

Young people's experiences after traumatic or negative events:  
A qualitative exploration

Submitted in part fulfilment of the degree of Doctorate in Clinical  
Psychology at the University of Edinburgh

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## **Dedication**

**To Kerry Beveridge,**

Our classmate who we lost but will never forget.

## **Acknowledgements**

Firstly I would like to thank my brave participants who so generously gave their time and who talked so frankly about their experiences. I hope I have managed to represent them well. I would also like to give a great deal of thanks to those who helped, or tried to help, me recruit. This was a long and arduous process and I'm very grateful to all those who generated ideas, approached people or let me speak to their classes, colleagues or friends. I have to thank my three supervisors who supported me in different ways during this project, Matthias Schwannauer, Leo Harding and Jenny Munro, with a special mention for Jenny who was very generous with her time out of hours and very understanding of my frequent crises.

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## **Abstract**

This study explores the responses of young people to traumatic or difficult events, who have not sought help from the mental health services. Literature in trauma has tended to concentrate on those who suffer a pathological reaction. However, there are many young people who undergo traumatic events who do not develop a psychiatric disorder. This group is not often studied and we know little about their reaction to these events.

In this study, a qualitative methodology was used to explore the experiences of six young people who felt they had undergone a traumatic or difficult life experience. This approach included an acknowledgement of the researcher's own views and their effect in the study. Each young person was interviewed and the transcripts were analysed using Grounded Theory (Struss and Corbin, 1998). Four categories emerged from the data.

These were: impact of the event, processing the event, managing the impact and developmental aspects. The event appeared to have a serious impact on the young people's lives although they did not feel it was in their thoughts at the present time. In the aftermath of the event, young people appeared to be engaged in processing the event and protecting themselves from being overwhelmed. This group appeared to have the flexibility to move between integration and protection, and also the ability to use a range of coping strategies. It was suggested that processing may not be a linear process that reaches a natural end point. This was discussed in terms of clinical work and the expectations therapists and clients have of the therapeutic process.

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# 1. Introduction

Typically, research and thinking in psychology, especially clinical psychology, concentrates on the pathological population, those who show high levels of distress. This piece of research aims to study those who are 'non pathological, 'normal', 'average', 'ordinary'. When I became interested in trauma, I started work in a centre for post traumatic stress and therefore gained my first 'psychological' experiences of trauma with a group of people that were typically depressed, anxious and experiencing some form of intrusions, generally 'flashbacks'. This group will label themselves or have been labelled by others, as 'not coping' in some way after going through some generally awful event. Their responses are understandable and we have models that help us to give people explanations for their difficulties and direct us towards interventions. However, trauma is all around us, in our own experiences, in our friends and family, in literature, film, theatre, art and television. We are surrounded by many people who do not go to mental health services but who have been through the same terrible events. How then, do these people process, cope and move on with their lives? Do they recover? These are obviously huge questions that cannot be answered in this piece of work. However these questions have informed my thinking and sparked my curiosity.

This piece of research looks specifically at young people's experience of trauma and loss and how they managed after this event. The young people studied have not sought help from the mental health services or have been given a psychiatric diagnosis. The aim of the study is to find out more about how young people cope after these events, or how they construe and report their own coping. The study therefore uses grounded theory, a qualitative methodology. The data is analyzed from a social constructionist position

where there is no attempt to come to a 'truth' or 'reality' of the experience but an interest what the young people say and how they say it.

## 1.1 Trauma and loss

Historically, the study of trauma and loss has been fraught with controversy and difficulty. Within the literature there are periods where research appears to grind to a halt and other periods where there is a proliferation of papers and theories. According to Herman (1992), this occurs because studying psychological trauma forces us to deal with both 'human vulnerability in the natural world and with the capacity for evil in human nature' (p7). Herman writes that the study of trauma can only take place within a political movement that seeks to free or value the victims of traumatic events such as the feminist movement that has brought sexual and domestic violence into the public forum. Trauma research during the 20<sup>th</sup> century has peaked in the periods during and after wars in the western world (Ozer, 2003) and current theorizing is rooted in the relatively new diagnosis of post traumatic stress disorder. Research now appears to have moved past looking at specific groups such as combat veterans and rape survivors and has broadened out to looking at survivors of natural and man made disasters, assault, accident, fire, life threatening illness and other incidents. Trauma research does, however, appear to take place within a series of dialectical debates (Erbes, 2004). There is a debate on how often trauma occurs, on whether people are not affected or can hardly help being affected, on blame and responsibility, on the importance of identity as a trauma survivor. Opposing ideas such as, trauma is unusual and happens to very few individuals and, trauma is

everywhere and happens to us all, can be hard to hold on to and reconcile and yet conflicting ideas such as these are to be found in a great deal of trauma literature (Herman, 1992). Erbes (2004) suggests that the principles of dialectical thought can be helpful to in our thinking about this area. In dialectical thinking, there is no one stable and enduring truth but evolving ideas that are formed from the consideration of opposing poles (Linehan, 1993). In this way ideas can be examined while retaining an overview of the debate as a whole. Herman introduced this idea when she wrote about the history of trauma, suggesting that clinicians and researchers initially embrace and then move away from the pain and distress that trauma brings. It is easier as a bystander to do nothing and indeed to attempt to get rid of the pain rather than to sit with it. This makes trauma an inherently difficult area to think about, to conceptualise, to research and to work with. Currently most of the trauma literature is based around the concept of post traumatic stress disorder. Prevalence studies calculate rates of PTSD in groups and many clinical trials look at treatment, diagnosis and conceptualisation of the disorder. It has been noted by researchers that there has been a long and hard battle fought to have PTSD recognized as a psychiatric condition that can be diagnosed and treated. This has however taken place within the movement to gain compensation for these effects, suggesting that the political element remains firmly in the foreground. This cannot be thought of as taking place within a social vacuum as the move towards compensation and blame appears to be significant in both US and UK culture. This can be both a positive and negative development, with many survivors gaining recognition and financial help. Strict lines delineating who is deserving of this and who is not cannot help but create a political process.

Much of what we know about people's reactions to traumatic events comes from the literature on post traumatic stress disorder (PTSD). There is now a vast array of studies that show prevalence rates of PTSD in various groups including adolescents (e.g. Giaconia et al, 1993; Cuffe, 1998). These studies show that the prevalence of traumatic events in community samples can range from 15% (Cuffe et al, 1998) to 84% (Joseph et al, 2000) depending on criteria used to define a traumatic event. The prevalence of PTSD in these samples varies from around 12% (Cuffe et al, 1998) to 20% (Joseph et al, 2000). The literature in this area tends to concentrate on people who have had a severe reaction to the traumatic event. To be given a diagnosis of PTSD, the individual must fulfil several criteria as stated by the DSM-IV (APA, 1994). The individual must re-experience the event in some distressing way, show persistent avoidance of stimuli associated with the trauma, have persistent symptoms of increased arousal and show clinically significant distress or impairment in an important area of functioning such as social or occupational. These symptoms must continue for more than one month.

Herman (1992) provides an emotive account of trauma that is more descriptive and talks about what people with post traumatic stress disorder actually experience after the event. Janoff-Bulman (1992) also wrote about these experiences and these authors provide the basis for much of the current experimental work in this area. Herman talks about a 'reconditioning' (p35) of the nervous system after trauma where the individual goes into a state of permanent alert as if the danger might reoccur at any time. The person remains physiologically aroused, startles easily, sleeps badly and reacts irritably to small provocations or altercations. They can suffer from a generalised anxiety and do not seem to be able to reach a 'normal' level of arousal, instead constantly operating at an elevated

state of arousal. From even this part of the description, it is clear that people who have been traumatised in this way could be considered to difficult to be with, at a time when they may be requiring increased social support.

Herman also describes intrusion as a dominant feature after the event where people are unable to live their lives as they are continually interrupted by various ways of reliving the event. These can take the form of flashbacks and nightmares. Children will re-enact the event through play and adults may re-enact the event in other situations, for example an assault victim who becomes filled with rage and screams at a fellow motorist who bangs into their car. These forms of re-enactment are usually frightening and survivors attempt to avoid them or cope with them by emotional numbing or alcohol or drug use. An extreme unconscious form of avoidance is dissociation where the person mentally 'leaves' their surroundings. Janoff-Bulman writes that intrusion serves the need for processing and integration in a situation where the traumatic memories have been too painful to position within existing frameworks. However, these intrusions are incredibly difficult to process as they conflict with existing schema. Janoff-Bulman famously describes this conflict as shattering existing schema although more recent work suggests that schema adjustment or reformation is a more complex process that may not evolve from an initial shattering (e.g. Resnick, 2001). Herman talks about disconnection from others as major feature of the trauma. She describes this as a sense of trust being broken and a feeling of abandonment and being utterly alone. She relates this feeling to Janoff-Bulman's idea that trauma interacts with assumptions about the safety of the world, the positive value of the self and meaningful order in the world. When these assumptions are challenged, she writes, a person's connection to the world and others can feel broken. She

suggests that this leads to a loss of the sense of self and a reopening of previously resolved developmental conflicts over issues such as autonomy and identity. Added to this is the sense of powerlessness that a trauma can bring, sending the individual into a state of surrender. Therefore not only do they undergo an incredibly painful process but feel as though there is nothing they can do about it.

Definitions of the term 'traumatic event' have changed over the years. This suggests that it is not always the nature of the event itself that is traumatic but that there is a subjective element to the experience. The definition of an event in the DSM system has changed three times since its inclusion with the latest definition in DSM-IV including the person's response as one of the features of the event. DSM-III described the event as being outside the normal range of 'usual human experience'. In the literature looking at child and adolescent responses to traumatic events, this definition is typically broadened to what we might regard as difficult or negative events (e.g. Joseph et al, 2000).

## 1.2 Developmental factors

This study looks at young people that we could describe as being in late adolescence or early adulthood. Adolescence has traditionally been conceptualised as a period of transition with inherent challenges and difficulties. Coles (1995) suggests that the entry to adulthood involves three main transitions: the move from full time education to the labour market; a domestic transition to relative independence from the family of origin; and the permanent move away from the family home. These markers imply that the move

to adulthood is therefore specific to culture, socio-economic class and will have changed over time.

As well as these practical changes, young people are also experiencing development in a number of areas. In physical terms, young people may be experiencing the end of growth spurts, neurological changes and late developers may continue to experience the effects of puberty. In terms of cognitive development, these young people will have reached the formal operational stage in Piagetian terms. This is characterised by new abilities to use logic to solve abstract problems and develop and test out hypotheses. The adolescent can make time related predictions i.e. the realisation that their relationships with friends or parents may be different in years to come, they can predict the logical consequences of actions i.e. understand that studying hard could lead to gaining a better job, they can detect logical inconsistencies i.e. that the government does not always practice what it preaches, and can understand that behaviour is influenced by situational factors (Carr, 1999). Riegel (1973) suggested that additional skills could be gained in early adulthood and described these as a lessening of cognitive egocentrism where the older adolescent is able to recognise that other people occupy different philosophical position to themselves. This increases the capacity to tolerate ambiguities and to reframe ethical considerations. It must be noted however, that not all adolescents or adults reach this level of skill (Muuss, 1996).

In line with physical and cognitive changes, the sense of self is thought to go through major development in adolescence as the young person experiences changes and is able to conceptualise them. A younger child will tend to describe themselves as having global attributes such as 'I am friendly' whereas in adolescence this develops into more

situational attributes such as 'I am friendly at school a but shy at parties'. They are also able to differentiate between who is doing the describing, such as 'my teacher would say I was friendly but my parents would say I was shy'. As they get older these attributes become more organised and hierarchical with attempts made to perceive traits making up a coherent whole. This need for coherence can cause difficulties in reconciling conflicting traits but appears to be an important development. Theorists such as Harter (e.g. 1988) suggest that the self concept is a theory that one develops about one's self and this theory gradually takes shape during adolescence and young adulthood. Bruner (2003) further theorises that the self is constructed from self making narratives that we continually construct and reconstruct about ourselves as we go through life. If adolescence can be considered the beginning of this process, it would seem to be a particularly important time.

Another important feature of adolescence is the development of identity. According to the Eriksonian model of identity formation (e.g. Erikson, 1968), the major processes in late adolescence and early adulthood are identity versus role confusion or the development of a clear sense of 'who am I' and intimacy versus isolation or the dilemma of whether to form an intimate relationship. The late adolescent may explore a variety of roles seeking to find an identity and may develop a strong commitment to a set of values. At this time they may also be exploring their sexual self and making decisions on the gender and type of partner that they prefer.

Families also adjust to their children approaching late adolescence. Parent-child relationships require realignment if the young person is to develop more autonomy and independence (Carr, 1999). This can be a difficult process for both adult and adolescent

as their expectations of each other change. In the older age group this can lead to a less hierarchical relationship, with parents preparing for living together again solely as a couple and the possible expansion of their extended family with their children acquiring partners and having children of their own. Autonomy is thought to four aspects: 'de-idealisation', where the young person sees the parents as fallible; 'parents as people' where the young person realises that the parents are people with their own lives; 'non-dependency' where the young person can manage certain aspects of live themselves; 'individuation' where the young person sees themselves as an individual in their relationship with their parents (Steinberg and Silverstein, 1986). This is obviously a complex process and has important implications for the role of friendships in the young person's life.

In mid adolescence, gender segregation in friendships begins to fade and adolescents tend to migrate towards one specific friendship group that is generally made up of similar individuals that influence each other towards greater similarity. Young women tend to rate their friendships as more intimate and affectionate and higher in companionship and satisfaction than young men but tend to have the same number of friendships. As autonomy and independence from the parental home increases, the relative importance of these relationships also increase and this process continues into early adulthood (Coleman and Hendry, 1999).

As this brief review suggests, adolescence and early adulthood is a time of change and consolidation. As has been discussed trauma in adults is considered to be overwhelming. There is little information about how trauma affects this age group when they do not go on to develop psychopathology.

### 1.3 Positive psychology

This study could be considered to be part of the positive psychology movement that has been growing for the past few years. Positive psychology is the study of 'the conditions and processes that contribute to the flourishing or optimal functioning of people, groups, and institutions' (Gable and Haidt, 2005). The field includes the study of positive emotions such as happiness, good relationships within families, strong communities, and areas of human experience such as optimism, wisdom, awe, forgiveness and hope. It is suggested that clinical psychology has created an imbalance in the research literature by concentrating almost solely on illness and pathological processes (e.g. Seligman et al, 2000) at the expense of our knowledge and understanding of normal processes. The movement has come in for some heavy criticism (e.g. Lazarus, 2003) with suggestions that this upsurge of interest is a fad in a field that promotes an unrealistic view of the world. Positive psychologists argue that researching good experiences does not negate bad experiences but merely looks at the other side of the coin and redresses the imbalance in the research. Furthermore, Gable and Haidt (2005) suggest that clinical psychologists have tended to study illness and pathology out of a concern for human suffering and a wish to help those who are not doing well. They emphasise that understanding of human strengths and abilities can only add to our knowledge of how to help those in distress. In addition, clinical psychology has tended to focus on treatment rather than prevention but as we have to shift our methods of working to meet increasing demand, prevention may be a more realistic way to deal with rising waiting lists and demand outstripping supply. These authors comment that our bias towards perceiving and processing the negative more easily should not be reflected in our science. This project, therefore, is attempting to

add to the knowledge base by studying a healthy part of the population in order to increase our knowledge of 'normal' processes.

## 1.4 Resilience

One of the key concepts in this area is resilience. As discussed by Silva and Kessler, the term resilience has the Latin roots of *re* meaning back, and *salir* meaning to jump, implying a meaning of 'bouncing back'. Rutter (1999) operationalises this as 'a relatively good outcome for someone despite their experience of situations that have been shown to carry a major risk'. Masten (2001) suggests that resilience research attempts to understand the processes that account for these outcomes. Within definitions of resilience there are two important conditions: exposure to some type of risk and some sort of good outcome. Both of these areas require judgements on the part of the researchers as to what constitutes a risk and what constitutes a good outcome. There also questions as to whether resilience is a state or a trait, and if resilience is present whether it will cover all areas.

There has been a great deal of interest in this area in the last 20-30 years. Indeed, resilience is one of the few areas of positive psychology to have received sustained research attention for a long period of time. A precursor to modern research on resilience was work in the 1970s where researchers began to notice that people with the least severe illness trajectories were likely to have certain characteristics premorbid to the illness (Garmezy, 1970). This was amidst a paradigm of research focussing on psychopathology and this group were thought of as atypical and largely ignored. Childhood resilience

became an emergent topic during research on mothers with schizophrenia where it became clear that many children did very well in a high risk environment (review in Masten et al, 1990). Research then broadened out into to look at many different adverse circumstances such as socioeconomic disadvantage and associated risks, maltreatment, community violence, traumatic events and chronic illness (Luthar et al, 2000). In the 1970's there was a perception the resilient children were 'invulnerable' or possessed some extraordinary ability or strength that made them able to cope with adversity. It also suggested that resilience was a global trait that one had or did not have. Further work however did not back up this claim. Michael Rutter (1990), one of the leading proponents in the field suggests that two other threads of research were important to the field. Firstly, research that provided evidence that temperament affected children's responses to stressful situations and secondly and importantly research into the active role that people play in situation of threat or challenge. This suggests that resilience is not just a matter of the person's constitution but a reflection of what the person does in the situation. This led to a consideration of person-environment interactions which in turn leads us to consider the importance of factor outwith the individual. Rutter (1990) also discussed the temptation to see factors in resilience as simply the opposite of risk factors. He discussed Garmezy's (1985) review of protective factors where Garmezy concluded that there were 3 broad sets of factors that were protective. These were internal factors such as autonomy, self esteem and positive social orientation, systemic factors such as family cohesion, warmth and a lack of discord and availability of external support systems. These are very similar to factors found in research looking at risk factors if we view these factors as a continuum where high levels of family cohesion protect and low

levels place the individual at risk. Rutter (1990) suggested however that a more productive way of conducting research was to focus on mechanisms and processes rather than broad factors, i.e. looking at the why and the how. How do some people maintain high self esteem though difficult events when others are unable to and why do some people have more close friends that they can turn to in times of crisis? Luthar and colleagues (2000) in their extensive review agree with this assessment and suggest that research has proceeded in this vein. Both authors also mention the move away from the view of resilience as a steady trait that was unchanging. Resilience is a more relative term where people may should new vulnerabilities or strengths as their development progresses and life circumstances change.

In her review paper published in 1998, Masten describes the main findings from resilience research. The predictors of good outcome in young people who have undergone adverse experiences include individual, family and extra-familial characteristics. Individual factors include: good intellectual functioning; appealing sociable, easy going disposition; self efficacy, self confidence, high self esteem; talents; faith. Family factors include: close relationship to caring parent figure; authoritative parenting, warmth, structure, high expectations; socioeconomic advantages; connections to extended supportive family networks. The extra-familial factors include: bonds to pro-social adults out with the family; connections to pro-social organisations; attending effective schools. She points out that these factors are associated with competence in ordinary children who have not experienced high risk situations and is keen to stress that resilience seems to be the product of normal developmental processes such as positive attachment experiences leading to the ability to regulate emotions and behaviour, build

relationships and motivation to engage with the environment. She takes this further in her paper named 'Ordinary Magic' (2001) where she states that if basic adaptational systems are protected and in good working order, development will be robust in the presence of adversity whereas if these systems are compromised, pre or post adversity, there will be a much greater risk of a poor outcome. She feels that the initial research conducted from deficit models have led researchers to believe that they are looking for something exceptional whereas the data points to the importance of ordinary processes.

Luther et al (2000) discuss challenges within the resilience literature and provide a good framework for the consideration of some issues pertinent to the research base. One of these points is the different conceptualisations of resilience across the literature. As previously stated, in resilience judgements have to be made about risk and outcome. Researchers have examined many different conditions of adversity from single stressful experiences to multiple events or extensive deprivation. The range of risks can present a problem for comparing across studies (Masten, 2001). Rutter (1990) also made the point that it is important to have an understanding of what the risk factor actually is as this may be obscured by other factors. For example, the death of a parent at a young age was a considered a risk factor but further research showed that this was only the case when accompanied by a factor such as a lack of parental affection after the death. In outcomes, some researchers stipulate that to qualify as resilient, young people must shown high functioning in multiple domains whereas other researchers require high functioning in one domain with average performance in others. Some researchers have begun to question whether researchers are dealing with one concept or with different phenomena. The authors here, however, point out that any construct requires some variability in

methodologies to expand understanding. They suggest that if diverse methodologies produce consonant findings this only adds to the evidence that a broad construct exists. Another question raised about the validity of the construct is the multi dimensionality of resilience, where some young people perform well in some domains but not others. For example, in a study of children with a history of maltreatment, two thirds were found to be academically resilient with only around a fifth showing resilience in social competence. The heterogeneity of functioning across domains like this leads to the suggestion there may be no overall construct. The authors suggest that although they would expect uniformity across similar domains of functioning, it would be unrealistic to expect that young people will perform in a consistently positive way across all domains at all times. They point out that we would not expect this pattern of functioning in the trajectories of normally developing children. Uneven functioning is common occurrence across cognitive, emotional and behavioural domains and therefore should not be considered to be unusual. The authors feel that this therefore does not invalidate resilience as a concept but also stress the need for more specificity of terms when discussing outcome. They stress the need for the inclusion of terms such as emotional resilience and behavioural resilience that they hope will bring greater precision to the debate.

## 1.5 Coping

Coping is defined by Lazarus and Folkman (1984) in their seminal work, 'Stress Appraisal and Coping' as 'constantly changing cognitive and behavioural efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person.' (p141). This definition is thought to apply to all stressful situations where coping takes place within a few moments or for days, months or years. This definition and subsequent model of coping has been highly influential in the field and has been adopted or used as a basis by the majority of researchers (Paykel and Endler, 1992).

According to Lazarus (1993) the historical forerunner to coping research is the psychoanalytic concept of ego defence. Defences are protective shields that attempt to manage the anxiety arising from both interpersonal and intra psychic conflicts (Lemma, 2003). They distort meaning in some way, such as denial, transforming ideas or avoidance and exist to protect us from danger, and therefore cope with situations that are often difficult to control. According to Cramer (2000), a contemporary author in this area, the main theoretical differences between coping and defence mechanisms are that coping is conscious whereas defence mechanisms are unconscious, and coping strategies are used intentionally whereas defence mechanisms are non-intentional. Studies looking at defence mechanisms such as repression were popular from 1930 -1960 but these laboratory experiments were heavily criticized on methodological grounds and coinciding with the rise of cognitive psychology mainly disappeared in the 1970s. In the 1960s and 1970s other researchers began to study coping rather than defences and significantly

Lazarus and Folkman began to view coping as a process rather than as a trait where coping changes over time and across contexts.

In the view of Lazarus and Folkman (1984) coping is a process with movement and change where strategies shift and appear and disappear. They state that in their process approach to coping there are three main features. First, the approach is concerned with what people actually do in the situation rather than what they usually do, would do or should do as would be examined with a trait approach. Secondly, in this model coping is contextual and is heavily dependent on circumstance so it is very important to know what the person is coping *with*. Thirdly, coping as a process suggests change throughout the process with the use of different strategies as time progresses. Lazarus and Folkman (1984) also regard coping as strategies that are effortful and not automatic, regardless of whether they are effective or not. Lazarus (1993) suggests that coping should be considered separately from their outcome as strategies may be helpful for some people in some parts of the coping process. This would mean that one coping strategy could be considered helpful for one person and not another and also that one strategy could be helpful at one part of the process but unhelpful at another. An example of this would be a cardiac patient who used denial as a strategy. If this is used when the heart attack occurs, it may be extremely unhelpful as it may prevent the person from seeking the correct treatment. However, it may be useful later on during the period of post coronary hospitalization (Lazarus, 1993).

The model also emphasises the importance of appraisal in coping. The concept that people construe meaning in events rather than just perceive the event has been expressed by Roman philosophers through to Shakespeare and continues to be important today in

areas such as cognitive behavioural therapy (Lazarus and Folkman, 1984). The authors describe appraisal as 'evaluative cognitive processes that intervene between the encounter and the reaction'. They suggest that there are three forms of appraisal, primary appraisal, secondary appraisal and reappraisal. The initial appraisal is a cognitive judgment as to whether the situation is threatening, challenging or stressful in any other way. The secondary appraisal involves deciding on what can be done in this situation. The situation is then constantly reappraised as each action or attempt at coping will change that situation to a degree.

Lazarus and Folkman (1984) go on to divide coping strategies into what they believe are the two major functions of coping: problem focussed and emotion focused. Problem focussed strategies aim to modify the stressor and actively change external events to make them easier to deal with, such as studying for the exam that you are worried about. These are believed to occur when the situation appears amenable to change. Emotion focussed strategies aim to modify the internal state that accompanies the stressor, such as trying to reduce exam anxiety with positive self talk. These are believed to be more prevalent when there is nothing the individual can do to change their situation. As previously mentioned this taxonomy has been the most popular amongst researchers (Parker and Endler, 1992).

Other frameworks have, however, been developed and are prominent in the literature and three other models will be briefly described here. The primary/secondary control model was developed by Rothbalm, Weisz and Snyder (1982). The framework is based on the goals that underlie the coping activity employed and has three broad categories. Primary coping is described as bringing the environment into line with one's wishes or

influencing external events, therefore changing what you can. Secondary coping is bringing oneself into line with environmental forces and adapting to circumstances. A third category is described as a lack of goal directed activity or coping including giving up and doing nothing.

The approach/avoidance framework has been used in the children's medical literature (Miller and Green, 1985) and is considered by Fields and Prinz (1998) to be similar to other frameworks such as monitoring/blunting, sensitisation/repression and active/passive coping. Approach or monitoring, active, sensitisation coping strategies are behavioural, emotional or cognitive attempts to orientate towards the stressor and look for information, show concern and attempt to deal with the stressor in some way. Avoidance or blunting, passive, repression strategies are orientated away from the stressor in an attempt to avoid it. In the medical literature, avoidance would include strategies such as being uninterested in finding out more about an illness.

A fourth model of coping is to be found in the psychosis literature and is described as sealing over versus integration. This framework was developed by McGlashen and colleagues (i.e. McGlashan et al, 1975) and was used to describe the recovery style of people who had experienced an episode of psychosis. This framework is seen as particularly pertinent to this study as psychosis is increasingly being conceptualised as a response to traumatic events and having an episode of psychosis is viewed as traumatic in itself. Sealing over is described as repressing and suppression of the events, thoughts and feelings that occurred within the psychotic episode with a lack of intent to see this event as part of their overall life experience. Integration is described as an awareness of the

continuity between events thoughts and feelings before during and after the psychotic episode and a conscious attempt to make sense of this episode in the context of their life. It has been suggested that emotional regulation is an important part of coping and that the two concepts are related and overlapping (e.g. Losoya et al, 1998). In a review of the topic, Gross (1999) suggests that Lazarus and Folkman's (1984) ideas about emotion focussed coping began the study of emotional regulation. The concept does not as yet have an excepted definition but Thomson (1994) suggests that it refers to the process of recognising, monitoring, evaluating and modifying emotional reactions. Emotional regulation refers to the regulation of both positive and negative emotions (Gross, 1999) although coping is usually taken to mean only the management of negative emotions. It can also involve increasing the emotional strength as well as restraining it, for example, athletes psyching themselves up before a race (Southam-Gerow et al, 2002) would involve an increase in emotional arousal. Eisenberg and Fabes (1995) suggest that there are three types of emotional regulation. These are: the regulation of the experience of emotion, the regulation of behaviour relating to the emotion and the regulation of the event that causes the emotion.

The dynamic process of coping has proved difficult to study, and recent articles on coping bemoan the lack of coherent research with good methodologies (Coyne and Racioppo, 2000). The coping literature is huge but as noted by several authors to be poor in quality and clinical relevance (i.e. Lazarus, 1999, Somerfield et al, 2000). The literature has been described as 'disappointing', 'modest' and sterile (as reported in Somerfield, 2000). According to Somerfield (2000), the main problem relates to research methodology as most research is based on between-person cross-sectional designs that he

believes do not capture the dynamic process of coping. This theme is taken further by Coyne and Racioppo (2000) who critique the use of coping checklists throughout the literature. Many studies use checklists and ask broad questions about how people cope. The authors suggest that these questions are too broad and the answers give the researchers no information about the process or circumstances of the coping strategies employed. They also suggest that information about the timing of strategies and the interaction with other processes are vital. The authors also discuss the confounding factors found in the literature. These include finding such as the association between high emotion focussed coping with higher distress. This can be taken to mean that this form of coping contributes to distress or could just be due to the fact the greater distress means more emotions need to be managed. Researchers attempt to deal with confounds such as this by introducing statistical control variables but these authors report that these are ineffective as they only partially control for a multitude of variables and can therefore make the results more difficult to generalise. Another problem is the lack of measurement of the goals of the individual in situations where they have to cope. It is assumed that people want to manage their distress and coping is aimed at obtaining an immediate reduction in psychological distress. However this is often not the person's agenda and in order to obtain other goals the individual may engage in strategies that bring an initial increase in distress. The person may for example aim to beat a competitor or finish a task and be prepared to accept an increase in distress to gain their target. If these factors are not considered by researchers, it could lead to a mislabelling of coping strategies as ineffective, whereas they were aimed at an entirely different goal.

These points suggest that there are still great difficulties in the coping literature. It is a very complex process where the individual may have different priorities, motivations, skills and attributions at work. These are difficult to tease out and form theories especially when researchers are looking at a vast range of people performing over a vast range of situations.

## 1.6 Coping and Development

The literature suggests that coping may be different in young people and children as opposed to adults. Most of the work with this group has utilized adult models. However, children and young people have different inner and outer worlds to adults. Coping involves emotions, thoughts, behaviours, attributions, expression and social factors, all of which are hugely affected by development. (Fields and Prinz, 1998). Some coping strategies require cognitive abilities such as abstract thinking mature emotional development. Children and young people's environments are also very different from that of adults. Children and young people are dependent and have greatly restricted freedom. This may protect them from stressors but may also prevent them from avoiding or leaving stressful situations such as an abusive family home. They therefore have less control over situations and less autonomy. They are also greatly affected by the reactions of others, especially family members upon whom they are dependent. Young people may experience different stressors than adults in environments such as school. Few adults find themselves in the position where they must attend highly structured learning environment

where they are continuously tested and graded amongst large groups of age related peers. They may also experience stressors in different ways according to their level of development. Young children may be buffered by an incomplete understanding of events or their distress could be magnified by a lack of understanding and little means to control the event.

Coping strategies are also expected to shift over time. A strategy that is appropriate for one stage of development would not be appropriate in another, such as crying to indicate hunger as an infant would not be useful in an older child.

Children and young people also lack experience of events and use of coping strategies so we may expect them to experiment with different styles or to lack various coping options. Fields and Prinz's (1998) review suggests that coping strategies show some age dependence. Pre schoolers have a strong tendency to use concrete problem focused strategies such as and they overwhelmingly prefer avoidance coping such as leaving the room. This would appear to make sense when one considers their cognitive development. They show little differentiation between stressors and tend to deal with every situation using the same limited range of strategies.

Primary school children begin to use emotion focused or cognitive coping strategies such as cognitive distraction. They tend to focus on worry, fear and self denigration. They also begin to report the use of positive self talk at this time. In general problem focussed coping decreases but within this actual problem solving behaviours increase. There is less use of care giver support and an increase preference for peer support, although adults are still turned to for support in difficult situations. At this time a mixture of approach and avoidance strategies is used with a great deal less use of avoidance as compared to pre

school children. Children are also able to use different strategies dependent on the stressors and have less of a 'one size fits all' approach.

In adolescence, the variety of strategies that young people have available increases significantly although the variety actually used decreases. The evidence of use of specific strategies becomes more equivocal in adolescence according to this review. There is, however, more specificity of strategy used according to the stressor. There is also less use of direct problem solving and behavioural avoidance, with greater evidence of a mixture in the types of approaches used.

It has been suggested that adolescence is a particularly important time as coping styles begin to consolidate at this point (Kazdin, 1993). Despite the fact the coping is seen as a process there is evidence to suggest that individuals acquire relatively stable coping styles (McCrea and Costa, 1986). There is a strong correlation between coping style and personality especially with measures of neuroticism and extraversion.

Studies have also looked at the outcome when children and adolescents use certain coping strategies. Children who use problem focussed strategies have been found to show less social problems (Compas et al, 1988), less emotional and behavioural problems (Ayres et al, 1996) and lower health risk behaviours (McCubbin et al, 1985). Children who use emotion focussed strategies are more likely to suffer from anxiety, depression and behavioural disorders (Compas et al, 1988). Interestingly, the work on avoidance coping has produced contrasting findings. Some studies have found that the frequent use of avoidance strategies is related to depression (Ebata et al, 1991) and anxiety (Lewis et al, 1996) whereas other researchers have found that avoidance coping is related to less dysfunctional behaviour (e.g. Kliewar, 1991). It has been suggested that avoidance

coping may be adaptive in situations where the person has little or no control but is unhelpful where the person is able to affect the situation (Losoya et al, 1998).

### 1.7 Post traumatic growth

Over the past 10 years there has been a burgeoning literature on the concept of post traumatic growth or stress related growth. This is a concept fundamental to the religious beliefs of Islam or Christianity where suffering produces a positive transformation (Tedeschi and Calhoun, 1995). It also appears in popular sayings, such as ‘what doesn’t kill you, makes you stronger.’ Many of the main researchers in this field (e.g. Park, Tedeschi and Calhoun) have commented that positive change after crisis is a well known phenomenon that many people relate to. Like resilience, it seems to have been overlooked by contemporary psychologists who maintained a focus on the negative outcomes of stressful events. This literature also deals with the process that occurs after a traumatic event and is one of the few areas in the literature that attempt to explain what occurs after trauma in individuals that are functioning reasonably well.

Post traumatic growth is described as going beyond concepts such as resilience which imply a return to former functioning towards a state where the individual moves beyond ‘pre trauma adaptation’ (Tedeschi and Calhoun, 2004a). The individual assesses their life as containing positive psychological changes (Linley and Joseph, 2004). This quote from Lance Armstrong, the world famous cyclist who was diagnosed with cancer, provides an example of this phenomenon in a newspaper interview:

'Looking back, I wouldn't change anything. Had I not been sick, I wouldn't have met my wife. I don't feel unlucky to have had to go through this. I learned a lot and grew tremendously over the past two years (Becker, 1998, quoted in Tedeschi and Calhoun, 2004).

People refer to this growth as resulting from the traumatic event or from their efforts to cope with that event (Park, 1999). However this growth does not preclude an extremely negative response to the event and does not represent psychological adjustment. Growth can exist with psychological distress and evidence is equivocal as to whether growth ameliorates distress in any way.

Post traumatic growth is reported to be a robust construct that has been found in various groups of trauma survivors including those who have survived a wide range of medical illnesses, bereavements, natural disasters, military combat, assaults and abuse (Linley and Joseph, 2004). It has been found across a wide age range and in both men and women (Powell et al, 2003). There has been little work carried out amongst adolescents but one recent study by Milam et al (2004) attempted to measure post traumatic growth in a mainly Hispanic adolescent group who had been through negative life events in the past three years. They reported findings where almost one third of their participants showed at least moderate post traumatic growth after stressful life events suggesting that some growth is possible in adolescents. This study found a correlation between age and growth and the authors suggest that this may mean that younger adolescents may lack the maturity to find meaningful outcomes from a negative event. This, however, only one study and more work needs to be conducted in this area.

Tedeschi and Calhoun are one of the main research teams in the field and report five domains of growth: greater appreciation of life and a changed sense of priorities; more intimate relationships with others; a greater sense of personal strength; recognition of new paths/ possibilities in life; spiritual development. These have been identified with a screening tool and factor analysis. An individual may report any or any combination of these domains to be considered to have experienced growth. This also suggests huge individual differences as we could predict that someone reporting an increased appreciation of life may have had a very different experience of the process than someone reporting spiritual growth (Tedeschi and Calhoun, 2004b).

Tedeschi and Calhoun (2004a) postulate that growth occurs during and because of the struggle to cope with trauma. They use a model based on the work of Janoff-Bullman (1992) where the assumptions and schema of the individual are overwhelmed by the traumatic event and shattered. The struggle to psychologically survive this and cope produces post traumatic growth. They suggest that if there is little or no struggle with the trauma there will be little opportunity for growth. Therefore if the event does not overwhelm the person's schema, there will be rapid resolution of difficulties and little fundamental learning or growth. However, if the person's schema are shattered, they will be forced to attempt adapt or rebuild, with this process leading to both distress and gain. This would appear to suggest a great deal of individual difference in this process with a multitude of outcomes depending on the pre existing schema, the coping strategies applied, the support offered and accepted and various other factors.

Tedeschi and Calhoun (2004a) regard engagement in cognitive processing an integral part of developing growth and believe that rumination is a central part of this. They

acknowledge that rumination has been found to be related to negative affect and depression (Lyubomirski et al, 1998) but suggest that a different type of rumination goes on in the development of growth that does not consist of negative, self punitive thinking. Instead they cite the work of Martin and Tesser (1996) who identified another type of rumination which they describe as event orientated including making sense, problem solving, reminiscence and anticipation. This type of rumination can involve thinking around a discrepancy involving unattained goals or a lack of fit between schema and events. Tedeschi and Calhoun (2004a) suggest that individuals whose beliefs were fundamentally challenged by the traumatic event were faced with previous beliefs and goals that no longer made sense to them. This realisation allows the individual to develop new beliefs or modify their existing ones and allows a feeling that they continue to move forward. This can be an extremely difficult and disturbing process perhaps accounting for the link between growth and distress.

These authors also suggest that social support and self-disclosure plays a large role in the development of growth. This disclosure appears to be effective if written or verbal as studies with journal writing have shown positive effects. The authors suggest that the facilitation or discouragement of cognitive processing may be the important factor. Good social support can therefore facilitate processing and then growth especially, the authors believe, if it is stable and consistent across time.

The model of Tedeschi and Calhoun suggests that a traumatic event may have an impact on a person's schema, beliefs and goals. If this occurs, the individual will have to both manage their emotional distress and this challenge to their beliefs. This may lead to rumination that may initially be automatic and intrusive. It will however, eventually

become more deliberate and goal directed when aided by self disclosure and social support that facilitates cognitive processing and also provides models for growth.

Rumination will then lead to schema change and growth.

Other commentators such as Wortman (2004) are very suspicious of the concept of post traumatic growth and are concerned that this concept will be used to negate the very powerful negative effects of trauma. She suggests that Tedeschi and Calhoun do not give enough consideration to the extreme distress and negative changes that people have when they also report growth and wonders how meaningful these reports of growth are to the participants. One of her own studies of bereaved persons is cited by Tedeschi and Calhoun as one where the participants show growth (Lehman, Wortman and Williams, 1987). Wortman points out that although participants report a positive life change they also tended to experience a significantly lower quality of life than controls, to worry more, to show more symptoms of depression and anxiety, to score higher on measures of loneliness, were less likely to be working, have more stress in dealing with their children, more difficult in getting involved in leisure activities and be more likely to seek divorce. This group also showed a higher mortality rate than the control group even though they were a relatively young group in their 40s. Wortman, therefore, suggests that this group's endorsement of a positive life change may not be as meaningful to them as it is to researchers looking at this topic. She suggests that when one looks at that whole picture, it may be that people who report a positive change may not actually have gained from the experience but rather have significantly lost.

In a critique of the work of Tedeschi and Calhoun, Noel-Hoeksoma and Davis (2004) suggest that there may be other explanations for the reporting of growth by people who

have experienced trauma. They suggest two other possible explanations: that these reports are self enhancing or self protecting illusions, or that they are examples of acting coping efforts. In terms of growth being a self enhancing illusion, they point to work by MacFarland and Alvaro (2000) looking at temporal or intrapersonal comparisons i.e. how we compare our attributes or performance to ourselves in the past with queries such as, 'Am I as happy as I used to be?'. This is based on work by Albert (1977) who proposed that perceptions of personal growth and learning allow people to maintain an integrated sense of self. He suggested that temporal comparisons are an important part of the individual's sense of self and serve to help establish a coherent sense of self over the lifespan. Although this need can usually be served by employing an image of the past self that is similar to the current self, there is a basic desire to perceive progressive improvement in one's self. This can be achieved by distorting the image of the past self. Albert compares this to 'downward social comparisons' that enhance self esteem, such as 'I am happier than she is', where there would be 'downward temporal comparisons' such as 'I am happier than I used to be'. MacFarland and Alvaro (2000) performed a series of lab-based studies with people who had undergone stressful life events or who had acquaintances who had undergone similar events. They suggest that people who feel under threat are more likely to need to use self enhancement strategies. They believe their studies show evidence of illusionary thinking as victims were more likely to give higher ratings of growth than observers, victims were more likely to report growth when asked to focus on more negative events and people who were induced to feel negative affect and negative self relevant feelings responded with stronger perceptions of personal growth. The authors did point out, however, that all their participants persistently

reported positive changes in themselves and although they propose that some of these changes were due to illusory thinking, they suggest that there may be real changes that are simply exaggerated.

In terms of personal growth being an active coping strategy, Noel-Hoeksoma and Davis (2004) note that positive reinterpretation is found in various coping checklists (for example, Carver et al, 1989). They discuss the suggestion that people may routinely remind themselves of the positive effects of trauma in order to raise their mood. Stanton et al (2002) conducted a study where they asked cancer sufferers to write each day about the perceived benefits since they received their diagnosis, the facts about cancer or about their emotions. The group in the 'benefits' condition perceived they had more long term positive effects from being in the study and actually had less cancer related medical appointments in the three months following the study, leading the authors to believe that thinking about the positive effects could be used as an active coping strategy.

As previously stated, the aim of this study is to explore young people's responses to traumatic events, looking at group who have not sought help from the mental health services. There is little literature that directly addresses this group but the themes described in the literature on resilience and coping would seem directly relevant to this area. Post traumatic growth was also discussed as it provides one of the few models of processing that does not emerge from a pathological population.

## 1.8 Qualitative methodology

As little is known about this group and there is a lack of conceptual model and theories in this area, a qualitative methodology was chosen to explore the area further. Qualitative methods are considered to be useful in areas where little is known or to gain novel understanding in more researched areas (Stern, 1980). Qualitative methods are also thought to be particularly useful in generating theories about psychological phenomena such as 'feelings, thought processes and emotions' (Strauss and Corbin, 1998, p11) that may be more difficult to elicit from other research methodologies.

There are two main qualitative methodologies that would be applicable for this type of study, grounded theory and interpretative phenomenological analysis (IPA). Although IPA is a well established methodology, it is considered to be more useful when the researcher is attempting to connect themes to current literature (Dallos and Vetere, 2005).

As there was little literature directly related to this area, this was not considered to be the most helpful approach. IPA also involves the use of interpretation at an earlier stage of the analysis. As the researcher was inexperienced in qualitative research, it seemed to be important to ground the analysis as much as possible within the data in the initial stages. As the aim of the study was to explore this area and generate mid level theory, grounded theory was thought to be the most appropriate methodology.

Grounded theory is a form of qualitative methodology widely used in various disciplines. The main tenets of this methodology are the emergence of the theory from the data and importance of remaining grounded in the data. Emphasis is placed on the 'discovery' of themes and concepts through analysing and reanalysing data. Grounded Theory was developed in the 1960's by Glaser and Strauss (e.g. Glaser and Strauss, 1967) as a way to

introduce rigor and standardisation into the qualitative paradigm. Initially the approach considered the researcher to be an independent observer who could generate theory from data gathered through interviews, observations, films, records, documents or other sources by analysing data using standardised coding techniques. This coding would generate themes and data collection would go on until saturation point i.e. the point where no new themes emerge. The authenticity of these themes would then be checked for validity through a process of crystallisation or triangulation (the use of multiple sources or researchers). This reflects the position of qualitative research as defined by the positivist paradigm. Some researchers have moved away from this positivist stance. Corbin and Strauss (1998) now discuss grounded theory in terms of a synthesis between scientific rigor and creativity. Researchers are encouraged to be open to possibilities and use nonlinear forms of thinking. They describe analysis as 'the interplay between researchers and data' (Corbin and Strauss, 1998).

Social constructionism takes a critical stance to what we assume are facts and knowledge. It suggests that we challenge our assumptions about the way we see the world. In fact it re-introduces, 'we' and 'I' back into the world so that there are no unbiased, objective observations only observations that people make that are coloured by their perceptions. This has implications for the nature of 'reality' and 'truth'. Positivist and empirical paradigms assume that reality is out there, and can be measured truthfully. A social constructionist would suggest that this is impossible as there is no one reality, only constructions that are historically and culturally specific. These constructions occur between people at all times, through language and ultimately social interaction. The basic tenants of this position are: that there is no objective, measurable reality; that people have

no discernable nature that can be discovered, that language is the means of building our constructions of the world and that our knowledge and theories grow out of a historical and cultural background (Burr, 2003).

Charmaz (2003) describes constructivist grounded theory as a methodology that takes account of these factors where the views of the researcher are integral to the research as the discovered 'reality' arises from the interaction between researcher and participant. These ideas were thought to particularly important to this study as participants were being asked to describe their experiences retrospectively. Therefore they were being asked to look back and reconstruct events in an interview situation with a researcher who constructed the interview, asked questions and made responses.

## 1.9 Researcher position

As this is qualitative piece of work, the position of the researcher is integral to the analysis and research. It was therefore considered to be important to include reflections on the literature that was read as an introduction to the research and to include something of the researcher's personal perspective on the study. The material in this section is drawn from the reflective diary kept for the duration of the study.

The literature on these areas seems to be particularly emotive. Trauma itself raises controversy and strong feelings in researchers and clinicians alike, and some of the commentaries read seemed almost vitriolic, something that I think not only reflects the personalities of those involved but the emotions evoked by these topics. I was very

interested in Herman's (1992) view that trauma is difficult to engage with and has been a field dominated by a process of engagement coupled with denial as I feel that I have approached the topic in precisely this way, often swinging from one position to the other. It has been hard not to adopt a polarised thinking style that alternately ignores one position.

It is difficult to find a sense of coherence in the coping literature. It appears to be a very complex area that lacks over riding theoretical constructs and the sense that the debate is moving forward. Common definitions are difficult to find and I felt a real sense of frustration with the seeming lack of progress.

The literature on post traumatic growth is exciting and new and seems to raise some of the same debates that occur in positive psychology. It seems to be important to researchers where they place themselves, not only as researcher, clinicians, psychologists but as human beings. Do you perceive yourself as optimistic, seeing life as experience of growth or as life as hardship and full of painful experiences? And which position is more 'right' or meaningful? These are fundamental questions that certainly resonate with me and I think are part of the reason why I chose to do research in this area.

I came to this project having worked in a specialist centre for people with a diagnosis of PTSD and a current post working with young people. As a clinician who is known to have interest in trauma my case load has been skewed in favour of these cases. I have a curiosity about people who have had a traumatic or difficult event but have not approached the mental health services. What made people I see as a clinician different from those that I will never see? I became interested in the 'missing' group in trauma studies, those that are omitted from the analysis because they did not meet DSM-IV

criteria. I have reflected at length as to why this group interested me. One reason is that I think we can learn from the healthy. We can find clues in normal processes to help us understand those who are not managing as well. Therefore I can agree with those who argue for the study of positive psychology, at least on that level. I also however, think I was looking for some distance from the pain and difficulties of those who I see in everyday practice. I would place myself in the dialectic of the trauma debate with engagement followed by a need to explore the other aspects of trauma that would not be as raw.

I would add at this point that I was also operating from the perspective of someone who had recently experienced loss. At the end of our first year, one of our class committed suicide. This loss had a great effect on me as an individual, as a clinician, as a member of our class. It is only now, however, that I look back in surprise and see the parallels with this piece of research. Perhaps I have been trying to process this loss by looking at the way people cope, particularly adolescents who I feel somewhat connected to at this point. The sadness I feel about my classmate who did not survive may also have driven me towards looking at a group who have survived, who are resilient in the face of adversity and who provide a more hopeful view of the world. This idea of resilience is also very attractive for a clinician who feels an added sense of responsibility for her clients that often occurs after being confronted with a completed suicide.

The themes of adolescence and development also resonate with my current position. My experience as a trainee has, I think, pushed me into re-experiencing some issues with creating a sense of self, individuating, autonomy and separation. I feel that I have been pushed back into a position of dependence on very powerful others who can be

encouraging, nurturing and punitive. I have been engaged in building my identity as a psychologist and as the nature of the work is to deal with the personal and examine the self, this building of identity has been an intensive and sometimes painful process.

Coming to the end of the course raises all sorts of issues about loss and the move towards independence. I wonder now, how much these feelings have influenced my choice of a final year placement in an adolescent unit, where these issues are acted out on a daily basis, and conducting my research in this area.

Finally, the choice of methodology for this project represents my search for coherence. In my final year, the important aspect of my training has been to build my skills and abilities in reflective practice and to learn how to think about issues in different ways. I have also been working with a supervisor who uses a narrative model of therapy. When deciding to research this area, I was not only looking for the best methodology but to find a way of using these ways of thinking in my thesis. It made sense to me to try and keep the same ideas running through all aspects of my working life. I have the sense of wanting everything to fit together, coherently, and this approach felt as though it would be way of maintaining integrity and reducing cognitive dissonance.

## 2. Generating the data

### 2.1 Design

This study was qualitative in nature and used a grounded theory methodology. Interviews with volunteers provided the main source of data. A reflexive diary was kept throughout the project from the stage of generating the proposal to final write up. This diary provided additional information on what occurred during each stage and contained the researcher's reflections on the literature, the process of conducting a study, the analysis and thoughts around the topic of trauma and loss. Details of the process of conducting grounded theory are contained in the following sections.

### 2.2 Recruitment

Recruitment proved to be a complex process with many difficulties and unexpected developments. Initially it was planned that young people could be recruited from schools by appealing to them directly. Permission to approach schools was sought from and granted by the Director of Education, Education Department for Lothian Council. The submission included a research proposal, information sheet, consent form and recruitment flyer. The recruitment flyer contained a brief outline of the study and a mobile telephone number and email address that young people could use to arrange to meet or be given further information. Copies of these are found in the appendix. Head teachers were then

asked to give permission for their pupils to be approached. Three schools gave outright refusals at this point. Five schools gave permission for me to contact their pupils. Two of these schools wished me to send information to their guidance staff who would then distribute this to their S4, S5 and S6 classes. Two of the other schools allowed me to appear in assemblies and explain the project and ask pupils if they would like to take part. There were no responses from either of these methods. Local colleges were also contacted and I was able to undertake the same type of recruitment at the beginning or end of lectures for a number of classes including psychology and drama. These subjects were chosen as it was felt that people interested in studying these courses may have greater interest in reflecting on their own experiences and thinking about themselves. Again this method of recruitment was unsuccessful. One guidance teacher, however, was particularly helpful and suggested the project to some young people that she felt had gone through difficult events. This teacher knew her pupils very well as she was Head of House in a boarding school. She made the suggestions on her own initiative. As these recruiting methods had proved to be mainly unsuccessful, the recruitment strategy was changed. It seemed that approaching young people in these settings was ineffective with the materials and methods that had been used. The project was explained to colleagues, friends and acquaintances, and their help was requested in identifying young people that they knew who would be happy to be approached. These informal 'recruiters' asked young people in, for example, a workplace if they had been through a traumatic or negative event and would like to take part in the project. Further participants were identified in this way and in total six people agreed to take part.

## 2.3 Reflections on recruitment

This study had no easy, obvious group that could be sampled precisely because I wanted to study a group that has no reason to be cohesive or brought together in any way. There was no obvious point of contact because people were ideally ordinary and not seeking help. Young people are difficult to recruit for studies and I was attempting to recruit people who were about to sit important exams. However, I also wonder if my materials had a significant effect. The flyer I used had the word 'trauma' on it and on reflection I wonder if this was off putting. People who have undergone traumatic or difficult events and coped may struggle to identify themselves with this word as they do not feel 'traumatised'. When the recruitment proceeded and I found myself explaining the project in greater detail that I had been able to do in front of audiences, I found that it was necessary to stop using the word trauma and instead talk about negative or bad things that happened to people and give many examples, from my own life, such as being in car crash. People were then able to look back at their own lives and would often realise that they could think of one or a number of events that they themselves had been through. This appears to enable them to understand the study more fully. These were the people that I would then ask if they could think of any young people that might want to take part. This difficulty in persuading people to identify themselves as part of this group seemed to me to be at the heart of my recruitment problem at this point.

I was also aware that people tended to have reservations about asking others to discuss events that were traumatic or difficult. In these discussions I was very clear that although I would want to know what the event was, I was more interested in talking about what

occurred after the event. I was however, interested to hear staff, teachers and friends talking about not wanting to 'stir things up' for others and the idea that people have got over this event so probably wouldn't want to talk to someone about it. Interestingly this was a comment that people made about others rather than themselves. At this point, my interpretation of this related to the integration vs sealing over literature in psychosis as discussed in the literature review section (e.g. McGlashan et al, 1975). It seemed that there is an assumption that other people adopt a sealing over style of coping, put the event out of their thoughts and are therefore unwilling or unable to speak about it.

## 2.4 Participants

Participants were therefore recruited in a variety of ways, mainly through informal means. However no participant was personally known to me or was likely to become known to me in the future. Their details are given below.

Participant 1 was 21 years old at the time of interview. She is married and working in a secretarial post. She discussed the murder of her best friend that took place when they were both 9 years old. The murder occurred within a small community and was carried out by a local man that was known to her. He was later arrested and convicted of the murder.

Participant 2 was 17 years old at the time of interview. She attends a boarding school and is currently single. She discussed the death of grandfather approximately 4 months before

the interview. He died after an illness. This was her first experience of death and grieving.

Participant 3 was 23 years old at time of interview. He is working in a nursing post and is currently single. He discussed an assault and robbery that took place when he was 16 years old. The incident was reported to the police but he was not physically injured.

Participant 4 was 24 at time of interview. She is currently a student and has a boyfriend. She discussed bullying that occurred over 18 months, beginning when she was 14. The bullying involved threats of physical violence and intimidation.

Participant 5 was 24 at time of interview. He works in the merchant navy and has a girlfriend. He described a series of incidents and accident that have occurred at sea beginning when he was 17, including major injuries to himself and others, and storms where he had a fear of dying.

Participant 6 was 24 at time of interview. He works in a shop and currently has a girlfriend. He discussed a serious car crash he was involved in at the age of 19. He was a passenger in a car that left the road, flipped over and landed on its roof, almost crushing the passengers. He suffered a badly lacerated arm and was taken to hospital for treatment.

## 2.5 Interview protocol

All interviews were conducted individually in a relatively familiar setting to the participant such as school, a workplace or a friend's home. The aim was to make the

volunteers as comfortable as possible. To this end, I aimed to provide neutrality in my own appearance and was careful to wear bland, casual clothes to avoid appearing as a professional or causing any comment. I was also aware of adjusting my accent and way of speaking slightly depending on the participant. Interviews lasted from around 45-90 minutes and were recorded using a digital recording device. The interviews were then downloaded into a laptop computer kept in a secure environment and transcribed. The interviews were then deleted from the digital recorder.

Before the interview took place participants were given an explanation of the project, asked to sign a consent form that was initially prepared for young people recruited from school and encouraged to ask questions. Participants were informed that discussing traumatic events of the past may result in them thinking more about these issues after the interview. They were informed that they could contact the interviewer after the project if they had any concerns. This was also discussed at the end of the interview and participants were advised that they should contact their GP if they had any major difficulties.

## **2.6 Ethical considerations**

Formal discussions about the need for ethics approval were conducted with the academic team on the East of Scotland D. Clin. Psychology course. As participants were considered to be healthy volunteers that were capable of giving informed consent, it was decided that no formal ethical approval should be sought for the study. As stated, a formal proposal

was made to the Education Department of Edinburgh City Council and permission was granted to approach the head teachers in the schools. This same proposal was submitted to a local private school. The proposal contained a consent form and information sheet. Each participant was taken through this form and asked to sign the consent sheet.

The main ethical consideration with this was thought to be the possibility of the participants having difficulties after discussing a difficult event. This was discussed with the participants both before and after the interview and access to mental health services was discussed. A GP consultation would be the normal route in most cases. One participant was at school and she was advised that she could contact her guidance teacher or GP in the first instance. Participants were also able to contact the researcher for a limited period after their interview and were encouraged to do so if they had any difficulties. None of the participants took up this opportunity.

Participants were made aware as far as possible that this would not be a therapeutic consultation but a research interview. It was considered that this study may have been seen as a way to seek help for difficulties that people experienced. To counter this, all discussion about the study emphasised the interest there was in the participants' views and the position of the interviewer as a researcher rather than a clinician.

As an exploratory study, there was the potential for participants revealing information that was unexpected. Although these were healthy volunteers, there was potential for participants to reveal, for example, ideas about harming themselves or others. It was explained as part of the consent form that if these thoughts were revealed the researcher would have an ethical obligation to inform the relevant agencies.

## 2.7 Pilot interviews

Before beginning the interviews for the project, a series of three pilot interviews with colleagues and classmates were conducted to develop interview skills and attempt to find suitable questions that would enable the participants to respond openly. Recruiting people to participate in this process seemed similar to the experience of recruiting young people. Classmates were quick to rule themselves out reporting that they felt that had not experienced an event that was severe enough to be interesting to me. I wondered why no one referred to the loss of our colleague, two years before, an event that I regarded as traumatic. Perhaps an explanation was that it was assumed that I was searching for pathology. Maybe my colleagues thought I would not be interested in them and the events in their lives as they did not attach significance to them or possibly because they did not want to reveal any real difficulties to a classmate in a research setting. There may have also been an element of my close colleagues trying to protect me from their own painful memories. Again it seems as though people did not identify themselves as individuals who had been through difficult events. Those who did agree, did so after discussing my project at length and hearing my thoughts on resiliency and coping. I found myself using words such as 'normal' and 'ordinary' in an attempt to reassure them. Even when participants were successfully recruited, apparently understood the project and had asked questions and had them answered, they continued to make comments such as 'I'm not really sure if I'll be any use to you though' and 'I'm fine really though so I don't know if I'll be able to help'. These comments appear with participants in the pilot interview and later participants in pre interview discussions. At this point, this theme

appeared to a lack of identification with pathology and significant events. This will be discussed further in the analysis section.

## 2.8 Development of interview technique

Interviews were intended to be open ended and led by the participant with minimal steering from the interviewer in order to produce accounts that reflected the experiences and views of the participant. As already discussed, any conversation is constructed by both participants and the input of the interviewer is considered as equally important. The participant was explicitly told that there were no specific questions that needed to be answered and that their own accounts and views were considered valuable. The initial plan for the interview was to refer to the event by asking a basic question on what it involved but to elicit no detail and then move the discussion forward to what happened after the event. The participants in the pilot quickly informed me that this made no sense. It appeared to be important for people to tell what had happened with a great deal of detail. In one interview this was exemplified by a participant who was describing the suicide of a patient while she worked in another post. When I asked her to 'just tell me what the event was that you thought of', she responded with what appeared a step by step account of what had occurred with a great deal of detail about the method of suicide, the rather graphic scenes she witnessed and her own reaction. Another participant responded to a similar question with the statement, 'well why don't I just tell you about it' before proceeding with her account. I had planned not to ask about the event in an attempt to

encourage people to take part, assuming that people would find it more difficult to take about the event itself. It seemed however, that people were unable or unwilling to do this and actually wanted to, or felt compelled to share details. This may have been to give me some understanding, to make their narrative feel more coherent to them or because they simply could not discuss their reaction to the events without describing the event itself. Any attempts to steer people from these details resulted in the interview coming to a halt. I therefore revised my ideas about the structure of the interview and began with an opening that suggested that participants should talk about the event to give me some idea about what had happened. Thereafter, questions were asked that either pertained to the event to expand on their answers or referred to the time after the event. Participants were directly asked about what they did to cope but it seemed more appropriate to ask them to describe what happened next rather than to make a retrospective evaluation of what strategies they used. Throughout the interview I attempted to keep an awareness of my own stance and ideas and try not impose those on the participant.

## 2.9 Coding process

The six interviews were coded with NVIVO, a software package designed for use in qualitative studies. As there were no pre-existing theoretical or conceptual theories being applied to the interviews, the initial coding was 'open coding' (Strauss and Corbin, 1998) where the transcribed interviews were coded phrase by phrase. Each phrase could be given a number of different codes dependent on content, structure, form, emphasis and

the way the content was reported and therefore each interview could generate 300 or more codes. Simultaneously, the interview was read and re-read and relevant themes or points of interest were described in memo format. These memos aimed to reflect the sense of what was being said or the concepts that the participants were attempting to describe. These codes were then re-examined in a search for similarities or psychological concepts and were slowly placed together in broad categories to ultimately generate themes. This second level coding is known as 'axial coding' (Strauss and Corbin, 1998). An example of this process is given by the phrase, '..you know, it made me really upset...' This was coded as 'upset after event' and 'emphasised negative emotion'. When the codes were examined the code, 'upset after event' was placed in a broad category of 'emotions reported after the event' and the code of 'emphasised negative emotion' was placed in a category named 'emphasised- significant to participant'. This seemed interesting so a memo was written to highlight it. The categories were then examined for similarities or concepts and this category was refined into 'negative emotions after the event' as this appeared to explain the codes more definitively. In the next stage some categories were merged to become 'painful aspects of the situation' as this seemed to be a meaningful way of describing the phenomenon. However, this category was later reanalysed as it did not seem as if the components related to each other. The category of 'negative emotions after the event' remained intact and consideration was given to the meaning of the reporting of these emotions. It made sense that these emotions were being reported as part of an acknowledgement of how serious and difficult the event was. The category therefore became part of this theme. This example should illustrate the deconstruction of the text into codes and the reconstruction of meaning as the categories

build into themes. It is a flexible process with room for interpretation and change in all the stages.

The analysis was conducted using a grounded theory model and therefore the interviews were conducted in pairs. Prominent themes that the researcher considered interesting and in need of further development were then chosen to be taken forward into the next set of interviews. This is known as theoretical sampling and allows themes to be refined and better understood. The next set of interviews would then be coded into existing themes and emerging themes. Early interviews would be reanalysed in terms of these new themes. This process was intended to be repeated until saturation point was reached i.e. until no new themes emerged from the data. Due to recruitment problems and time constraints the process was halted after the third set of interviews, probably well before saturation point. The data can only therefore be analysed on a speculative basis as I would presume many more themes would have emerged from future interviews. However, themes from the existing data set did emerge and are analysed and discussed here. Although, these themes may have been dropped from a larger data set, the themes are felt to reflect the data collected from this group. As discussed by Strauss and Corbin (1998), this means that theories generated are not as well defined as they may have been if more theoretical sampling had taken place.

## 2.10 Theoretical sampling

The first two interviews provided much material on talking about feelings and the disadvantages of bottling up emotions with discussion of how serious the event was, although the participants felt that they coped well. Both interviews were based around experiences of grief and loss and many of the initial themes that emerged reflected this. These themes were then lost as interviews progressed. Both participants talked about what they had learned from the event and their reactions. This seemed to be important and I was already interested in this topic after reading in this area. This theme was therefore chosen to be taken forward to the next set of interviews. If the person did not spontaneously refer to this, I asked questions such as, 'do you think you learned anything from this?' The other theme taken forward was based on what seemed to be an omission from the first two interviews. The participants did not refer to the way the event made them feel about themselves and after discussing the emergent themes with a supervisor, it seemed as though this may be an omission. I wondered what the event had made people feel about themselves, whether it had challenged their assumption about themselves. The first two participants had not mentioned this and as this seems to play a vital role in people's pathological reactions to a traumatic event, it seemed important to ask about. This proved to be a difficult question to have people answer and is not reflected in any of the themes that emerge from the data.

The second set of interviews provided new material on what changes occurred after the event, the importance of comparisons, a sense of getting on with things and the importance of the age at which the event occurred. These two interviews were both based

around an experience of persecution by another individual and there was material about wishing for justice that did not appear in the other interviews. The information about age was thought to be interesting as the study looks at young people who are going through the later stages of adolescence where change may be taking place. This theme was therefore taken forward into the next interviews. There was also material about a shift in thinking that occurred and it was decided to attempt to develop this possible theme further as it seemed as though it may be an important part of processing the event. Analysis of this second set of interviews allowed the initial themes to be developed and the second set of themes were developed further as the first set of interviews were reanalysed.

The third set of interviews provided more material relating to the pre existing themes that allowed them to develop further and also brought new themes. The sense of the event as a narrative or story appeared important as did material on the importance of knowledge about the event and not dwelling on the past. Material on the use of humour was considered interesting but was not reflected in the other interviews.

### 3. Description of themes

After the themes emerged from the data, they were grouped into four core categories. These categories were interlinked and overlapping with some themes appearing relevant to different categories. In the next section the themes will be described individually. The first category of 'Impact of the Event' is outlined in Figure 1 below:

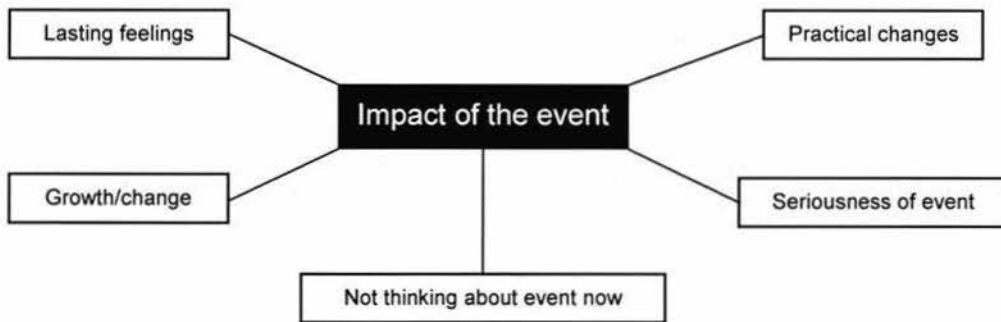


Figure 1

#### 3.1 Impact of the event

##### 3.1.1 Seriousness of event

This theme reflects the participants' admissions of how serious the event was. As participants identified themselves as able to take part in the study, there was an expectation that they would consider the event as serious.

*"He said have you ever... anything traumatising or anything. So my immediate thought was this car crash that I was in."*

Participant 6

Participants also described the difficult emotions and feelings that were evoked by the event.

*"So it was really hard, it was hard that I knew, that I'd seen that, like it's your best pal and, he's gone but the last that you've seen him is wrapped in silver paper being carried past you."*

Participant 1

*"It was really, it was hard, you'd be too intimidated to go to school, you'd dread every day going to school and you'd worry about it constantly and...*

*Em, but it was just really a rubbish time."*

Participant 4

*"I don't know and then I used to cry a lot in bed, but just sort of silently and finally I'd fall asleep."*

Participant 2

*"I was quite angry at myself as well for allowing it to happen to myself."*

Participant 3

Even in sections where participants did not describe their feelings, stories were told in enough depth so the serious nature of the event was clear.

PARTICIPANT: *"Eh, which means it moves about a lot, so we were going across the Atlantic that hurricane Mick's that flattened Honduras..."*

INTERVIEWER: *"Oh, yeah."*

PARTICIPANT: *"That was going down towards us, we had to divert course but we couldn't go too far up because of another hurricane so we caught the tail end of that and for like 7 days the ship was just getting wrecked. I mean we were really going, but on one day, the last day, that was the worst, the ship was going right over to its limit to what it's designed to go over to and it was really only the bad weather that was pushing us back the right way and like, you know you're a cadet, you're new, you don't really know anything so it's like we were dead worried but everyone did end up getting like their safety equipment and life jackets and we were all on the bridge. Like non-essential personnel, like the chief engineer stayed down and like for a wee while we did think we were probably going to sink like, like go over, you know the ship roll over."*

Participant 5

*PARTICIPANT: "We dropped one of our mates off and were down to three and we were heading down the country lanes and it was that kind of laddish, you know, driving around, and it was wet and we just slid off the road."*

*INTERVIEWER: "Right."*

*PARTICIPANT: "Up into the bush, like a hedgerow, country lane, flipped the car."*

*INTERVIEWER: "Ok".*

*PARTICIPANT: "And tumbled down the road a bit and ended up sliding down on the roof for about 200 yards and then ended up with the car on its side, which was ... was quite an experience. Then we ... eventually sort of all kind of came to, got out of the car. We had to climb out through what was then the roof, but was the driver's door."*

*INTERVIEWER: "Right."*

*PARTICIPANT: "We had to climb out over and make a safe distance from the car before we called the police and an ambulance and stuff,"*

Participant 6

### **3.1.2 Lasting feelings**

This theme reflects the fact that the event left the participants with feelings that continue to affect them today. These can be global feelings or quite specific to certain situations or to certain feelings.

The more global feelings seem to reflect knowledge or feelings that there is something at the back of their mind or that there is something just around that is fairly intangible.

*"I think it's always there in the back of your mind, you know,"*

Participant 5

*"its always there, you know and its hard"*

Participant 1

There were other feelings that were more specific to a certain situation.

*PARTICIPANT: "But not that long ago actually, and my friend's been through the same thing, I've seen this girl twice and maybe the last time was about two years ago and I crapped myself."*

*INTERVIEWER: "Were you scared?"*

*PARTICIPANT: "Yeah."*

Participant 4

*"Yeah, the first time I get in a car with somebody I don't know, or I know but never been in a car with before, I'm always a little bit ... little bit edgy."*

Participant 6

There were also specific feelings that would seem to be more lasting:

*"still hate him, I hate him, I hate him to distraction. If he was deid tomorrow I wouldn't even have a wee bit of pity for him. I wouldnae care, I wounae care whatsoever. This is his fault and when I was 9 year old that was his fault and that will never change, never change."*

Participant 1

*"I think it's just heightened the way I think about it, the way I now think about it a little bit more than I would have done."*

Participant 6

### **3.1.3 Practical changes**

This theme reflects the practical changes that occurred after the event. The participant or others around them put these into place after the event or they have happened as a

consequence of the event. This theme shows the real effect this event had on people's lives in a practical sense whether that was quite wide ranging or simply to make them more careful.

In some instances the practical changes were very important:

*"And also I had to quit my job just in case, you know, they knew, in case they knew that I worked in [supermarket], because I worked in [supermarket] at the time."*

Participant 3

*PARTICIPANT: "Yeah, I mean mum was petrified, she wanted to move house pretty much straightaway after that."*

*INTERVIEWER: "Right. Did that influence you moving?"*

*PARTICIPANT: "I think it did, aye."*

Participant 3

In some instances these changes affected family members:

*"Em, which is why in fact when my sister came to secondary school my mum put her to another school. Em, that had a better bullying policy."*

Participant 4

There were also examples of changes in every day life and activities:

*"...so I've just noticed the change in the way she drives because of that, and that is... a change in the way I drive as well. But I think I now drive more aggressively since the accident. Em...when I passed my test my instructor was like... he said that you drive textbook, he said, you drive extremely well. I got two minor faults or something on my test. One of them was for speeding. And he said you're very, very good. Now I have terrible habits when I drive and I drive very aggressively towards other drivers."*

Participant 6

*"... but now... I'm always careful if I'm in the town that everybody kens where I am. I mean there's murders happening everyday"*

Participant 1

*"I'd never step backwards again anyway. There's a rule, there's one for the ship and you should never step backwards and you should never sit on railings or stand up on railings or anything because when you're balanced and you'll never fall, if the ship moves you will fall."*

Participant 5

*"but obviously you're a wee bit more cautious than what you'd normally be."*

Participant 1

### 3.1.4 Growth/change

This theme was specifically taken forward after the first set of interviews and generated a great deal of data. It reflects the participants thoughts about what may have changed for the better after the event, and what they may have learned from their experience.

Participants believed they would, and in some cases had, tackled the same type of situation differently:

*"Nah, you'd be a lot calmer now, it would be like nothing."*

Participant 5

*"And when trouble does happen, you know if I'm on a night out or anything like that, I do find a sense of calm now, I don't feel as panicky."*

Participant 3

*"I think if I was put in the situation now I would stand up for myself. I wouldn't go physically fighting with anybody, I'd probably if it got to that stage I'd walk away."*

Participant 4

*"So it made me think in a situation like that I'd be ok, I'd be able to deal with what was going on."*

Participant 6

It would also change their reaction to others in the same situation

*“I understand, when people are more upset about illness and stuff, I understand like why they're upset now and realise that they need their space and not to sort of... it helps like because now having someone that's died I know that, before I'd just go her gran's ill and just wander off and now I realise it's quite an upsetting thing.”*

Participant 2

Participants also reported more wide ranging changes that would seem to be even more important and meaningful than changing their behaviour in a similar situation. These changes reached into other areas of their lives affecting attitudes and ways of being in the world. These quotes are reflexive in nature and seem to represent a mature form of thinking with the participants using metacognition.

*“So I think it's kind of, you realise that no-one's going to look after you kind of thing. You know you're kind of on your own, like, which makes it a bit more, eh, sensible I suppose.”*

Participant 5

*“That's what I'm saying you just, these things are out your control so you just have to stress so much of it, you dinnae need to worry about so much of it, like, you've no paid your gas bill, so what. You just phone them up and explain to them. These things can all be sorted out but people think it's like an ultra disaster when these things happen and I'm thinking well, it's not really is it.”*

Participant 5

*“But it's maybe been that that what's happened made me see that life is too short. Especially when I get older. Life's too short and there's no point falling out over petty arguments because you might not be here in the morn. And it's true what they say, you have an argument and you walk out the door and you dinae get the chance to say sorry.”*

Participant 1

*“The only thing was I mean that you get, we get mentors as student nurses and em, if I've ever had a problem with a mentor I would*

*confront them about it instead of sort of... because, it's not, I wouldn't say it's bullying but a lot of, em, stuff, like you get anywhere may have a certain problem with you or not doing something right so instead of them being sort of off with you about it, I would just rather say well you're like, what you say's not made me feel very good and I would like to know why and I would confront instead of just keeping it all in my head now."*

Participant 4

*"You become, yeah I think more laid back."*

Participant 6

*"It just ... I don't know, it makes me... it makes me think if anything else like that would happen that I would be better to deal with it, because I know that I'm not going to fall apart."*

Participant 6

*"Yeah and I'm just glad that I was alive when he was alive I guess."*

Participant 2

This also appears to represent a positive change in thinking that would not have happened but for the event.

*"if that hadn't happened I'd maybe feel a bit arrogant, more arrogant about myself, maybe."*

Participant 3

This change in thinking can also have practical effects on those around the person:

*"I think it's maybe even made me closer to my mum and dad...your family are important and your family are always going to be there and you're going to need them. It could be why I'm so close with a lot of my family because obviously."*

Participant 1

The experience can also be used to help others:

*PARTICIPANT: "Even one of the young people, em, was asking how I got on at the school and we were chatting about how they got bullied and I was saying how I got bullied at school and it was, it's nothing that I would."*

*INTERVIEWER: "Do you think that was good for them?"*

*PARTICIPANT: "Yeah I think so, definitely."*

Participant 4

New thoughts are also used to re-evaluate events and view their own actions differently:

*"And if it happened again now I think straight away I would have just said yeah. I mean I would have given in, I wouldn't even have thought that I was weak about doing that at all."*

Participant 3

### **3.1.5 Not thinking about it now**

This theme reflects the participants' comments that the event was not something they thought about now as far as they were aware. The event is not at forefront of their thoughts and is not something they actively engaged in thinking about at the moment to a greater or lesser degree.

*"But I haven't really thought about it for a long while. Until today actually, so"*

Participant 3

*"I don't run it through my head anymore. I don't think about it."*

Participant 6

*"Perhaps. It's not mentioned so much I suppose. I haven't forgotten about it but because I'm so busy here all the time as well, I don't really have a chance, I think it's better if you're kept busy."*

Participant 2

*"I can sort of forget about it through the year."*

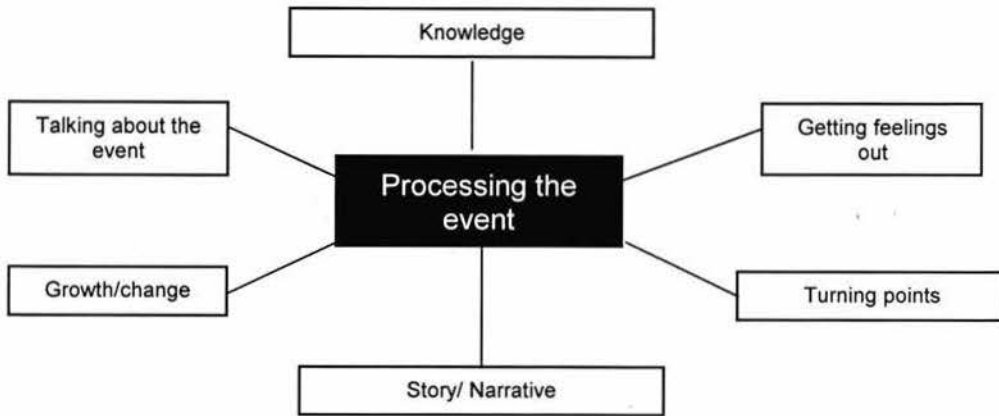
Participant 1

*"They're going to happen and then it's like, that's it, I just let them go."*

Participant 5

### 3.2 Processing the event

This category is shown in Figure 2 below:



**Figure 2**

#### 3.2.1 Talking about the event

This theme involves the participant's perception of the importance of talking about the event. Participants found talking to be helpful and useful and were able to make straight forward statements to this effect, perhaps reflecting their confidence that this was a socially acceptable form of coping that would be easily understood.

*"you know talking to someone is quite important after that. After an incident like that."*

Participant 3

*"Yeah, it helps to speak about it"*

Participant 2

*"Or talking helps me cope."*

Participant 1

There were acknowledgements that talking is not always an easy process but is however worth the effort:

*"I got over my embarrassment but initially I felt quite embarrassed and then I felt, it was quite good.....It kind of gave me a bit of a lift."*

Participant 3

Within this theme, there were also comparisons to others and the realisation that talking about things was a conscious choice that people made. Not talking was seen as a negative decision.

*"Yeah, I don't really ... I'm not, I'm not... em... scared of talking about it. You know how some people when they have an accident don't want to talk about it. I don't see the point in not talking about it."*

Participant 6

Talking was also seen as some sort of necessity suggesting that if you don't talk there may be unpleasant consequences.

*"You've got to talk about these things. That's why you have counsellors, you've got to talk about these things. Make them all better. So I just started talking about it."*

Participant 6

*"being able to talk about it. I think if I didnae talk about it, if I'd just had bottled it up and it wouldn't have been nice."*

Participant 1

There is also an acknowledgement that it is important to control when and where you talk about these events suggesting that there may be a need to be careful about who you can confide in.

*"I dinae just go and talk to anybody about it but if the subject arises or stuff like that then I can talk about it."*

Participant 1

### 3.2.2 Getting feelings out

This theme reflects the experience that there can be a great deal of emotions, feelings and thoughts that occur after the event and that it is helpful to express them.

*“And I also just, I was crying the whole way through that but then I suppose it was okay to cry and I think I needed to at that point because I hadn’t, since I’d last seen my mum I hadn’t cried about it at all.”*

Participant 2

*“I think the story telling part ... helps you get it out.”*

Participant 6

*“But when I’d calmed down a bit, when they took my statement I sort of calmed down more. I felt like I was getting stuff off my chest”*

Participant 3

In fact it seems that it is not only helpful to express these emotions but actually necessary.

*“I just think if it's not like on then I'm alright about it. I just like go up and have your rant and you're like, ah, I'll get that fucking idiot that just fucking ran away and all that, you know you just say the usual to the people, like you go in and say you're meant to be the second engineer. I was shouting at the engineer and the chief was loving it because I was like, you fucking ran away like. You just need to have a fucking go at them at times.”*

Participant 5

*“You have to talk about it, you have to get it out. You have to get it out, you canae keep that to yourself, there's no way.”*

Participant 1

*“we had to talk about it, we had to get it out, we couldnae ken that this had happened and sit over Christmas and New Year and no utter a word. All of us would go mad. One of us would probably just burst.”*

Participant 1

This also continued past the point of the event itself and could be found even today.

*"Alright. It's good to talk about it. Even now it's nice to talk about it, to get it out."*

Participant 1

### 3.2.4 Turning points

This theme was named turning points as it reflected some sort of shift in the thinking of the participants.

This could be related to an additional incident that gave them the confidence that they could handle other events.

Participant 4 described an incident where she confronted her bully and actively changed her situation.

*"I've kept it and it's just saying how horrible I was and she thought that I was her friend and I've done this and that, I can't remember really, em, and from now on she doesn't want to have anything to do with me and all this sort of thing. It's very strange to think about the things she was saying now, em, and then I remember her saying something to me, sort of screaming at me and I remember screaming back well you make my life a misery and then because everything kind of settled down and everything and I did shout that out and I remember that actually, yeah."*

Participant 4

Participant 3 described meeting a group of teenagers after he had been mugged and how important this was to him:

*"It freaked me out when I saw them and I thought they're coming over here and then, you know, as it passed without anything happening that kind of gave me a bit of a lift and more confidence in myself that I was able to handle the situation without getting into any problem....I think it has stood, I think the incident has been quite important."*

Participant 3

The shift in thinking could therefore, occur through an incident that happened by chance or that was due to the timing of the event. Participant 7 believed it was important that he had to get back into a car straight away and this was only true because he coincidentally had to travel the next day.

*“But this was the start... it was the start of my third year at uni, so I brought all my stuff home like my stereo, my TV, and all my cooking stuff and all my notes and my books, so there was no way I could get by train, so I think in a way I was lucky at the time of year it was.”*

Participant 6

These turning points could, however, be less active and more of a shift in thinking that occurs over a period of time.

*PARTICIPANT: “Yeah. I suppose you can't really just pretend that he's gone away and he'll be back, you just have to realise it and the more you speak to about, even just things like what was the funeral like and what sort of food did you eat there. It just helps because it brings back that he isn't there and you have to just sort of get on with it.”*

*INTERVIEWER: “Does that kind of make it real?”*

*PARTICIPANT: “Yeah, definitely.”*

Participant 2

*“When you're 17 you always think that the other guys will sort it out. You always think, you know, because you're a cadet and you've got no responsibility, you always think ah, the chief will sort it or the captain will sort it and, you know, it's like that thing when you're younger and you think that adults ken what they're doing kind of thing, you know, but they dinnae really. The realisation when you grow up. I think it's that thing now is that I realise that if I dinnae do it naebody's going to do it, you know there'll be a lot of that thing when nobody wants to put their head above the parapets and naebody wants to be the one to do it, but if there's an emergency you've got to do stuff quickly.”*

Participant 5

### 3.2.5 Story/ narratives

This was emerging theme that would ideally have been developed further. It reflects comments about the turning of the event into a story or a narrative to tell to others or to be written down.

*"because it also makes the story telling better because you go yeah, we flipped and then landed and then turned. We used to do it with cigarette boxes, because you had something to distinguish the front, the back and each side and you go this is how it happened."*

Participant 6

*"I probably wrote that in my essay, I think. But I ken what I was doing, as if I was talking to him and I'm writing it down. Like I just watched him being carried passed me in silver wrapping, ken things like when you're talking to people but you're writing it down, having a conversation and they're not there."*

Participant 1

*"No all my essays are like bla, bla, bla, some of them are just like explaining like I went and lit a candle or I went up to talk to him, things that we used to do when we were younger, things that I miss. Like having a laugh in the garden when it's dark and you should be in your bed and you're thinking, yeah this is brilliant, I'm up late and it's dark and we're in the garden and we're laughing and... things that you miss when you're younger. "*

Participant 1

*"You know what I mean, it's like it's all great crack and great stories and great things to have done,"*

Participant 5

This story may not have always been accurate but changed to be socially acceptable.

*PARTICIPANT: "All your mates, at the time, you know, like they talk about fighting and stuff and situations that they've been in, you know, they always come out victorious and stuff."*

*INTERVIEWER: "Absolutely."*

*PARTICIPANT: "So you're, if you tell your lame story about getting mugged by two guys or something, you get the feeling that they'll probably be laughing at you behind your back."*

*INTERVIEWER: "Aye. Did you tell them your lame story though, or did you change it?"*

*PARTICIPANT: "I can't remember. I maybe did, you know at the time, to be quite honest (laughing). There was probably about six guys (laughs). I might have altered some of it."*

*INTERVIEWER: "Just to save face or..."*

*PARTICIPANT: "Yeah. There is a kind of image to, you know, and you want to tend to, you don't want to look totally... (laughing)."*

Participant 3

This theme was interesting because participants clearly already had a narrative that was expressed in the interview situation. The stories were clear and detailed but there seemed to be extra step involved to turn this into a narrative.

### **3.2.6 Knowledge**

This category talks about having knowledge of the event or of how to cope with the event. This knowledge appears to be important to people for several different reasons. There seems to be an element of knowing what to do and therefore bring to cope better with any difficulties.

*"Yeah because I knew he was going to die so it wasn't sort of a shock."*

Participant 2

*"Again, I think it's just the fact that if you know what to do in that situation, even although I was feared, you kinda know it has to be done"*

*so like you can kind of ignore the being scared part and just go and do it."*

Participant 5

Not having knowledge was thought to be more worrying.

*"I think I'd be more worried about being in a situation where I didnae have a clue what to do."*

Participant 5

*"Accident you can understand an accident, you've had accidents since you were a wee kid,"*

Participant 6

Knowledge about events also helped people deal with the aftermath. Knowing that a bully came to a 'bad end' was seen as helpful.

*"She's a heroin addict and is very, very ill looking and that was the way she was kind of going at school, she would take drugs and stuff, so. I don't know, just... It's not sort of, you feel sorry for the person that they've ended up like that but then..."*

Participant 4

Lack of knowledge was seen as a problem, leaving unanswered questions.

*PARTICIPANT: "It's no... sometimes when you think about it now, ken that silver wrapping, ken like you're a sardine, they've just wrapped you up and carried you away. You seem to think that wisnae very thoughtful for them to do that."*

*INTERVIEWER: "Right."*

*PARTICIPANT: "You ken what it's like now if there's maybe a big crash and they cover you with silver paper but I used to think when I was younger, well why do they just wrap them up like that?"*

Participant 1

This lack of knowledge could be actively challenged and efforts made to really understand everything that had gone on.

*PARTICIPANT: "I... for the first time... the first ... sort of couple of months, I didn't think because of the fact there was patches in my mind where I didn't know what had happened."*

*INTERVIEWER: "Right."*

*PARTICIPANT: "And I was thinking perhaps I'd blacked out but it wasn't the fact that I'd blacked out, it was the fact that it was pitch black in the evening, and I was like... because there wasn't street lighting..."*

*INTERVIEWER: "You couldn't see bits."*

*PARTICIPANT: "You couldn't see bits. You know, and I was thinking perhaps I'd blacked out, perhaps this and perhaps that. And the only person who really knew what had happened was the driver because he was, you know he hadn't had... he wasn't drunk but he was... obviously transfixed in what was going on, staring straight out."*

*INTERVIEWER: "Yeah."*

*PARTICIPANT: "And like gripped to the steering wheel so his attention was focused. And he really sort of filled us in on what happened because he'd seen the car go up the verge and through the hedge, and he'd felt the impact because he was seriously watching as the car tilted down and the lights came on the tarmac, he'd sort of braced himself for the impact, whereas the rest of us were just kind of being flung around."*

*INTERVIEWER: "Sure."*

*PARTICIPANT: "And then he came back when the car's sort of spinning round on its ... on its roof, and you feel that sensation and you're following the lights and all you can see is grass-tarmac, grass-tarmac, grass-tarmac as it's spinning round, so there were bits of it that I ... didn't really know, so after he'd sort of filled us in, you kind of run it through in your head thinking ..."*

Participant 6

Knowledge could however be isolating if you were the only one to possess it.

*"not everybody knew exactly what I knew because obviously the papers  
didnae ken the full story."*

**Participant 1**

### 3.3 Managing the Impact

This category is shown in Figure 3 below:

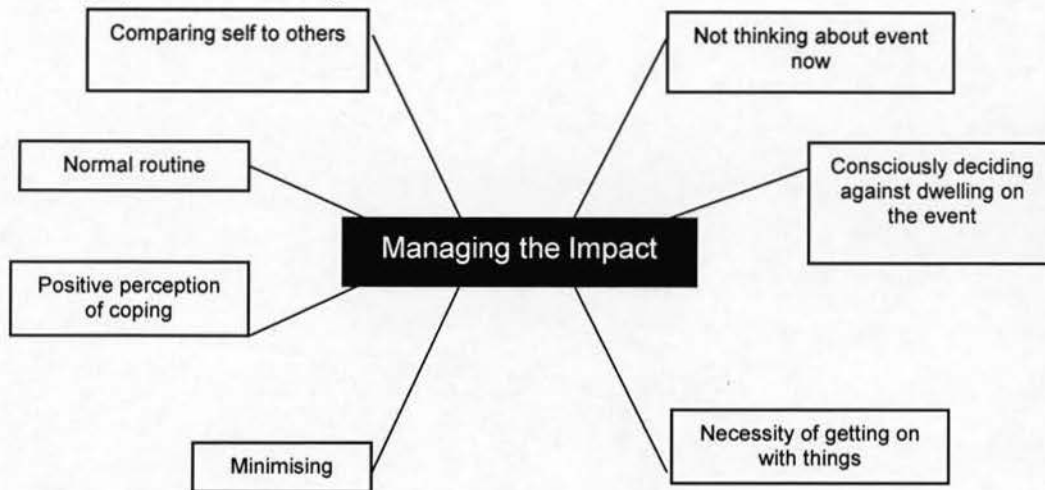


Figure 3

#### 3.3.1 Comparing self to others

This theme relates to the participant's wish to compare themselves with other people.

This could relate to their experiences in the situation or their way of coping with the situation.

One aspect of this comparison was looking to other people who were in the same situation perhaps to justify their own response or to check whether their own responses were appropriate to the situation.

*"And that was probably the most worried I've been. I don't know if it was just because I was new and I was a cadet, you know like I was a, I wasn't used to it or wasn't sure, but I think other people were quite concerned by that."*

Participant 5

*"Yeah, it was quite difficult for a lot of people I think."*

Participant 2

There was also a wish for comparison with others where this is unknown. This seems to be a search for reassurance.

*"Yeah. I'll tell you the funniest thing that I've noticed myself. You see, I don't know if other people do this or whether it's just me I've noticed myself doing it and I wonder if other people do it"*

Participant 6

It is notable that later in this section of this interview, I, as the interviewer offer some reassurance and comparison by saying,

*"Yeah, no, I've done that, definitively.."*

Interviewer

There are positive comparisons where participants compare themselves to others who are not coping as well as they are.

*"Yeah, but my mates were a lot more panicky than I was."*

Participant 6

*"Yeah. Calmer than the other two cadets, the other two cadets... I think because the other two guys that were there with me, one of the guys was a wee bit more worried like, I think..... Yeah. He was, yeah, but he was dead young, he was quite young, quite emotional anyway, like being away from his mammy and all that, so."*

Participant 5

*"Like at the wedding I wasn't hugely, sort of distraught but there were, my mum was pretty distraught for a while."*

Participant 2

There were also negative comparisons where the participant felt that other people were coping better than they did.

*"I mean there's other guys that seem way calmer than me."*

Participant 5

Comparisons to others also noted that some people responded differently without any negative or positive connotation.

*"It's just that whole guy thing, the whole merchant navy thing, you know it's just that bit of bravado as well you know. That helps keep people calm as well, you know the fact that they dinnae want to look... I dinnae think it's in my case, I dinnae think that's why I stay calm."*

Participant 5

Another type of comparison was comparing oneself with others who aren't in the situation and feeling the same pain. In this case it increased the feeling of isolation.

*"And they obviously knew that I was, like I was seeing all this, but folk at school never really knew the full story. They only knew what they read in the papers and I did and it was hard."*

Participant 1

There were also comparisons to others who were in a worse situation than the participant.

*"but they're living it every day, well they will be living it every day because obviously they've lost their child. I cannae imagine what it would feel like to lose a son or a daughter"*

Participant 1

A comparison could also lead to a realisation about how other people coped in the past.

*"but never realised that they were just doing what I would do, is like they're worried, but they just have to concentrate on what they have to do or what they're worrying about will happen."*

Participant 5

### 3.3.2 The necessity of getting on with things

The theme reflects that participants comments about getting on with things.

*“Like now then, if you fall off the horse, get straight back on it, you know, it’s that. You’ve gotta, you’ve gotta do it”*

Participant 6

*“It kind of brings to light the fact that he is dead and you do have to get on with it.”*

Participant 2

*“I think we all just really got on with it and dealt with it”*

Participant 4

There seems to be a large element of necessity where participants feel that they simply have no choice in the matter. There was nothing else that they could have done or could have happened.

*“It’s like you cannae change it, you cannae change it, you’ve just got to get on with it.”*

Participant 1

*“I don’t know, I just got on with it. It’s just something you have to do, you had to get on with it.”*

Participant 5

This necessity was given as reason for action taken after the event.

*“Well I did because I had to go there because I needed to get the bus there to go to college and different things like that”*

Participant 4

*PARTICIPANT: “Plus it’s that thing that, eh, if I’m at sea I cannae go to bits because there’s nobody there to help me, you cannae phone an*

*ambulance, you have to try and keep as calm as possible because getting excited can maybe lead to you passing out and if you pass out that's bad, you know what I mean."*

*INTERVIEWER: "So it's like your saying it's necessity."*

*PARTICIPANT: "Yeah, that's it, I mean have you ever seen that Touching the Void, the boy got hurt and he's on his own and the boy is just thinking about what he has to do. He's no thinking it was going to be sore or that, he's just thinking what he has to do to cope with it."*

Participant 5

This theme was expanded by comments where people have clearly considered the consequences of not 'getting on with it' and had made some sort of decision not to let these consequences take place.

*"I think... I think I would need to be able to be a passenger. I think it would drive me mad if I couldn't get in a car with somebody else, because then you would start getting paranoid, crazy and loopy and all those types of things. I think that's the other thing, if ... cos I like... cars so much, if I couldn't drive, or I couldn't get in, that would.. that would depress me something chronic. I would sit and watch it and then go, I've got to go out and drive and then go I can't because I'm too scared, I think that would be nuts. So like people who love planes but can't fly."*

Participant 6

The necessity was seen as helpful and useful.

*"I think the good thing is that just because I know that there's nobody else there that you have to be calm and if you just run away and leave it, like there's nowhere to run to, you know you just cannae run away from it and leave anything."*

Participant 5

### 3.3.3 Minimising

This category refers to the way that participants discussed the event or its after effects and played down its effect on them. Participants would have already or would go on to discuss events that were upsetting and difficult but would then make these type of comments or statements.

*“But to be honest it wasnae that scary, you know what I mean, well it was obviously but I dinnae remember being like terrified or anything or thinking that's it I'm about to die. My life wasn't flashing before my eyes or anything.”*

Participant 5

*“It wasn't a big deal but I mean I was still quite angry about it.”*

Participant 3

*“It was more, I mean it wasn't the outright bullying, you know, like it was more this person would befriend you but she would get you to do things, nasty things to others maybe or, em, she would take, ask you for pieces of clothing and you'd be too scared to not give her this clothing, certainly I was and I thought my best friend was actually being bullied as well. Em, just general things like that and... I had a boyfriend at school and she would sort of try and be pally with him you know, but it was more, I was very intimidated by her but at the same time she would also make out that she was my friend.”*

Participant 4

Participants also minimised their own reactions to the events.

*“I didnae believe that it affected me so bad that I had to go to counselling. I wisnae on tablets or anything. No everybody that gets counselling's on tablets or anything but I didnae this it affected me that much that I had to...”*

Participant 1

*“It hasn't affected me in any way, like I'm still, I haven't become depressed or anything like that.”*

Participant 2

There were some indication that participants were being careful with language, possibly reflecting their knowledge that I was a mental health professional and their own knowledge of mental health terminology.

*"Well not depressed but down."*

Participant 4

It also seems as though minimising could go on out with the interview in certain situations.

*PARTICIPANT: "And helps you not think about it in such a serious way. Because the thing... me and my mates are all big jokers anyway. Never really taken life that seriously."*

*INTERVIEWER: "Sure."*

*PARTICIPANT: "Apart from ... initially after the crash. Holy shit, this is serious, we could not be here, but you know, we're all kind of jokers, you know, take it as it comes. Never really said I'm going to do this with my life, never really had. I'd say everything's quite joky, especially down... down the pub, we're always joking and laughing and joking again. So this story then became another point to get a laugh but you get a laugh with this story. But you'd get the oh!, but you'd also get the joke in when you'd say yeah, we asked the guy who was the mechanic to go and check to see if there was any petrol leaking and he went over with a lighter."*

Participant 6

### 3.3.4 Perception of coping well

This theme reflects the participants' view that they coped well with the event.

*"I think I did cope well with it"*

Participant 3

*"Yeah I think I did cope with it as best as I could have done."*

Participant 4

*"I'm actually pretty good at coping with it."*

Participant 5

*"I think I coped with it okay actually."*

Participant 2

*"I'm coping with it. I find it quite easy to cope with now obviously because... I think like what you were saying and what I've said is you've grown up with it so it's part of your life but it's not overtaken your life."*

Participant 1

This could be quite a robust perception with one participant who responded angrily to her teacher who wondered if she needed extra help.

*"I think that's just pure cheeky. I've been dealing with this since I was 9 year old.... Aye. I didnae have to be hauled to somebody that... I dinnae mean that in a nasty way but I didnae have to be taken somewhere, someone that I didnae ken or."*

Participant 1

The feeling of being able to cope also seemed helpful when they thought back to the events themselves.

*"So in a way, it made me feel good about that, that I didn't go to pieces and go [wailing noise] on the side of the road and go [wails]. I felt good about the fact that I could take control and that.. I'd made sure my mates were ok, made sure that nothing else was going to happen to the best of my ability. Rang the police, sorted out getting them coming along, you know, I felt good about that."*

Participant 6

### 3.3.5 Normal routine

This theme represents the participants descriptions of what went on after the events. They emphasised the fact that a normal routine remained, whether this was through circumstance or at the instigation of the participant.

*"Well, you know, uh, I just kept going to school, kind of , just doing what I.....always did. It didn't stop me from going to school."*

Participant 4

*"Yeah, they knew but... I went to lessons the next day I found out so I didn't miss lessons or anything."*

Participant 2

*PARTICIPANT: "No, it's just normal, it's just like people will sit there and behave normally until... I mean it's like, we had a fire one day, it wasn't serious but I mean everybody's in bed, you get a fire alarm and everyone just jumps out of bed and you run down and you pull your boiler suit on and then the captain radios down, ok it says it's here in the engine room so like me and the electrician we say right you two guys, you're go down and investigate so far, so like you go down and you investigate and it's like we were doing that and we go down and there's loads of smoke and we found the cause, we stopped the compressor that was burning. It was a belt that was melting making loads of smoke. It could have went up in fire but even if it did then it's probably not going to be that serious that quickly. But, while we're doing that, we come back up and the cook's got a cup of tea and the chief engineer's shouting at him this is a drill, you're meant to be... you know, it just, even although the ship could have, the worst thing that can happen at sea is if the ship goes on fire because there's just nowhere to go like. And if a ship does go on fire it's really difficult to put out like, there's so much fuel, everything can burn, the paint, there's chimneys everywhere, you know like stairwells and vents and ducting and it's just like perfect for fire to spread. So..."*

*INTERVIEWER: "So that didn't mean he doesn't get his cup of tea?"*

*PARTICIPANT: "Yeah, that's what I mean. It's just like, it's dead weird, it's like when people get injured, there's a bit of gossip and everyone gets excited but, em, it's straight back to normal because they're not the ones hurt."*

Participant 5

This process could be difficult but getting back to a normal routine was considered important.

*PARTICIPANT: "No. I took a job at the outdoor centre, this is when I was back in [city]. It used to take half an hour to get to work. Em... and about three quarters of that was country lanes, so that was always fun. The first time I did that route by myself it was in a brand new car I'd got... well a brand new car to me. Em... so I didn't know how the car was. You know how you find out how your car handles and you know... you know whether it's very good round corners and things like that. I was really, really wary on my first day and it took me 45 minutes to get to work. Whereas sort of like a week later, it used to take me half an hour, but I was very self conscious about going round corners, down country roads."*

*INTERVIEWER: "Super careful."*

*PARTICIPANT: "Yeah, in a way too careful. I went very, very slow round the corners. Especially as I didn't know... I'd been in the car with someone who drove me the identical route for about three months before that, because someone else who worked there lived down the road from me."*

*INTERVIEWER: "Right."*

*PARTICIPANT: "So I knew the road, I knew the route and I knew the corners in a way. Because I'd been in that car because I bought that car off them when they left the company, so I knew ... I knew in a way how long it should take me to get into work, so when it took me 45 minutes on the first day, I was like, this... I'm being too careful."*

*INTERVIEWER: "Right, and you adjusted? You said like a week later you were..."*

*PARTICIPANT: "Yeah. I was.. I was sort of back driving..."*

Participant 6

*"Well I did because I had to go there because I needed to get the bus there to go to college and different things like that but I was always a bit wary about being there."*

Participant 3

### 3.3.6 Consciously deciding against dwelling on the event

This theme reflects the participants' decision not to think about the event.

*"So I don't know. I think one of the things is you just kind of have to say, I think I've said fuck it a wee bit, you know all this stuff happens and you kind of just let it slide rather than dwell on it. You know it's like, you could easily go round recounting every bad experience you've ever had or every time you've ever been hurt and you wouldnae do anything, you know."*

Participant 5

*"if something bad happens to you, you do kind of want to forget about it as quickly as possible..... I'd kind of put it to the back of my mind a bit."*

Participant 3

*"I mean, you can't think about it all the time can you, you have to stop really, otherwise you go mental"*

Participant 1

*"You're still thinking about it but you don't sort of just sit and think about it, you're sort of doing something and it's just, it's definitely better to keep busy and..."*

Participant 2

*"Yeah. I think I realised, because when I stood up and I was shaking, I realised that I could have and two minutes later, I've done something that I'm thinking ah, never mind. I just kind of went ah, you know, fuck it. It's like... but, yeah, I dinnae think you want to go about thinking oh my god what if I die, what if I died then."*

Participant 5

### 3.4 Developmental Aspects

This category is shown in Figure 4 below:



**Figure 4**

#### 3.4.1 Differences due to age

The theme reflects the idea that age played a part in the reaction to the event.

*“I think at that age you're kind of, a boy trying to be a man, you know, change into a man at 16 sort of thing.”*

Participant 4

*“You know, it's like, when you're a cadet, when you're younger and you're at sea everything's a drama, you know the arguments are drama, the crap jobs are a drama. Now everything's just because it needs to be done and it's your job to do it so you just do it.”*

Participant 5

*“It's like if it's just happened and you're sitting with a stranger, for example, if you're 9 year old and you're sitting... or even the police, the police interviewing me, for example if that had happened, I probably would have clammed up.”*

Participant 1

*“I don't know if you'd think about it a little bit more if you were older than... holy shit, I could have died. If you'd had... I don't know, say if I'd got children. If I was older, and got children, then I might think oh my god I could have died and left children to fend for themselves type of*

*thing, you know what I mean? Em... if I ... and if I was younger, I'd have probably just laughed it off a bit. Probably a little easier."*

Participant 6

*"it was kind of really adolescently attitude to take towards it."*

Participant 3

This includes the idea that the participants have changed now they are older and may have reacted differently.

*"There's quite a change in what you think about it and what you thought then.....I hope I've matured a bit since then. Being an adolescent..."*

Participant 3

*"But it's maybe been that that what's happened made me see that life is too short. Especially when I get older."*

Participant 1

*"Oh yeah, I've just grown up a lot, matured I would say. Yeah."*

Participant 4

### 3.4.2 Friends

This theme reflects the importance that the participants placed on their friendships.

Friends were consistently mentioned by the participants and friendships were seen as a source of support:

*"But on the whole because I had other friends, I mean I'd say I had maybe a group of five friends who I'm still friends with to this day and there's friends before secondary school as well. Because I had them they were a big support."*

Participant 4

They were viewed as good to talk to:

*"Like I've spoke... I've got a best pal called Graham as well and he's, me and him have spoke about it"*

Participant 1

As well as being a support, friends were also a source of information:

*"Well I know my best friend, her other grandfather died two months before that as well so she... when I walked over to the junior school to meet my mum she walked over with me. They used the excuse that they didn't want me walking on my own because it was quite late at night and so she sat with me when I found out. And then I talked about when her grandpa died and stuff. It helps a lot to know, like even what did you wear to his funeral and stuff."*

Participant 2

They were also helpful as part of a shared experience:

*"I only talked to em... my mates who really were in the accident. Yeah, I've spoken more to them."*

Participant 6

*"Yeah, oh yeah, they all sort of were in the same position,"*

Participant 4

And continue to be a source of support long after the event itself:

*"Yeah, it's now become one of those...always when we go home... when I go home and I'm drinking with my mates in the pub, we always have one night where we're all just sitting around having a good few beers, and then the story'll come out at some point. It's just... it just happens."*

Participant 6

*"Yeah, I mean we still talk about it sometimes now"*

Participant 4

Friends were also talked about as a something a person needs in life to stay connected:

*"but I suppose when I moved away I found other friends and I think when you're that age you sort of need your friends around you to make you feel a part of something and I think you move on, you meet other people and that and you sort of start feeling more comfortable around people."*

Participant 3

## 4. Interpretation of the data

### 4.1 Interpretation

In discussing the themes that emerged from the interview data, it would seem important to be mindful of the interview as a construction rather than a 'truth'. The participants' were in a social situation with an interviewer and were reconstructing, and giving opinions on, past events. This adds an interesting element when we consider that the participant may have wanted to appear socially acceptable or present a certain persona to the interviewer. The participant may also be interested in maintaining a positive sense of self. The interviewer was looking for people who were 'coping' and this may have created an expectation for the participant to portray themselves as someone who was managing well and having no problems.

The first grouping of themes was categorised as 'Impact of the event' and comprised of four themes: seriousness of event; lasting feelings; growth/ change; practical changes; not thinking about event now).

This category includes themes that relate to the impact the event had on the participants' lives. They acknowledged how serious the event was, gave accounts of the changes that were made in their lives, talked about the growth or change that had occurred in their lives after the event and also discussed the lasting negative feelings that remained. After the participants' comments prior to the interview where they minimised the impact of the event (reported in the recruitment sections), the fact that these events had a major effect on peoples' lives was on the surface somewhat surprising. These themes however, would seem to show that the events have had a pervasive effect on their lives at the time and continue to do so. The events would seem to affect many areas of their lives, the way

they see the world, their relationships and what they do. Apparently there had been both positive and negative effects. However, there was also a theme of 'not thinking about the event now' suggesting that the event was not part of their thinking or conscious view of the world at the present time. So there is a paradox here, a sense of the importance yet lack of relevance of this event. This could lead us to assume the event is fully processed and integrated, yet the theme of lasting feelings suggests that these events were not wholly processed or dealt with in some way. There were negative feelings that remained over a relatively long period of time suggesting that there was no finite ending where the event stopped influencing the participants' lives. The feelings generated by the event did not just leave them.

The second category was named 'Processing the event' and comprised of six themes: talking about the event; getting emotions out; knowledge; turning points; growth/ change; story/ narrative.

In this category themes were grouped together that appeared to give some clues as to how the event was processed. The main reported form of processing was talking about the event. Participants thought this was important and, interestingly, necessary. This suggests that processing is felt to be necessary. Part of talking was defined as 'getting emotions out' so apparently talking about the emotional content of the experience was an important factor in the processing of the event. Again there is a suggestion that something needs to be done with the emotions or memories of the event. They must be managed in some way. Both these themes imply that processing is important. The theme of having knowledge was added to this category as it seemed that having knowledge may help processing by allowing events and reactions to be understood and have clarity. It was

considered that having knowledge and understanding would aid processing. The other themes in this category imply that some processing has taken place. Turning memories of the event into a narrative or story may be indicative of further processing and may represent the event becoming integrated into the sense of self. This may relate to Bruner's (2003) ideas about self making narratives where stories about the self are constantly updated as the individual constantly reconstructs the sense of self. Initial processing may be necessary to make this possible. This same processing may have gone on to allow the participants to report growth or change. Reporting growth seems to indicate that the material has been processed or transformed in some way. The event is now seen in a different light and participants are able to see beyond the initial impact and negative feelings. The shift in thinking found in theme of 'turning points' provides an interesting insight into this process. Sometimes an incident provided evidence for a different point of view but at other times the shift happened through unknown means. Either way, this shift seems to have made it possible for the event to be processed slightly differently. There may have been an element of coincidence where the shift occurred in the light of external events, so it would seem that this shift is not inevitable.

As mentioned in the previous category it does not seem if the event is wholly processed as lasting feelings remain. It must be noted that these individuals are functioning well in their lives and report no major difficulties or need to seek help. This incomplete processing and lingering effects do not seem to be interfering with their quality of life. We could then speculate that complete processing is not always necessary. However, there is no reason to believe that these individuals have stopped processing the event. Perhaps this process will continue and the lasting feelings will eventually subside.

The third category was named 'Managing the impact' and included seven themes: minimising; consciously deciding against dwelling on the event; normal routine; necessity of getting on with things; comparing self to others; not thinking about event now, positive perception of coping.

Many of the themes could be described as reflecting the participants' attempts, conscious or otherwise, to manage the impact of the event. At a behavioural level, maintaining a normal routine and getting on with things means that ordinary life is not changed by the event. This may be important to preserve the sense that nothing has changed and that life can go on as before. Other themes may be attempts to keep their feelings, memories and thoughts about the event from becoming overwhelming. This can be seen in themes where the event is minimised or an effort is made not to dwell on it. Minimising makes the event appear less significant to the listener, and to the speaker, and this dual role controls what the listener thinks of the individual and what the speaker believes about himself. This may prevent the individual from becoming a 'victim' and someone to be pitied.

By not thinking about the event and deciding not to dwell on it, the individual may be attempting to control the amount of processing that takes place or avoid processing. Part of the reason for both processing and managing the impact of the event may be a need to protect the self and maintain a positive image of one's own coping and reactions to the event. The theme of the positive perception of coping would appear to be important in this regard. Perhaps the participants would be unable to admit any problems with coping as this would force them to confront the difficulties they faced whereas if they maintain their defences against this, they can regard the event differently. Making the choice not to

think about the event may also be protective as it may prevent the self and schema being overwhelmed. This construct may also relate to the recruiters' concerns about suggesting people that would be happy to talk because of fears of 'stirring things up'

If we consider the two categories of 'Processing the event' and 'Managing the impact' together, it seems that although the self must be protected, there is also a sense that change can take place and that this protection is not rigid. In order for growth and change to take place, the event must be allowed to effect the self in some ways so there must be movement between protection and integration. If the event is allowed to take over the self, there would be perhaps an overwhelming of resources. If the self is rigidly protected there may be no opportunity to process the event or allow any growth or learning to take place. Movement between the two positions allows flexibility and may therefore allow the individual to reconstruct the self in a less threatening way. The theme of comparing the self to others may be an important part of this process where the comparison is used to gauge how much processing is necessary. On the whole the themes of processing and managing the processing may reflect moves between the two. Perhaps people move between the two positions, halting processing when it becomes overwhelming or giving in to the need to think and talk about things only when they have to. Maybe these positions occur almost simultaneously where processing occurs without conscious thought.

The fourth category was named 'Developmental aspects' and contained two themes: importance of friends; differences due to age.

These themes do not wholly fit together but the importance of friends was considered to be a developmentally appropriate form of support and it was considered interesting that

this was the main theme of support that emerged from the interviews. The only source of support to emerge as a theme was that of friends. As these were a group of young people, this emphasis on friendship may reflect the move away from the family in adolescence towards greater autonomy and peer support. Participants were also conscious of the changes that took place as they became older whether that was changes in their thinking or changes in the way they reacted.

#### 4.2 Reflections on the literature

The participants in this study did not seem to feel the overwhelming of resources that is reported in the trauma literature. Possibly the events were not severe enough to have this effect or possibly this group had higher levels of internal resources, coping strategies or more useful external resources. Perhaps this group managed to fend off a sense of disconnection by maintaining their social networks and processing the event by continuing to talk about it. This may have stopped the event from becoming a totally disempowering experience.

The movement between processing and managing the impact may be a major difference between this group and those with PTSD. With this group, although there is avoidance, there is also a high level of processing that appears to happen concurrently. Perhaps for those who develop PTSD, this movement is simply too painful and by avoiding the process completely they develop symptoms such as intrusions. This may also have an effect on their sense of self as they cannot reconstruct a sense of themselves during that

time and therefore have less of an understanding of who they are now. This group however, are able to carry out this processing to a level that allows them to continue their lives. It may be that this continuation of normal life is important as it allows the individual to create positive experiences that can shift their thinking and allow them to construe events in a positive or neutral light. People who develop PTSD often become depressed and therefore can find it very difficult to create these types of experiences and view events in their lives in a very negative way.

In the resilience literature, Masten (2001) talks about resilience being linked to the presence of normal developmental adaptations. She suggests that rather than resilience being an extraordinary process as first thought, it is instead an ordinary one. This would seem to have been borne out by this study where there no themes reflecting extraordinary events or supports put in place. Support was found from friends, from talking, from keeping life normal. However, it would be too simplistic to suggest that people just need friends in order to be resilient. The underlying processes that allow these supports to be accessed must be important. An example of this is the importance of good attachment experiences. We know that attachment, amongst other things, aids in cognitive development, provides a template for future relationships and develops emotional regulation. Cognitive development is a basic requirement of any processing activity and this study suggests that processing is a vital part of managing after a difficult event. It also suggests that being able to regulate one's emotions is important as this may play a part in not allowing the self to be over whelmed. This is also an important skill when interacting with other people: if one cannot regulate one's own emotions, at least to a degree, it will be difficult to build and maintain relationships with others.

Many of the themes that emerged from the data could be considered as coping strategies in this definition by Lazarus and Folkman,

‘constantly changing cognitive and behavioural efforts to manage specific external and/or internal demands that are appraised as taxing or exceeding the resources of the person.’ (Lazarus and Folkman, 1984, p141).

We could certainly divide the coping strategies into problem focussed and emotion focussed: problems focussed - practical changes, necessity of getting on with things, normal routine, knowledge, and emotion focussed: talking about the event, growth/change, getting feelings out, minimising, consciously deciding against dwelling on the event. Growth/ change is included as it has been suggested that thinking about the event in terms of the positives that can be learned from it can be considered as an active coping strategy that raises the individuals’ mood (Noel-Hoeksoma and Davis, 2004). As there is a similar number of each type of strategy is difficult to gauge whether either type is more important or more useful. Possibly the mixture of strategies used is the most interesting point. This mixture suggests the participants had a range of strategies at their disposal as we would expect from young adults. This ability to move between strategies may be useful as it allows the individual to manage both the situation and the problem. Ignoring one’s feelings may lead to lack of processing and ignoring the problem or situation may cause practical problems.

Most of the frameworks in the coping literature imply a dichotomy, for example, integration versus sealing over or approach versus avoidance. Closer reading around some frameworks, however, reveals that many of these dichotomies are actually considered to be ends of a continuum. The strategies used by the participants may

represent movement back and forth through this continuum. Rather than adopting one position people may move through the continuum depending on the situation or on factors such as their mood.

Coping strategies are seen as 'effortful' so some of the themes may be better described as defence mechanisms rather than coping strategies. It is difficult to delineate between defence mechanisms and coping when the person, for example, minimises the event. This may be a conscious attempt to play down the significance of the event or it may represent unconscious denial. Cramer (2000) points out that defences can be seen on a continuum of maturity with more adaptive mature defences being placed at the top of the hierarchy and immature, less adaptive defences at the bottom. In childhood, the immature defences appear first with more mature defences developing in later childhood and adolescence. The category of 'Managing the impact' may reflect the use of defence mechanisms to manage intrapsychic conflict. As with the use of coping, it may be helpful that the participants have a range of defences that apparently have some flexibility. For example, although, there may be some use of denial, they are able to appreciate the seriousness of the event and therefore are able to process it.

The notion of growth after a traumatic event has received a great deal of attention over the past few years. As reported in the introduction, many researchers have reported the presence of this phenomenon although there are very few studies that look at young people. This study would appear to add weight to the finding that people in younger age groups are able to report growth. There are, however, conflicting theories about its basis. If we assume that post traumatic growth is a genuine development, then it would seem to represent high level processing, increased understanding and genuine gain from difficult

experiences. Tedeschi and Calhoun (e.g. 2004a) theorise that the process of growth occurs from rumination that occurs over long periods of time. However, in this study, there is no mention of this rumination, there rather seems to be movement between processing and protecting the self by not allowing conscious rumination to occur.

Tedeschi and Calhoun also theorise however, that growth can only occur when schema have been challenged or disturbed in some way and therefore rumination is required to assimilate new information and develop different schema. Perhaps in this case the events were not traumatic enough to produce this challenging effect and subsequent rumination. The growth identified in this study implies there may be other routes to this point.

Tedeschi and Calhoun did comment on the usefulness of social support after this type of event so it could be that other types of processing such as talking were enough to produce growth.

If we consider the other theories of post traumatic growth where growth is considered to be a self protecting illusion (MacFarland and Alvaro, 2000), it would seem that this theme could also be part of the construct of protecting the self. Having a self enhancing illusion may be beneficial as it allows an integrated sense of self to be present throughout the life span. Individuals can then feel that they are witnessing a progressive improvement in themselves. In this group of young people, it is perhaps more difficult to tell whether growth is an illusion or genuine change due to the event. We might expect people in this age group to experience rapid change and to view their younger selves very differently.

## 5. Discussion

This study has attempted to explore young people's reactions to traumatic or negative events. A qualitative methodology was used, specifically grounded theory as this area is little researched and the researcher had no concrete hypothesis about these experiences. A group of six participants were recruited, interviewed and themes extracted from the data that were grouped into categories. The six participants were a disparate group of different ages, backgrounds and having had experienced different events. These events could be described as difficult or negative and in some cases traumatic. The participants were not recruited from a central point but through various agencies.

The main categories discovered were: impact of the event, processing the event, managing the impact and developmental aspects. The first category describes the impact the event had on the participants' lives. It appeared that these events were considered serious and had a lasting effect on their lives bringing about practical changes and leaving lasting feelings and changes in their thinking. However, the participants' suggested that the event was not part of their current thinking.

The second category involved the processing of the event. It appeared that processing was an important part of the aftermath of a difficult event. The main means of processing appeared to be talking about the event, especially the emotional content. It seemed that attempts were made to integrate the event with some of the material being transformed and feeling and thoughts about the events being changed. The processing appeared incomplete as worries and negative emotions remained.

The third category was that of managing the impact of the event. This category reflected attempts to prevent the processing of the event from taking over or becoming overwhelming. This was established by keeping everyday life normal and also by controlling the level of processing by choosing not to think about the event and minimising its impact. When we consider these two categories together it seems as though participants moved between processing the event and protecting the self.

The fourth category was less well developed and was that of developmental aspects. It seemed that participants had chosen an age appropriate form of social support and were also able to acknowledge that there were differences in their reactions to the event as they grew older.

The most interesting aspect of these findings was the move between protecting the self and processing the experience. This flexibility allowed processing, and perceptions of growth while not allowing the individual to become overwhelmed. This would seem to be one of the major differences between these people and those who develop PTSD. People who do develop the disorder seem to either avoid all processing or become completely overwhelmed by the experience. These people may not be capable of the flexibility shown by this group. The resilience literature suggests that this may be due to good adaptational processes. This group may have had good attachment experiences and therefore have the skills to be able to process events and protect the self.

Most of the themes could also be described as coping strategies or defence mechanisms. If we consider the themes to be forms of coping, the findings reflect a mixture of problem and emotions focussed strategies that may be helpful in maintaining a balance between dealing with practical issues and processing emotions. If we consider them to be defence

mechanisms then again, participants would seem to have some flexibility and make use of a range of defences.

The literature on post traumatic growth is suggests a number of explanations for this phenomenon. The study does suggest that young people report growth but does not suggest that they have followed the model proposed by Tedeschi and Calhoun (2004a).

These authors suggest that a period of intense rumination precedes reports of growth.

This would seem to be the case for those participants who were more likely to talk about the event to process it.

## 5.1 Implications

This research studied a group from the 'normal' population and the ideas and questions raised can be used to think about how processing take place in these individuals.

However, Clinical Psychology is a profession that works with people who are struggling and in distress and it is important to use information about how 'successful' people deal with events to help us in our clinical work. This group was engaged in processing the event. We could see them as a group who had not managed to fully process the event and had to some extent, avoided it. Perhaps they are in need of some therapeutic intervention to allow them to process the event more fully. Perhaps there are many more people in the community that are functioning but have events that are unresolved. This group may find it hard to seek help. However, processing an event may not be linear and may not have to be completed for the person to experience good mental health. As clinicians we may find

that we when we try to help clients process the event, we wish the client to find an end point and to process the event fully. It is well known that often people in long term therapy take breaks, possibly to stop painful processing. This may be a version of the same process of protection and integration. As clinicians, perhaps we can take account of this and not expect constant movement and change from our clients. Processing these events also appears to take a long period of time and people seem able to live with unresolved issues. Taking account of this helps us prepare our clients for a lack of complete resolution and lack of an obvious end point to therapy.

If these themes represent normal processing, they suggest that we should encourage our clients both to process and to find strategies to prevent them processing events. It would seem that the interaction and move between these two positions was important. Therefore encouraging clients to think about the event, work with the event in session and talk about it with sympathetic listeners would be important to facilitate processing. It would be equally important to encourage clients to have times where they do not think or talk about the event but maintain the normal elements of their lives and think about themselves out with the context of the event. This could serve to protect their sense of self and allow them to stop themselves becoming overwhelmed. Perhaps our main role as clinicians is to promote some balance between these two positions and facilitate both protection and processing.

## 5.2 Methodological issues

This study used a smaller number of participants than initially planned and did not reach saturation point as ideally required in grounded theory. Saturation point is said to occur after continued paired analysis of new interviews where no new themes emerge. However as Strauss and Corbin (1998) point out, time and resources often make this point unreachable to researchers. From a constructionist point of view, failing to reach saturation point does not render the themes invalid as we are not searching for one 'truth' that will be revealed if we simply collect enough data. The themes collected from this study could be developed further but are nevertheless meaningful within their context. The group of participants could not be considered to be fully representative of young people who had undergone a traumatic or difficult event. However, the group was varied in gender, profession and in the events that they described. The group may reflect a population that is willing to talk about their experiences. This indeed was one of the themes that emerged from the data. It may be that this group of participants made more use of this strategy as they were in general more willing to talk and therefore agreed to be interviewed. There may be another group who would find it very difficult to talk about events. This is a group that it would be almost impossible to include in a study such as this and may be some of the least understood populations as they would refuse to take part in any study. These may be the people that were screened out by the 'recruiters' who found it difficult to suggest people as they did not want to 'stir things up for them'. This group may also represent those who are functioning particularly well and therefore feel it

is safe to discuss their experiences, or may represent a very well defended group who managed to deny the majority of the negative aspects of their reaction.

As qualitative analysis has no delineated end point, it is considered that the analysis on this data could have been extended with more attention paid to the grammatical form and linguistic properties of the text. In this study more emphasis was placed on content.

Charmaz (2003) suggested that a useful method of broadening understanding would be to return to participants and re-interview them. This would increase rapport and encourage the participants to give a less socially constrained narrative, and would also serve to increase the authenticity of the work by further developing themes. As the recruitment problems in the study were so great, this may have been an ideal way to develop the study further. However, due to time constraints this was not possible. It is also unknown as to whether participants would have agreed to meet the interviewer more than once.

In order to establish the credibility of the analysis, researchers are encouraged to present their findings to their participants and others (Denzin and Lincoln, 2003). In this study participants were offered the opportunity to receive follow up information. Again due to time constraints, this could not be arranged within the time frame of the work. As this work is relevant to an 'ordinary' population, it is considered that this credibility will be able to be checked when the material is presented in for, example, a conference setting, where many members of the audience will have undergone similar experiences.

### 5.3 Final comment

This piece of work was difficult to engage with, as might be expected in a work dealing with trauma and loss. I wished to create something coherent and integrated but was met with fragmentation in the literature. I wonder whether this reflects the nature of the topic and our difficulties in coping with trauma ourselves. Trauma is an experience that fragments, shocks, and changes the world and we seem to deal with this in a fragmented way without necessarily pulling things together in a coherent and organised manner. The literature reflects this and so, I think does this study. My own sense of frustration with this brought difficulties for me personally and consequently made this process more difficult. How does one move on from these events? There are no easy answers but it is compelling to think that people do.

My own search was for a coherent process with a beginning, middle and end. There is no real coherence, no end point and perhaps there does not need to be. Perhaps we all sit with uncertainty much of the time. This is a skill we certainly need as therapists as well as more fundamentally in life. The participants' in this study ultimately were forced to deal with uncertainty and did so in rather piecemeal and fragmented ways. These are young adults functioning in the world who have jobs, relationships, and lives that they do not believe are compromised. In the end, I must allay myself with those studying positive psychology and agree that we can learn a great deal from 'ordinary' people.

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## 7. Appendices

### 7.1 Research proposal

#### **Research proposal**

The aim of this study is to investigate how young people cope after going through a significant negative or traumatic event, therefore increasing our knowledge of how best to support young people who have difficulties after these events. This will be achieved by recruiting young people from secondary schools in Edinburgh who have had a recent experience and asking them to take part in interviews. In the interviews they will be asked to describe how they have managed after experiencing a significant negative event such as an assault, serious illness, death of a friend or family member, car crash or accident. We know that most young people do not suffer from significant emotional problems after experiencing events and the interviews will attempt to understand their coping strategies and how these events are integrated into their lives.

Interviews will be audio taped, transcribed and analysed using a grounded theory approach (Strauss and Corbin, 1990). This is a method of qualitative analysis where interview material is coded in terms of underlying themes and categories. These themes arise from a group of interviews so no single case is written up within the research process. This approach is thought to be particularly useful for areas that are relatively under investigated and for making sense of people's understanding of an experience.

#### **Interviews**

Each interview would last for approximately one hour and would take place within the school. I will carry out all the interviews. The young person would not be asked to discuss the traumatic event but would be encouraged to describe their experiences after this event. The interview would be largely led by the young person who would determine how and how much they talk about their experiences. The young person is free to stop the interview at any time. If they voice significant current distress, the young person will be given relevant information regarding emotional difficulties. They will be given support and encouraged to contact their GP who could arrange for an appropriate referral. If the young person was felt to be at risk, permission would be sought to contact their GP to arrange an emergency appointment. Before the interview takes place, participants will be asked to sign a consent form (enclosed) that explains this procedure.

#### **Procedure**

If consent is granted, procedure for this study would be as follows:

- Permission to approach pupils will be requested from four secondary schools in Edinburgh – Portobello High, School, Boroughmuir High School, Firrhill High School and Trinity Academy. These schools have been chosen as they are located within a range of socioeconomic areas and are thought to be representative of schools within the city.

- Guidance staff will be asked to give recruitment leaflets to all pupils who are over 16 years of age in S4, S5 and S6. It is hoped that I will be available to talk to pupils on some of these occasions.
- The leaflet (enclosed) will ask pupils to contact an email address for further information and to arrange an interview time. This email address will be set up for the project only and will be deactivated when this ends.
- The young person will take part in one interview. This interview will be audio taped using a digital recorder. The data will then be downloaded to computer. The file on the digital recorder will then be deleted. No record of the participant's name will be kept with the transcripts of the interviews or the data and all place names and other identifying information will be deleted. The anonymised data will then be analysed at my place of work.
- The young person will be asked if they wish to receive general feed back about the results of the study. If they request this they will have the choice of receiving feedback by post or email.

### **Timescale**

The study will begin in January, 2005 and be concluded by June, 2005.

### **Number of participants**

In order to get a good response rate it is estimated that around 250 young people will be asked if they would like to take part in the project. It is hoped that around 12 will agree to be interviewed.

### **Additional Information**

The researcher holds an MA in Psychology and is currently a trainee clinical psychologist on the University of Edinburgh and East of Scotland NHS Clinical Psychology Training Course. This course consists of academic teaching, research and clinical placement. The researcher is currently on placement at the Young People's Unit of the Royal Edinburgh Hospital and therefore has experience in interviewing and assessing young people with mental health difficulties. This research will be supervised by: Matthias Schwannauer, Academic Tutor, University of Edinburgh and East of Scotland NHS Clinical Psychology Training Course and Clinical Psychologist at the Young People's Unit of the Royal Edinburgh Hospital; and Jenny Munro, Clinical Tutor, University of Edinburgh and East of Scotland NHS Clinical Psychology Training Course and Clinical Psychologist at the Young People's Unit of the Royal Edinburgh Hospital.

## 7.2 Request to headteachers

Dear \_\_\_\_\_,

As we discussed on the telephone on Tuesday, 1<sup>st</sup> February, I am writing to you to request permission to recruit young people in your school to participate in a research study. I am a trainee clinical psychologist, in my final year on the University of Edinburgh and East of Scotland NHS Clinical Psychology Training Course. This study is a final year thesis to be submitted as part completion of a doctorate in Clinical Psychology.

Permission to approach various schools in Edinburgh has been granted by the Education Department of the City of Edinburgh Council and I enclose a copy of this letter in addition to my research proposal, recruitment sheet and participant information sheet and consent form.

I am interested in studying young people's responses to significant negative life events, such as assaults or accidents that they have found very frightening and distressing. During my time on placement in the mental health services, I have worked in the Young People's Unit and in the Rivers Centre, a service that specialises in working people who show symptoms of post traumatic stress disorder. This work has prompted me to become more interested in how people, especially young people, who do not present to our services, cope with these events. There is gap in the literature in this area as most studies are carried out with people who have significant emotional difficulties. However, understanding how well people cope following traumatic events will increase our understanding of the mechanisms involved in processing these events and can therefore assist us in supporting people who develop emotional difficulties following trauma.

In summary, I would like to ask guidance staff to give out flyers for the project to all pupils who are over 16. I anticipate that 2/3 pupils from each school will be interested in taking part and would appreciate the use of a room in the school to interview these young people. Each interview would take around an hour and would ideally take place in a lunch hour or free period.

Thank you very much for taking the time to consider this request. If I can provide any further information to you or your staff, please contact me at the \_\_\_\_\_ on \_\_\_\_\_.

Yours sincerely,

Amanda Smith  
Trainee Clinical Psychologist  
NHS Lothian

## 7.3 Participant information and consent form

### **Participant Information Sheet**

#### **What is the study about**

I am currently carrying out research looking at how young people manage to cope with a negative or traumatic event and how they deal with possible emotional consequences. I am interested in hearing about young people's points of view. We know that some people are extremely affected by these events and may go to ask their GP or another organisation for help. Lots of people, however, don't ask for help and we never find out their thoughts on what has happened to them. In this study, I hope to find out a bit more about young people who manage mainly by themselves.

#### **Why have I been asked if I would like to take part**

If you have been through a traumatic or negative event in the past 4 years, I would be really interested in talking to you. I have asked all the young people in S4, S5 and S6 in 4 schools across Edinburgh if they would like to take part in this study.

#### **What will I be asked to do**

If you decide you would like to take part, I will arrange a time to meet you at school or somewhere else if you would rather meet outside school. We will meet for around an hour. I will not ask you questions about the event itself and you will be free to talk about what you want. You can stop the interview at any time or simply change the subject if you feel uncomfortable about anything we discuss.

#### **Confidentiality**

All information collected will be kept strictly confidential. The interviews will be taped with a digital recorder and later transcribed by myself. Your interview will be given a code number so you cannot be identified in the transcript or the analysis. The only people to have access to the information during the study will be my research supervisors and myself.

Although your confidentiality will be respected, if you make disclosures where I feel concern for your safety or the safety of others, I will be obliged to inform your GP and take other appropriate action.

#### **Results of the study**

In order that other professionals can learn from the results of this study, some articles and papers may be published. Your name would not be used and you would not be able to be identified.

### Organisation of the study

The study is being carried out as part of my final project for a Doctorate in Clinical Psychology, University of Edinburgh and East of Scotland NHS Clinical Psychology Training Course. The Education Department of the City of Edinburgh Council has given permission for the study to go ahead and the head teacher of your school has also agreed for me to approach you.

Thank you for taking the time to read this information.

### Consent form

Please tick appropriate box				
Have you read and understood the Participant Information Sheet?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you been given an opportunity to ask questions and discuss this study?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you received the answers you need?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have you received enough information about this study?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you understand that your participation is entirely voluntary?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you understand that you can leave this study at any time?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
And without reason?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you agree to take part in this study?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Signature ..... Date.....

Name in block capitals.....

Signature of researcher.....

## 7.4 Recruitment flyer

### **Research study on how people cope after traumatic events**

#### **Would you like to take part in this research study?**

Have you been through a very negative or traumatic event? Perhaps something that made you very afraid and carried a threat to you or someone close to you. It could have been a car crash, accident, fire, burglary or a bomb scare etc. It may have been severe bullying, violence, an assault or some form of abuse against you or someone else, witnessed by you. This event may or may not affect you now – perhaps you feel that you were fine afterwards and had no problems, perhaps it affected you for a while but you are over it now, or perhaps you feel this event still has meaning for you today.

I am interested in how people cope with such events to help us learn how best to support young people after trauma. I have been given permission to interview people at this college and other schools and colleges in Edinburgh, to give them a chance to put across their point of view and help us understand how they feel they have managed after such experiences.

The interviews would take around an hour and take place at a time that would suit you. All interviews are confidential and your name would not appear on any part of the research. You would not be expected to discuss details of the event but to talk about how you felt after the event and how you feel you coped with it.

If you would like more information about this project or to set up a time to meet, you can contact me by:

Email -

Text/ voicemail –

7.5 Sample Transcripts – Section of Interview 4 and section of Interview 1 with initial coding.

**INTERVIEWER:** What about in the next wee while, kind of after. I don't expect you to remember day-by-day but can you remember kind of what things were like just after that?

**PARTICIPANT:** Well I felt vulnerable, I think.

**INTERVIEWER:** Right.

**PARTICIPANT:** And, em, I didn't really go out much following, you know the days after that. And a guy that I used to work with, he came round, from my work, well the job I'd quit, he came round and spoke to me. You know because he was from the area sort of round about and...

**INTERVIEWER:** What was it like telling him about it?

**PARTICIPANT:** Em, I felt a wee bit embarrassed telling him about it because he was the same age as me and it was like, you know, I think at that age you're kind of, a boy trying to be a man, you know, change into a man at 16 sort of thing. You want to feel as manly as possible, eh. When you're telling somebody about something that's happened that you think made you feel weak then it's not the most, it's not the easiest thing to tell another man.

**INTERVIEWER:** And you felt a bit embarrassed.

**PARTICIPANT:** But he was alright about it. He just sort of told me not to worry about it.

**INTERVIEWER:** Why did you tell him do you think, because if you were embarrassed...

**PARTICIPANT:** Well he was obviously wondering why I'd quit the job and em, I think the manager must have told him why.

**INTERVIEWER:** Ah, okay.

**PARTICIPANT:** So he came to see how I was doing, which was quite good of him, so. Because it wasn't someone that I knew that much outside work, it was only because I worked with him that he, that I spoke to in there, but it wasn't somebody that I sort of socialised out side work so it was good of him to pop by and see how I was.

**INTERVIEWER:** Yeah, absolutely. And you kind of got over your embarrassment somehow.

**PARTICIPANT:** I got over my embarrassment but initially I felt quite embarrassed and then I felt, it was quite good, I felt glad that he had cared enough to come round and speak to me.

**INTERVIEWER:** Right. So that kind of...

**PARTICIPANT:** It kind of gave me a bit of a lift.

**INTERVIEWER:** Did it.

**PARTICIPANT:** Yip.

**INTERVIEWER:** It sounds like it made you feel like that he cared about you.

**PARTICIPANT:** Yeah, it was good.

**INTERVIEWER:** Did you know him, did you get to know him after that or was that a one off?

**PARTICIPANT:** We kept in touch for a short while, we played football a couple of times afterwards and stuff like that but, em, I haven't seen him for years since then.

**INTERVIEWER:** Yeah, sure, but it was a kind of short-term kind of thing.

**PARTICIPANT:** Yeah.

**INTERVIEWER:** So he came round and he was quite good about it.

**PARTICIPANT:** Yip.

**INTERVIEWER:** Em, but you weren't going out much?

**PARTICIPANT:** For the, about a week or something after I sort of hung around the house mostly, em, because I couldn't drive at the time either so I wasn't really wanting to stray too far from the house, especially because where I needed to get the bus to go, em, to see my friends

I would have to go and get a bus from the area, practically just across the road from where I got mugged.

**INTERVIEWER:** Right.

**PARTICIPANT:** So I really didn't want to do that (laughs). I eventually got over it and...

**INTERVIEWER:** How did you do that, what happened?

**PARTICIPANT:** I think I just said to myself look it was just a one off thing and it's never happened before so, em, you're going to have to just, you know you can't hang about the house all the time because I was getting bored anyway, so. I decided just to go out. I did feel quite anxious I must say, waiting, waiting at that bus stop across the road from the scene of the crime.



Nut, no really. I wouldnae say. The only way I can explain it is, obviously it's different if you've never hated anybody in your life but you hate this person and if you've hated them since you were 9 year old you're not going to notice the difference anyway.

existing hatred of murderer

Right. Do you think you've just got used to it?

Aye, I think I've just grew up with it, I've grew up hating this person and it's...

And you said before that you've grew up and this, this has grown up with you, your whole feelings about this.

Aye. I mean it's really hard, especially having to just remember it. You dinae even have to remember it, it's just there, it's always there. Like somebody mentions Neil's name and your mind wanders, wanders back. It's like he used to play in our back garden and we had big wooden gates and he always said he liked it in our back garden because he was nice and safe there. And then you think, aye you were nice and safe there, but it makes you hurt to ken that he was safe there and he felt safe when he was with you but one day that he wisnae with you and he's away. It's hard.

] hard to have these memories  
] difficult feelings will always be th  
] remember had memories when name met  
] safety - hurts that he wasn't safe, hard to have these memories.  
] safety - hurts that he wasn't safe

It sounds really hard.

I'm coping with it. I find it quite easy to cope with now obviously because... I think like what you were saying and what I've said is you've grew up with it so it's part of your life but it's no overtaken your life. It's there but because you've grew up with it. It's like you canae change it, you canae change it.

] perception that she's coping  
] grew up with these feelings  
] feelings are part of your life  
] feelings did not take over your life  
] can't change the feelings, difficult feelings will always be th.

Do you think it could have taken over your life?

Aye, maybe if I didnae have as good a support from my mum and dad. Like obviously with them being there, supporting me, kenning what I wis talking about, they were in it as well. Being able to talk to them and getting my feelings out. It might have affected me in a different way. You could have been, you could have had a different family that werenae like my mum and dad and they coped with it in a different way.

] support from family very important  
] support from family very important  
] family also in the situation  
] getting feelings out, talking to family important.  
] not all families like this

Did you guys talk about it a lot?

Aye. Over the time the police and everything were coming in and... we had to talk about it, we had to get it out, we couldnae ken that this had happened and sit over Christmas and New Year and no utter a word. All of us would go mad. One of us would probably just burst.[]

] getting feelings out

Lost it.

Aye. Because my mum and dad knew Neil's mum and dad as well obviously.

Right, so they would be really close to it as well. So it sounds like you talked about it a lot at the time. Do you still talk?

I think that helped, obviously talking about it. It definitely helped, having somebody there to talk to. But I think maybe if mum and dad had sent me to maybe a professional to talk about it I wouldnae have been quite as open.

Right.

It's because it's my mum and dad. You ken what it's like when you're younger, you find it easier to talk to your mum and dad than you do some stranger that you've never met asking you all these questions. You think, what's it got to do with you, I dinae ken you, why are you asking me these questions. When it's your mum and dad and they ken about it, it's easier to say, aye I thought this or aye, I felt this or...

So it's always been easier to talk to you mum and dad then?

Definitely, definitely.

Have you always been close?

I'm very close to my mum and dad actually. I am. That's probably helped as well. You probably ken when I'm down the stairs, I'm here every day with my mum.

] very close to mum and dad

] closeness helped

Like do a lot of folk do that or do you think that's unusual?

Aye, I dinae ken, I don't think a lot of folk do that. I'm not sure. I don't think most mothers and daughters meet up every day for their lunch, nut. I don't think people work quite as close, we're close at hand.

] unusually close to mum and dad

Yeah.

But I've always been close to my mum and dad and their support and their help has helped me.

] closeness helped

But you were saying letting it all out, you said getting it all out or something.

Aye, but when you need to talk to somebody... if you're talking to somebody that doesnae understand what you're talking about it's no easy because they've got their point of view. Everybody's got a point of view but if they dinae understand what you're talking about it doesnae work.

] other people don't understand

Aye.

Like they'll say maybe this, maybe it happened this way, maybe you're remembering wrong, are you sure? Aye, I'm sure, I ken what happened.

] other people don't understand

Right. Have you spoke to folk that have said that kind of thing?

No, no.

No.

I've no any need to.

] no need to talk to anyone else

I suppose when you were saying before that you were quite open about it, you talk about it when it comes up, I was just suddenly thinking, well do you speak to other folk apart from your mum and dad about it or?

Like I've spoke... I've got a best pal called Graham as well and he's, me and him have spoke about it. We were in a pub actually at Christmas, aye it was the 28th funnily enough, it must have been a Friday or Saturday night and we went to the bar and asked for a minutes silence for Neil because it was all the folk that went to school with him.

] has spoken to best friend

] act of remembrance - minutes silence

Oh my God, right.

It was all our class, all us young ones were all sitting in the karaoke and they stopped the disco for a minute at 12 o'clock for Neil.

Right.  
And me and my pal were sitting, this lassie was sitting over there, yacking like this and we were like ready to jump, like dinae be so disrespectful.

] strong emotions about remembrance

Uh huh.

It's wee things that you do that cheer you up, it's like I feel better to go up and clean, like clear his grave up. His mum obviously does it but she canae get up all the time so if I go up and it's a wee bit messy or there's leaves and that I just brush it off. I feel better to talk to him because you ken that he's there and he's looking down.

] small acts of remembrance helpful

] he's still there even though dead, he's watching you even though dead, ] feels better to talk to him -dead-

Right.

If that makes sense.

Aye. So it's quite a good thing to go and do that.

Aye.

It helps. So you clear up and you have a bit of a chat and tell him about the Hibs scores.

Aye. And a wee bit of a woman's touch, add a wee bit of a woman's touch. His mum and dad often wondered if he'd been alive if we'd be together now. It's weird to think of things like that when you're younger. I dinae think we would have because we were just pals but you never know. I don't know.

] unanswered questions

] weird to think what might have been, unanswered questions,

It kind of brings a smile to your face though, thinking about that.

It's weird, it's... I dinae ken. He was a nice guy, he was a nice guy.

] good memory of his good qualities

And to think it could have been.

It's nice that his mum and dad said that about me considering I was in the thick of things when they could have said that about anybody. It's like his mum and dad knew about the essays I wrote and they wanted me to take them over.

] his parents wanted to see essays

Oh, did they.

But I never took them over because I didnae ken how that would make them feel reading... from my point of view because they never seen all that stuff that I seen and obviously I've wrote what I've seen and I dinae want them to..

] protecting his parents from her feel

To know about that.

Well they'll obviously ken but looking at it from a 9 year olds point of view is pretty horrifying so if they read that it's not going to be nice for them. No all my essays are like bla, bla, bla, some of them are just like explaining like I went and lit a candle or I went up to talk to him, things that we used to do when we were younger, things that I miss. Like having a laugh in the garden when it's dark and you should be in your bed and you're thinking, yeah this is brilliant, I'm up late and it's dark and we're in the garden and we're laughing and... things that you miss when you're younger. Things that he missed, like he never had his first pint. Never drove a car or...

] 9 year olds point of view

] admission of how horrifying it was

] details of the event

] acts of remembrance

] things she misses

] things he missed

It's pretty sad isn't it.

It is sad.

So you never took them the essays then?

Nut. No yet. I think they would be alright if they read it because they would probably be reading it and they would ken it would be my point of view but...

] protecting his parents from her feel

Aye.

I suppose it's always a fear that you dinae want to bring it all back to them but they're living it every day, well they will be living it every day because obviously they've lost their child. I canae imagine what it would feel like to lose a son or a daughter but also when they look at their other son they will see Neil anyway. So.

] sympathy for his parents - worse

So would an essay upset them or not.

Aye.

Difficult to know.

Mm.

So you were saying some of the essays were like kind of about the things you miss about him and then the other one was about the horrifying aspect of it.

Aye, like the silver wrapping. I probably wrote that in my essay, I think. But I ken what I was doing, as if I was talking to him and I'm writing it down. Like I just watched him being carried passed me in silver wrapping, ken things like when you're talking to people but you're writing it down, having a conversation and they're not there.

] last memory unprocessed  
] details of the event, last memory unprocessed,  
] writing as if she's talking to him

God that sounds really like a powerful thing to be, that sounds really, just like you're talking to somebody.

Aye and you just write down, as if somebody's reading it, somebody can read it.

Uh huh.

Like you're writing what you've seen and then you're writing, so how are you anyway, I'm doing bla, bla, bla. Hibs didnae win the league, they're rubbish, you'd be better to support my team I'm a Hearts fan so.

] writing as if she's talking to him

Oh, right, I see.

So just things that you see just to write it down and obviously she's read what I've been writing as if I've been talking to a normal person, like say for example right after it's happened. And this has been like 11 years later.

] writing as if she's talking to him

So the teachers got a bit, I don't know, spooked by that?

Aye and she's held me back and asked if I wanted counselling. I didnae believe that it affected me so bad that I had to go to counselling. I wisnae on tablets or anything. No everybody that gets counselling's on tablets or anything but I didnae this it affected me that much that I had to.

] teacher offered counselling  
] didn't need counselling

Go and do something different about it.

Aye. I didnae have to be hauled to somebody that... I dinae mean that in a nasty way but I didnae have to be taken somewhere, someone that I didnae ken or.

Because you said before that you were doing it within your family.

Aye.

So you didnae need to do that.

I didnae.

How would you say you coped with it then?

I'd say my family were my strong point definitely, definitely. Writing it down, writing it down because you are getting everything out. You dinae have to watch what you're writing when you're writing on a bit of paper, you can write anything you want, nobody has to see it. Or talking helps me cope. Because in a way it's like talking to somebody that's there but you canae see them. It's weird. Definitely my family, my family definitely helped me through it.

] writing about it, getting feelings out,  
] getting things out privately  
] talking to him helps coping  
] family helped coping

Have you got brothers and sisters?

No just me.

So when you say family you mean your mum and dad?

Aye. Well my granny and granddad knew, obviously it was in the papers every day and they were looking after me when the court case was on.

Oh, I remember you saying that.

So they were taking me to school.

uh huh.

And picking me up.

Were you close to them too?

I was really, I am close with my granny and granddad. My granddad's passed away now so, but I'm still close to my gran. I'm quite close to all my family actually. I think it's just the way I've been brought up.

] family very close

Sure.

I don't think there's any member of my family really, except my relatives abroad and stuff like that, but the family that are around me I'm quite close to.

Aye.

I don't know maybe if the thing with Neil made me realise maybe life's too short for petty arguments or falling out or... your family are important and your family are always going to be there and you're going to need them. It could be why I'm so close with a lot of my family because obviously.

] life too short for petty arguments  
] close to family because of event

Do you think?