuable and meaningful.

Benefits of Bibliotherapy

- In a study involving Holocaust survivors, Pennebaker, Barger, and Tiebout¹² discovered that degree of disclosure during an interview was positively correlated with long-term health after the interview.
 - High disclosers were significantly less likely than low disclosers to visit a physician in the months following the interview, $t(30) = -2.27, p = 0.03$.
- Pennebaker¹¹ found participants in bibliotherapy:
 - Reported a reduction in physician visits
 - Showed improved physiological markers such as increases in immune and other serum measures
 - Improved behavioral markers (e.g., better school grades and reduced absenteeism)
 - Improved self reports concerning physical symptoms and distress, negative affect, and/or depression.

Benefits of Bibliotherapy (cont.)

- Pennebaker¹¹ concluded that the mere act of disclosure was a powerful therapeutic agent that caused changes in basic cognitive and linguistic processes.
- Drawing from research that did not include a therapeutic writing component, Mueller, Moergeli, and Maercker¹³ and Littleton, Axsom, and Grills-Tauechel¹⁴ supported Pennebaker's¹¹ claim that the act of disclosure itself was therapeutic.
- Both studies had predicted a better recovery prognosis for crime victims who disclosed the traumatic experience and received positive social acknowledgement.

The Therapeutic Letter

- The writing format most frequently used in therapeutic work has been the letter¹⁵.
- The first contemporary report of therapeutic letter writing occurred when Ellis¹⁶ noticed that written communication had a different influence on clients than other forms of communication.
- Wagner, Weeks, and L'Abate¹⁷ later discovered that written messages had a greater effect on recipients than similar verbal communications. Noted psychotherapist Yalom¹⁸ has incorporated written summaries as an adjunct therapy with his group work for more than 30 years.
- White and Epston¹⁹ formalized the practice of letter writing in clinical family therapy and coined the phrase "therapeutic letter"; the clinicians composed letters and mailed them to the family between sessions as an extension of their clinical work.

The Therapeutic Letter (cont.)

Epston²⁰ noted that purposes of letters have been varied:

- Summarizing clinical work with clients;
- Creating opportunities for future reflection and discussion;
- Salvage of unproductive sessions;
- Acknowledgment of clinician mistakes;
- Clarification of confusion;
- Creation of possibilities for both client/clinician reflection;
- Vehicles to communicate difficult ideas that the client might digest more easily in private.

Nurse clinicians extended the use of therapeutic letters²¹:

- To engage clients in therapy;
- To promote client/clinician cooperation;
- To discuss solutions to client problems;
- To engage nonparticipating family members such as estranged spouses in therapy;
- To increase the effect of therapy and serve as a record;
- To offer teaching, education, information, and normalizing to clients.

Yalom and the Therapeutic Letter

Yalom¹⁸ has noted that his summaries of individual group work:

- Revivified prior therapeutic efforts and encouraged continuity of work between meetings;
- Helped clients re-experience and understand important events that occurred during a meeting;
- Helped reinforce and shape group norms;
- Provided therapeutic leverage by reinforcing risk taking and focusing clients on primary tasks.

From a clinician's perspective, these written group summaries provided:

- Understanding of the events of the session, taking note of both productive and resistive sessions;
- Commented on client gains;
- Predicted and prevented undesirable developments;
- Brought in silent members;
- Increased cohesiveness;
- Invited new behaviors and interactions;
- Provided interpretations;
- Instilled hope.

Yalom and the Therapeutic Letter (cont.)

Yalom¹⁸ had theorized that written summaries were most valuable when they were honest and straightforward about therapy, demystifying the process.

•Yalom agreed with Pennebaker that the writing process itself was very therapeutic.

•Yalom's experiment: He and a client exchanged a letter after each weekly session for a year.

- He and his client had vastly different perspectives of the shared hours.
- *"All my marvelous interpretations?" Yalom wrote, "She had never even heard them. Instead, [she] heard and valued very different parts of the therapy hour; the deeply human exchanges; the fleeting supportive accepting glances; the brief moments of real intimacy" (p. 458).*

Benefits of Therapeutic Letters

Despite varying perspectives on the healing mechanisms of therapeutic writing, most anecdotal evidence has indicated that both writer and recipient regarded the letters as significant^{20, 22, 23.}

•Families and clinicians indicated that there had been added value to the letter, with each letter representing the equivalent of 3 to 10 face-to-face clinical sessions^{24, 25, 26.}

•*Therapeutic letters have represented many intents and purposes in psychotherapy, but the fundamental aim of all written communication has been to help alleviate the suffering of families and individuals.*

Moules²⁷ examined a 22-year family systems nursing project where clinicians used therapeutic letters to communicate with families experiencing illness and suffering.

•She concluded that letters had an influence related to the tone of the individuals and the relationship created, the balancing of questions, commendations, and artful writing, memory and remembrance, measures and markers of change, and the obligation of meeting people experiencing illness at the point of their suffering.

Benefits of Therapeutic Letters (cont.)

- The practice challenged traditional therapist-client boundaries, where the therapist held perceived power and controlled the therapeutic relationship²⁸. Also:
- Through the recursive process of therapeutic writing, the professional therapist had created a more intimate connection between the clinician and client.
- Therapeutic writing also had allowed a therapist to sample the client's experience while allowing the client to remain in the safety and security of his or her customary setting.
- Letter writing and journaling have crossed the temporary and spatial boundaries of the therapeutic relationship, by allowing clients to participate in therapy outside of usual office hours²⁸.

Benefits of Therapeutic Letters (cont.)

- Therapeutic letters have²⁹:
 - Supported reflexivity; and
 - By challenging, extending, and redefining traditional therapeutic boundaries—have enabled closer, more intimate counselor-client connections to occur.
- Epston²⁰ suggested that the written word consistently offered two therapeutic advantages:
 1. Written works, through the act of creation, take on an existence of their own
 2. Writing can be a solidifying and creative group activity that shares and negotiates progress.
- Moules¹⁵ and Epston²⁰ have noted that email has been causing an inevitable change in human communication.
 - However, Epston has expressed hope that the historical and cultural legacy of therapeutic letter writing would be represented in the newer medium.
 - “Good conversation” and “healing words” should always be maintained regardless of the medium (p. 4).

Summary: Therapeutic Writing

- Therapeutic writing has been shown to be:
 - Beneficial for many patients.
 - A valuable adjunct to traditional psychotherapy.
 - A means for self-disclosure,
 - An act that itself can be liberating for many victims of traumatic events.
- The therapist can offer positive social acknowledgment that can help victims to heal.
 - Often, individuals have received therapeutic insights from their writing, even from solitary efforts undisclosed to therapists.
- However, skilled therapists have helped to accelerate the process and to coach efficacious coping efforts.
- In addition to its psychological benefits, bibliotherapy has provided the writer with great satisfaction and a sense of personal accomplishment.

Writing as a Literary Endeavor

- **Writers of note have long considered letter writing and journaling to be integral activities to their literary careers.**
 - **Diarists such as Samuel Pepys³⁰, Mary Boykin Chesnut³¹, and Louisa May Alcott³² have found emotional release and gained insight from periodically recording events in their lives.**
 - **Furthermore, letter writing has been regarded as a daily “limbering up” exercise by serious writers such as Samuel Clemens (Mark Twain), Ernest Hemingway, and Flannery O’Connor, who often wrote letters before turning to their more lengthy literary compositions³³.**
- **The literature supported my belief that writing about PTSD and the journey to recovery could offer psychological benefits to study participants.**
 - **Onken et al.⁹ noted the therapeutic value of crafting and telling a personal story as a healing process.**
 - **Davidson and White³⁴ also have validated the value of writing for persons who suffered severe mental illness,**
 - **First-person accounts have described recovery as both a transformational process and an incremental process, celebrating change.**

Writing as a Literary Endeavor (cont.)

- **Within these stories, people in recovery have been active agents of change in their lives and not passive recipients of care. The stories have contained many references to new perspectives and insights, important decisions, critical actions taken, and discovery of healing resources within and beyond the self.**
- **Moreover, as Davidson and White³⁴ stated, first-person narratives of recovery also have revealed the individualized nature of recovery processes and the existence of diverse religious, spiritual, and secular frameworks of recovery initiation and maintenance. Finally, the recovery writings have confirmed the role of family and peer support in making a difference in their recovery.**

Narrative Themes of Trauma

Experiencing Trauma

- The accounts received were wrenching, even though the events may have occurred many years before.
- The greatest number of narrative submissions came from those who had suffered child abuse and intimate partner violence (IPV).

Child Abuse

- One individual who had suffered child abuse wrote an eloquent litany of the violence she had experienced at the hands of her parents:
 - *"Continual events occurring from early childhood into adulthood led to diagnosed PTSD. Memories of early childhood begin around four or five years old. I was beaten with high heel shoes, men's shoes, a handle from anything (broom, tool), a rolling pin, meat tenderizer, and whipped with electric cords, belts, and switches from lilac trees. I remember being slapped across my face, privately and many times in public, by my mother's hand, being choked by my mother and having her try to kill me in the middle of the night, having blankets pulled off the bed, then beaten with an object for something I did or said earlier. I was hit on the head with a hairbrush until it broke. I remember parental arguments and fights with lots of screaming, cursing, swearing, glass breaking, holes in walls, wondering if one of them would kill the other. I remember continual verbal assaults and threats, being discounted, being scoffed at: "You're not going to college; you are meeting a man somewhere."*
 - *"On the way to grandmother's house I remember being slapped across the face and told to smile and be happy while there. I remember the police coming to our house and demanding that my parents have all their five children line up so they could count heads. I remember my sisters holding me down and spitting in my mouth and shouting they hated me because I was smarter and prettier than them. I remember my father trying to commit suicide by jumping off a bridge."*
- This individual's torment did not abate as she aged out of childhood.
 - *"At my college graduation ceremony as I came down the aisle with my diploma, my mother pulled me aside, slapped me across the face, and said, 'You think you're smarter than me now, don't you?'"*

More Child Abuse

- Another participant's submission continued in a similar vein:
 - *"I came from a large working-class family. . . . We lived on and off public assistance to supplement my parents' income from two or three jobs each. Both of my parents were children of violent alcoholics. Neither of them ever drank to excess, but both were emotionally absent and verbally abusive."*
 - *"My mother only ever pointed out how stupid I was and everything I did wrong. My father, a severe hoarder, had extremely mercurial mood swings. When he was enraged, he'd often strangle or choke us against the wall while our feet dangled below. Or hold us to the ground by our throats while he beat us with his belt buckle. He often laughed at us when we were hurt. He used to hang around outside our bedroom door while us girls changed and look at us naked through the crack in the door. In our 1,200-square-foot house, if you were not the one being beaten, you were always close enough to hear or watch whoever was."*

Child Abuse by A Religious Figure

- A female victim of child abuse wrote about abuse at the hands of her father and a priest:
 - *“He [the father] had been sexually abusing me for years, but the rape stands out for me. I was unable to comprehend what had happened to me. It was much too big for my seven-year-old brain. My father and a family friend, a priest, sexually abused me and my three younger brothers.*
 - *While my mom was away ... we were terribly abused and made to do unspeakable things to each other. Again, at age eight to nine, I could not understand what was happening. I knew that my life was in danger and that I needed to escape.”*

Intimate Partner Violence (IPV)

- Although the etiology of the abuse was different, victims of intimate partner violence also experienced considerable emotional abuse and physical trauma.
- One victim wrote about her ordeal with an abusive significant other, which displayed the escalation of aggressive behaviors customarily experienced by many abused women.
 - *“The first signs he showed of having anger issues were just yelling spells—I actually sometimes thought they were funny, because he was being so ridiculous—then some mean name calling came into play and I began to feel the effects of the verbal abuse. About two years into the relationship ... was the first time yelling turned into shoving me down.*
 - *“I wasn’t hurt but I was horrified that he had physically attacked me. He worked out and was a very strong guy. Gradually over the years, the verbal and physical abuse became more severe and more often.”*

IPV and Suicide (cont.)

- As if the domestic violence were not enough, this individual witnessed her abuser’s suicide. She recounted:
 - *“The events of the evening are all jumbled in my memory.... Sometime in the night I realized he still wasn’t in bed.... I checked out in the garage and saw that he was sitting asleep on the floor and that he had blood on his forehead.... I walked out to check on him and saw the gun on the ground. He had threatened to shoot himself before—I even had to talk a gun out of his hand a few weeks before this. I thought to myself in total shock, ‘Oh, he finally did it.’ I felt his skin and called out his name. He was cold. Then I called 911.”*
- This individual further wrote that she had blocked from her memory that her significant other had been playing with a gun in the next room earlier that evening. She said:
 - *“I heard ‘click, click, click’ and I knew he was playing Russian roulette without even seeing him. I told myself, ‘He’s playing games, and if I just walk away, he’ll stop.’ I think I was actually protecting myself from witnessing what he was going to do.”*

Combat Trauma

- Trauma from combat likewise branded those who experienced it.
- One veteran wrote about his experience:
 - *"I served two tours with a Marine Recon Unit in Vietnam from 1967 to 1969. During this time I was transferred to the Phoenix Program, a unit established to carry out assignments of enemy agents and Vietcong insurgents embedded in the Vietnamese infrastructure. I was 18 and 19 years old."*
- Later on after he had returned to the states, this veteran experienced a break from reality. He recounted:
 - *"The episode that led me to the VA happened in 2004. My wife came home to find me with an inner and outer perimeter set up in the living room. I had enemy in the killing zone and I knew no one in the present. I was back in Vietnam in my present."*

Permanently Changed Lives

- Experiencing horrific abuse changed these participants permanently.
- One victim of child abuse wrote:
 - *"... Growing up with my father has meant living with the consequences of feeling small, worthless, in danger, sad, and not being able to trust others or myself."*
- Another former child victim noted that she became an unwilling confederate in her abuse:
 - *"I was told I shouldn't tell them about my family. I should keep the family's secrets. These secrets and my shame were heavy burdens."*

Trauma Disclosure

- A few tried to disclose what was happening to them and got nowhere. One victim wrote:
 - *"I told my mother what was happening, but she was unable to acknowledge my truth."*
- One victim of child abuse noted that teachers and an aunt had looked out for her, suspecting abuse. She said:
 - *"I was always good in school and I knew from their encouragement—I never told anyone about my home life—and something inside told me that education was my way out."*

Grief and Loss

- Yet another victim of child abuse wrote a moving passage about all that she had lost as a consequence of her experiences:
 - *"Because of trauma, I still don't feel entirely safe and secure. I'm always scanning for an attack, waiting for a disaster, wondering if today will be the day. I still startle extremely easily. I'm always bracing to be hit. Not sure any amount of therapy will resolve that.*
 - *"Because of trauma, I felt like I needed to be perfect at everything. I always thought, if I could just do this or that better, my parents would love me, that my father wouldn't hit me, or yell at me for everything he thought I did wrong. If I made my father laugh, he wouldn't hurt my siblings or the dogs by slamming the dogs' heads in the door or punting them across the room. If I told a story, then everyone was distracted and safe for a while. That was my role in the family: the distracter.*
 - *"Because of how hard my parents made me work—in vain—for just a glimpse of love, most of my relationships have been lopsided, unreciprocated disasters. Even now, I am the one who has to call, to fly, to reach out if I want connection with my family."*

IPV and Leaving the Abuser

- Victims of domestic violence also suffered from trauma.
- One victim wrote about how difficult it was to leave an abuser:
 - *"I had a tough time leaving him—but I finally managed to do it once after being with him for four years."*
- Another victim affirmed this difficulty after she found herself in an abused role for the second time:
 - *"I needed to leave again, but found I was so emotionally drained, I just couldn't do it. And I think pride made it hard for me to ask my parents for help again."*
- Being demeaned left its mark, as one victim noted:
 - *"Because of trauma, I allowed myself to be treated like trash, to be a target for some of the most disgusting men."*

Guilt and Combat PTSD

- While many who experienced child abuse and domestic violence expressed distaste for the actions of others and dismay at the subsequent effects these assaults had on their lives, they did not seem to experience the pernicious self-castigation and guilt exhibited by those who had combat PTSD.
- One veteran tried to explain his guilt:
 - *"The process of recovery with PTSD, especially which is derived from active up-close and personal combat with an enemy of my country, has given me little comfort.... To take another person's life while watching them draw their last breath goes against all I was taught as a child. My mother and father were far from churchgoers, but they were very moral people and transferred that on to my sister and myself...."*
 - *"I killed 56 people in the service of my country while serving.... I am not looking forward to the next 20 or 30 years."*

Trauma Summary

The participants' trauma accounts were unique to each individual and conveyed the horror and disbelief experienced by each trauma victim.

The greatest number of narratives came from victims of physical, emotional, and/or sexual abuse during childhood.

Child Abuse Narrative Themes

- The recurring theme from these submissions was that the victim, even years after enduring the abuse, did not understand why they experienced abuse.
 - They also did not understand why their parents or trusted adults violated societal and family taboos by abusing them. What was the point of it, they wondered, and why me?
- Years of sifting through events and relentless self-examination never provided clarity as to why their abusers singled them out for abuse.
- *Ultimately, recovery for these participants was a conscious decision to leave the past behind.*

IPV Narrative Themes

- The second largest category was victims of intimate partner violence (IPV).
 - While all of the accounts that were collected in this study were male-to-female violence, female-to-male and same-sex violence does occur.
- The accounts provided by IPV victims closely paralleled accounts in domestic violence literature: emotional and verbal abuse eventually escalated into full-blown physical abuse.
 - Victims were embarrassed and isolated themselves from friends and family or the abusers isolated them.
 - Escape from the violence was difficult.
- If these participants exhibited any shame or guilt, it was self-blame.
 - They were disappointed in themselves for not recognizing telling signs in abusers at the outset of relationships.
 - They were angry that they stayed in abusive relationships.

Combat Trauma Narrative Themes

- Veterans with combat-induced PTSD exhibited a type of persistent guilt that seemed rooted in having harmed or killed other humans.
 - The veterans in this study, especially those from the Vietnam era, seemed to have particularly severe PTSD symptoms and difficulty achieving satisfactory symptom abatement.
- Many reported that the fallout from the trauma and PTSD symptoms were so intrusive that intimate relationships and family life had been severely affected.

Effects of Trauma Narrative Themes

- Experiencing trauma also permanently changed victims of trauma.
- Several participants who had experienced child abuse wrote about living smaller, constricted lives, fearful of others.
 - A few said that they were hypervigilant about possible attacks even after the abuse had ended.
 - Many had issues trusting new people.
 - Others wrote of keeping quiet about the abuse, especially as children, to avoid dragging the family secrets into the open.
 - A few victims of child abuse wrote about sympathetic adults who suspected abuse and went out of their way to support and encourage the victims.
 - Others wrote about an overwhelming need for perfection, developed in childhood as a means to appease critical, violent parents.
- Victims of intimate partner violence also experienced long-lasting effects from trauma.
 - The most cited problem was that some women engaged in a series of abusive relationships, trying unsuccessfully to break the chain of violence.
 - Having been demeaned, they felt unworthy of a loving intimate relationship.
- In a similar manner, combat veterans felt that since they had killed, they were unable to forgive themselves ever.
 - They remained mired in permanent self-castigation.

Summary of All Trauma Themes

- Living through trauma often casts blight on the victim's hopes for the future.
 - After trauma has pushed the victim into the full-blown PTSD diagnosis, it becomes a difficult and lengthy journey to recover.
- The PTSD diagnosis and accompanying symptoms also dominate victims' lives.

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