



Identity and Trauma

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Abstract

The relationship of trauma to identity is a complicated one that requires greater study. This paper cites research which suggests that not only can traumatic exposure be disruptive to identity development, but in the reverse, identity can shape the manner in which trauma is perceived and understood. It is further noted that identity can both exacerbate posttraumatic stress disorder symptom severity, and/or promote positive posttraumatic growth. Trauma can also be incorporated into one's identity, serving not only as a turning point or reference point, but also defining one's life and purpose. Clearly more research is needed to better understand the many linkages between traumatic exposure and identity. Greater research on the relationship between trauma and identity has the potential to positively inform prevention and intervention efforts aimed at reducing the negative effects of traumatic exposure and increasing the positive growth effects that can also come from such experiences.

Keywords

Identity; Trauma exposure; Posttraumatic stress; Posttraumatic growth; Event centrality

Identity and Trauma

The link between traumatic exposure and posttraumatic stress disorder is obvious, but only recently have researchers begun to explore the moderating effects of event centrality [1]. Event centrality refers to the degree to which the traumatic event is central to one's identity or sense of self [2]. For example, being in a bad car accident can be highly traumatic, but it may not be at all related to a person's thoughts and feelings about himself, who he is and what he wants out of life. Being a refugee trying to escape war and ethnic conflict, on the other hand, is likely to be viewed through the lens of being a victim because of who one is, including his or her beliefs and values. The trauma that one is experiencing may be closely related to those things that a person uses to define himself. Research has demonstrated that event centrality can increase the severity of posttraumatic symptoms [3,4]. However, the relationship of trauma to identity is a complicated one that requires greater study.

Trauma can Disrupt Identity

Identity is a collective term for the roles, goals, and values that people adopt in order to give their lives direction and purpose. Erik Erikson [5,6] wrote at length on how our identity can form a blueprint for the way in which we conduct our lives and plan our future. Traumatic events, however, can disrupt these plans and alter

our lives in unpredictable and sometimes permanent ways. One who defines herself in regard to her relationships and life roles (e.g., wife, mother, and care-taker) may be forced to reevaluate those roles when the partners in the relationship are suddenly taken from her through death, particularly when the death is violent, premature, unexpected, and/or painful. Life goals may change when years of work and struggle toward a dream are wiped away in an instant (e.g., hurricane, earthquake, war). Values and beliefs about the world may be shattered by certain events (e.g., experiencing crime and/or violence) that suggest people are not as inherently good and the world is not as safe as one had previously presumed.

There have been a number of studies that demonstrate the idea that a traumatic event can disrupt one's identity. For instance Tay et al. [7] factor analyzed survey responses among West Papuan refugees ($N=230$) and found that diminished identity and confusion was one of six factors comprising a higher order construct of complicated grief. In a qualitative study of Chinese older adults who had lost their only child ($N=14$), Zheng and Lawson [8] found that the loss of a child not only contributed to personal grief, but also affected their collective identity. In another qualitative study, female survivors of the 1994 genocide against the Tutsi in Rwanda ($N=30$) were interviewed [9]. Analyses of the transcripts suggested that these women experienced "trauma-induced identity transformations". Guler [10] interviewed adolescent refugees from six different countries who were currently residing in the United States ($N=33$). She found that exposure to war and trauma was negatively correlated to identity development ($r=-0.50$, $p<0.01$) and positively correlated to identity distress ($r=0.51$, $p<0.01$). Identity distress has also been found to be significantly related to severity of posttraumatic stress disorder symptoms among survivors of Hurricane Katrina [11,12].

Identity can Alter our View of Trauma

Although traumatic experiences can alter one's identity, the directionality of the relationship between these two constructs is not necessarily one way. Our identity can shape the way we perceive, interpret, and experience the trauma. Low self-esteem and self-worth might lead one to believe that he deserves the negative events that have befallen him. Beliefs about God and religion might help some people to put the negative events into a larger perspective that could involve martyrdom, redemption, and salvation, among other things. Certain traumatic experiences could confirm our view that the world is full of evil, or we could choose to focus on the altruistic behavior of bystanders and first responders as they attempt to intervene or counteract the event, and/or save and heal us. Thus, identity can help or hinder recovery from trauma.

In a study of Aboriginal adults in Canada ($N=399$), Bombay et al. [13] found that those with greater family histories of discrimination combined with a stronger identification with their Aboriginal identity as a central component of their self-concept were more likely to perceive subsequent negative intergroup scenarios to be a result of discrimination and threat. Fitzgerald et al. [14] surveyed a nonclinical sample of college students ($N=489$), asking them to identify the most traumatic event in their lives. They found that the strength of memory effects on posttraumatic stress disorder symptoms were mediated by the centrality of the event to the participant's identity. In a similar

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study of college undergraduates ($N=367$), George et al. [15] found that appraising a trauma as violating one's core beliefs and goals mediates the link between trauma centrality and posttraumatic stress disorder symptoms.

Identity can Help or Hinder Recovery from Trauma

Not only can our identity affect the way we perceive the event, but it can also shape the way we recover from the event. Views about our own self-efficacy (e.g., helpless victim vs. strong survivor) can aid us in coming to terms with the event and being proactive in our recovery efforts. On the other hand, negative views of the self can interfere with recovery efforts. On the positive side, Webster & Deng [16] studied trauma narratives of 320 adults and found that changes in worldview preceded both posttraumatic growth and wisdom. In a study of American Muslim physicians after 9/11 ($N=62$), Abu-Ras et al. [17] found that despite the initial mistreatment and prejudice participants faced after the event, their negative experiences led to positive changes in their religious identity and facilitated adaptive action.

On the other hand, as previously noted, identity can help or hinder recovery efforts. Boals and Schuettler [18] surveyed undergraduate college students ($N=929$) and found that construing a potentially traumatic event as central to one's identity predicted both posttraumatic stress symptoms and positive posttraumatic growth. Likewise, Groleau et al. [19] found that the centrality of a traumatic event to one's identity was a unique predictor of both posttraumatic distress and posttraumatic growth. Clearly more research is needed to better understand this paradoxical relationship. Complicating the picture even further, Blix et al. [20] conducted a cross-lagged study of ministerial employees who were at work during the 2011 Oslo bombing ($N=229$). Measures at 1 and 2 years after the bombing showed that the centrality of the event to their identity was related to posttraumatic growth; however, the data did not support a causal model, once again highlighting the need for more research into better understanding the complexity of the relationships.

Trauma can be Incorporated into Identity

As noted above, trauma can disrupt one's sense of identity, and one's identity can affect the way one perceives and recovers from the trauma. The trauma, however, can also become incorporated into one's identity. The fact that you have to face trauma and how you deal with that trauma can be life defining. The trauma can be viewed as a turning point in life, or as a reference point for expectations about the future [21].

Bernard et al. [22] conducted a study on how college students ($N=214$) incorporated trauma into their identity which they found could be negative or positive. Negative event centrality was found to predict posttraumatic stress disorder symptoms while positive event centrality predicted adaptive psychological functioning. In a study of breast cancer survivors ($N=37$), Morris et al. [23] found that peer support programs affirmed a strong survivor identity and promoted posttraumatic growth.

Conclusion

As noted above, research into trauma and identity suggest that the relationship is complex. Trauma can affect identity, while identity can affect one's perception and understanding of the trauma. Identity can also be a moderator and/or mediator between traumatic exposure and posttraumatic stress disorder symptomology. As a

moderator, identity can minimize or intensify the effects of trauma. As a mediator, trauma can affect one's sense of identity, which in turn could lead to posttraumatic distress or posttraumatic growth. Greater research on the relationship between trauma and identity has the potential to positively inform prevention and intervention efforts aimed at reducing the negative effects of traumatic exposure and increasing the positive growth effects that can also come from such experiences.

References

1. Brown AD, Kouri NA, Joscelyne A, Marmar CR, Bryant RA (2015) Experimentally examining the role of self-identity in posttraumatic stress disorder: Clinical perspectives on autobiographical memory. Cambridge University Press New York, USA.
2. Berntsen D, Rubin DC (2006) The centrality of event scale: A measure of integrating a trauma into one's identity and its relation to post-traumatic stress disorder symptoms. *Behav Res Ther* 44: 219-231.
3. Barton S, Boals A, Knowles L (2013) Thinking about trauma: the unique contributions of event centrality and posttraumatic cognitions in predicting PTSD and posttraumatic growth. *J Trauma Stress* 26: 718-726.
4. Blix I, Solberg Ø, Heir T (2014) Centrality of event and symptoms of posttraumatic stress disorder after the 2011 Oslo bombing attack. *Appl Cognitive Psych* 28: 249-253.
5. Erikson EH (1959) Identity and the life cycle: selected papers. International Universities Press, Oxford, England.
6. Erikson EH (1968) Identity: youth and crisis. Norton & Co, Oxford, England.
7. Tay AK, Rees S, Chen J, Kareth M, Silove D (2015) Factorial structure of complicated grief: associations with loss-related traumatic events and psychosocial impacts of mass conflict amongst west papuan refugees. *Soc Psychiatry Psychiatr Epidemiol* 51: 395-406.
8. Zheng Y, Lawson TR (2015) Identity reconstruction as shiduers: narratives from Chinese older adults who lost their only child. *Int J Soc Welf* 24: 399-406.
9. Sandole DH, Auerbach CF (2013) Dissociation and identity transformation in female survivors of the genocide against the Tutsi in Rwanda: a qualitative research study. *J Trauma Dissociation* 14: 127-137.
10. Guler J (2014) The relationship among previous exposure to war and conflict, acculturation, and identity formation among adolescent refugees. University of Central Florida, USA.
11. Scott BG, Sanders AF, Graham RA, Banks DM, Russell JD, et al. (2014) Identity distress among youth exposed to natural disasters: associations with level of exposure, posttraumatic stress, and internalizing problems. *Identity* 14: 255-267.
12. Wiley RE, Berman SL, Marsee MA, Taylor LK, Cannon MF, et al. (2011) Age differences and similarities in identity distress following the Katrina disaster: theoretical and applied implications of Erikson's theory. *J Adult Dev* 18: 184-191.
13. Bombay A, Matheson K, Anisman H (2014) Appraisals of discriminatory events among adult offspring of Indian residential school survivors: the influences of identity centrality and past perceptions of discrimination. *Cultur Divers Ethnic Minor Psychol* 20; 75-86.
14. Fitzgerald JM, Berntsen D, Broadbridge CL (2016) The influences of event centrality in memory models of PTSD. *Appl Cognitive Psych* 30: 10-21.
15. George LS, Park CL, Chaudoir SR (2016) Examining the relationship between trauma centrality and posttraumatic stress disorder symptoms: a moderated mediation approach. *Traumatology*.
16. Webster JD, Deng XC (2015) Paths from trauma to intrapersonal strength: worldview, posttraumatic growth, and wisdom. *Journal of Loss And Trauma* 20: 253-266.
17. Abu-Ras W, Senzai F, Laird L (2013) American muslim physicians' experiences since 9/11: cultural trauma and the formation of Islamic identity. *Traumatology* 19: 11-19.
18. Boals A, Schuettler D (2011) A double-edged sword: event centrality, PTSD and posttraumatic growth. *Appl Cognitive Psych* 25: 817-822.

19. Groleau JM, Calhoun LG, Cann A, Tedeschi RG (2013) The role of centrality of events in posttraumatic distress and posttraumatic growth. Psychol Trauma 5: 477-483.
20. Blix I, Birkeland MS, Hansen MB, Heir T (2015) Posttraumatic growth and centrality of event: a longitudinal study in the aftermath of the 2011 Oslo bombing. Psychol Trauma 7: 18-23.
21. Robinaugh DJ, McNally RJ (2011) Trauma centrality and PTSD symptom severity in adult survivors of childhood sexual abuse. J Trauma Stress 24: 483-486.
22. Bernard JD, Whittles RL, Kertz SJ, Burke PA (2015) Trauma and event centrality: valence and incorporation into identity influence well-being more than exposure. Psychol Trauma 7: 11-17.
23. Morris BA, Campbell M, Dwyer M, Dunn J, Chambers SK (2011) Survivor identity and post-traumatic growth after participating in challenge-based peer-support programmes. Br J Health Psychol 16: 660-674.

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