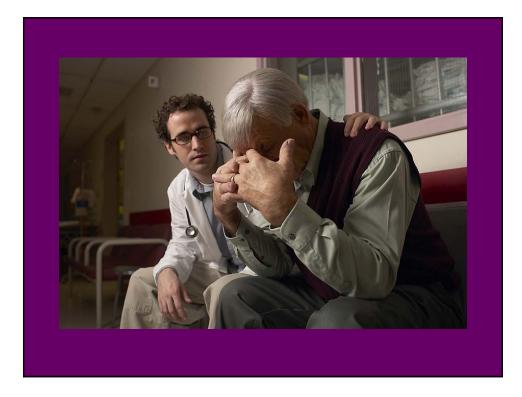


Bad things happen obvious public health cost Focus on psychopathology chronic grief and depression (10%-15%) Posttraumatic Stress Disorder (PTSD) (5%-10%) Focus on impact of event: Compare groups exposed vs. non-exposed Compare average response across event Mapping individual differences across events: some surprising findings









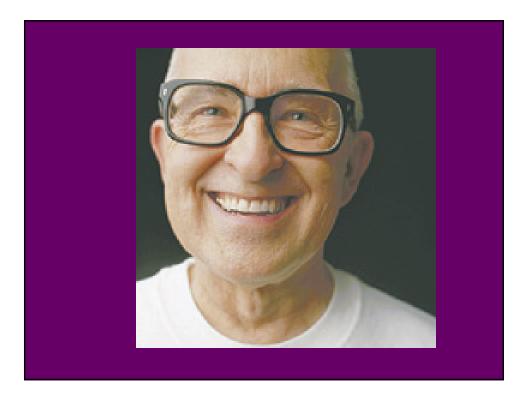


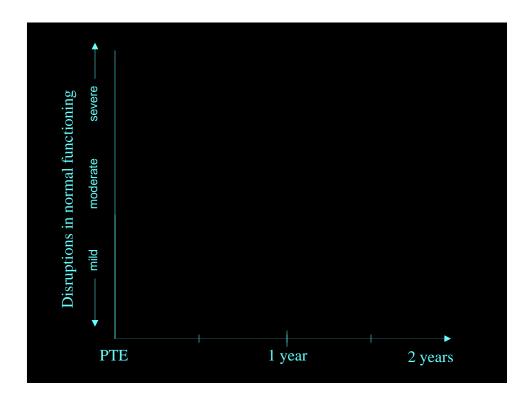


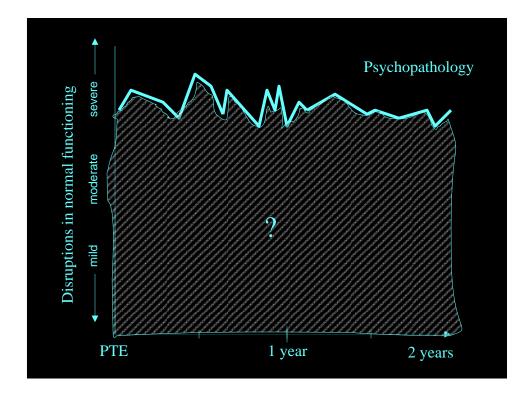


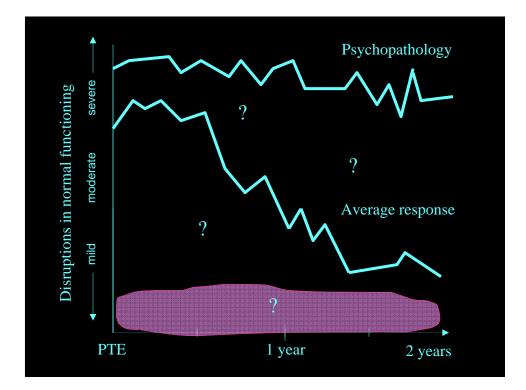












Bereavement literature: The absence of pronounced grief ("*absent grief*") is <u>rare</u> and <u>pathological</u> ?

- *denial* or *inhibition*, generally *maladaptive* (Middleton et al., 1993)
- disordered mourning (Bowlby, 1980)
- personality pathology (Osterweis et al., 1984)
- cold and unfeeling (Bowlby, 1980, Rando, 1993)...
- *superficially attached* (Horowtiz, 1990; Rando, 1988; Raphael, 1983)

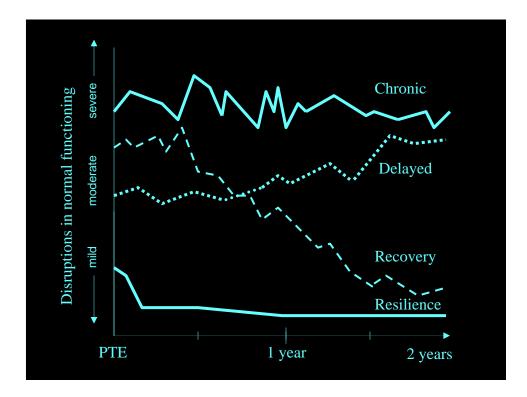
Trauma literature: The absence of trauma is <u>rare</u> and occurs in <u>exceptionally healthy</u> individuals

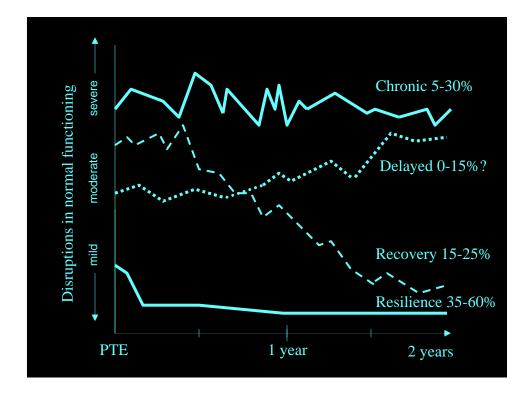
- unexpected resilience (Tucker, Pfefferbaum et al., 2002).
- *exceptional emotional strength* (e.g., Casella, & Motta, 1990)
- Unusual courage (Druss & Douglas, 1988).

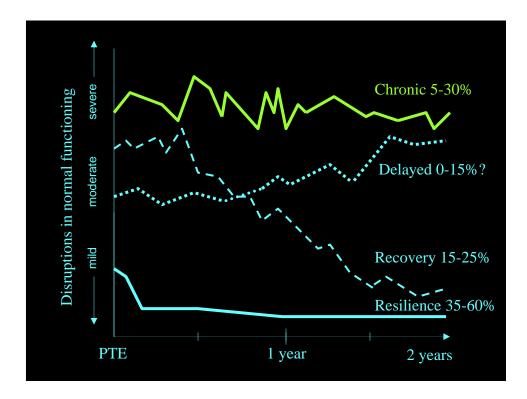
Resilience to loss and trauma

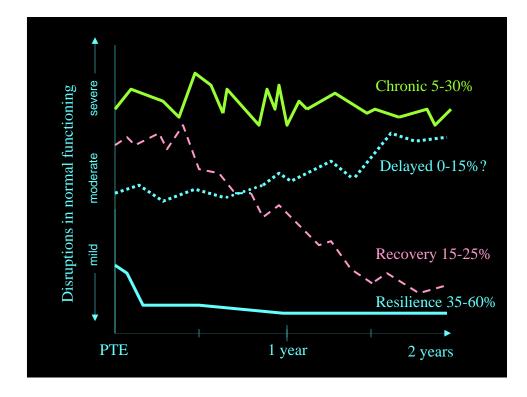
- 1. The minimal response to a PTE is neither exceptional nor pathological; it is resilience
- 2. *Resilience is typically the most* <u>common outcome</u>
- 3. There are <u>multiple</u> and sometimes <u>unexpected</u> pathways to resilience

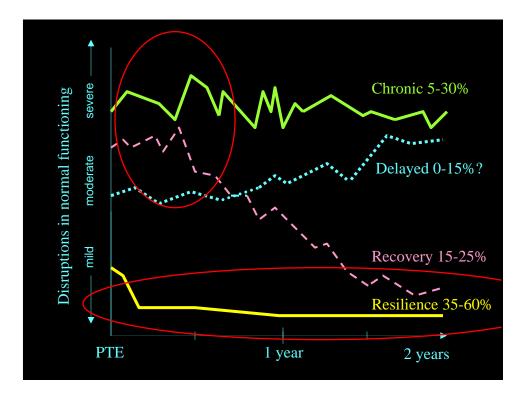
Bonanno (2004, 2005). American Psychologist Bonanno (2005) Current Directions in Psychological Science Bonanno & Mancini (2008) Pediatrics











Resilience to Adversity

- Resilience in children (Garmezy, Rutter, Werner, Masten, Luthar, etc.)
 - aversive and enduring life circumstances
 - protective factors foster positive outcomes at the end point of the developmental period

• Resilience in adults

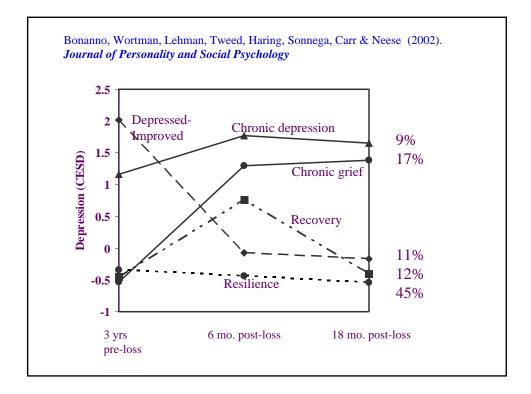
- PTEs that are usually isolated events
- ... occurring in otherwise normal circumstances
- protective factors foster minimal response or rapid return to baseline

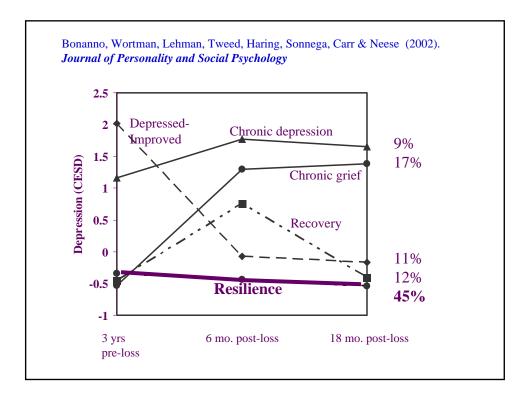
Adult Resilience to Loss and Trauma

- **Transient stress reaction** (dis-equillibrium): brief period of fluctuations in levels of distress and well-being
- But a relatively stable trajectory of healthy functioning (STHF)
- Capacity for generative experiences (new tasks, new relationships), positive emotions (Fredrickson et al.) and laughter (Keltner & Bonanno, 1997)

The Changing Lives of Older Couples (CLOC) study

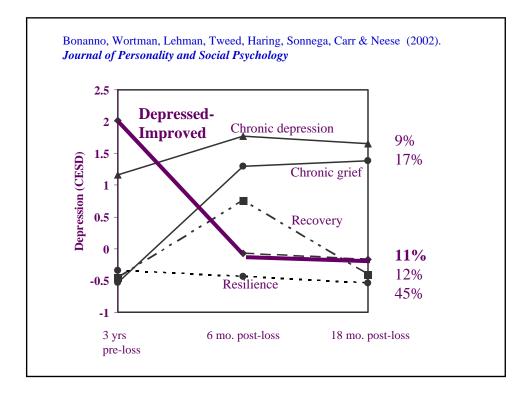
- 1,532 married individuals from Detroit area
- 205 lost a spouse during the course of the study,
 - interviewed prior to bereavement (on average 3 years pre-loss),
 - Interviewed at least twice after bereavement (6 and 18 months post-loss).





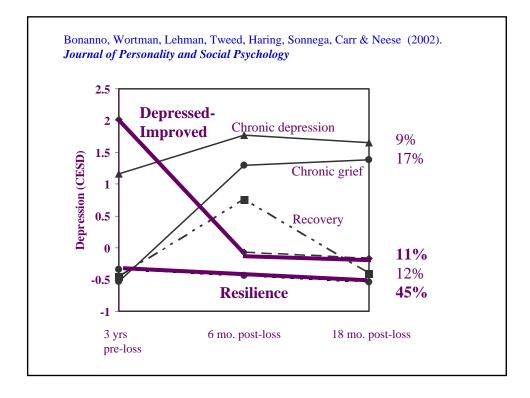
Resilient individuals

- No evidence for delayed grief
- Not unhealthy on any pre-loss measures
 - normal quality marriage
 - Not rated as cold or social inept by interviewers
- Higher scores on pre-loss protective factors
 - Belief in just world
 - Acceptance of death
 - instrumental support



Depressed-improved Individuals

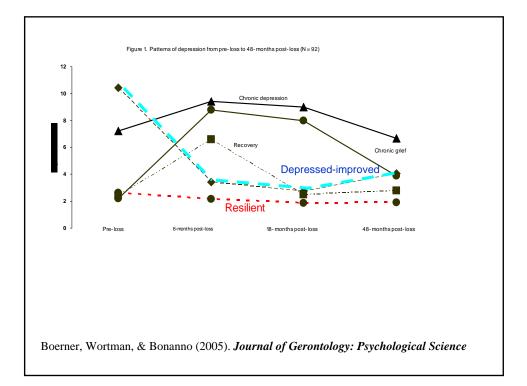
- Prior to the loss . . .
- Ill spouse
- Poorer quality marriages
- More introspective and emotionally unstable
- lowest levels of instrumental support,
- believed that the world was particularly unjust to them ("everyone gets the breaks but me").



Resilient <u>and</u> depressed-improved evidence healthy adjustment <u>during bereavement</u>

- lowest in
 - grief symptoms (e.g., yearning),
 - processing of the loss,
 - searching for meaning,
 - avoidance/distraction,
- <u>highest</u> in
 - positive affect
 - Comfort from positive memories of deceased

Bonanno, Wortman & Nesse (2004). Psychology and Aging



Resilience to Trauma

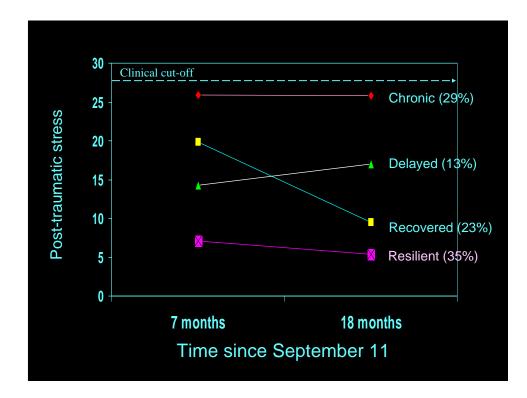
(violent or life-threatening events)

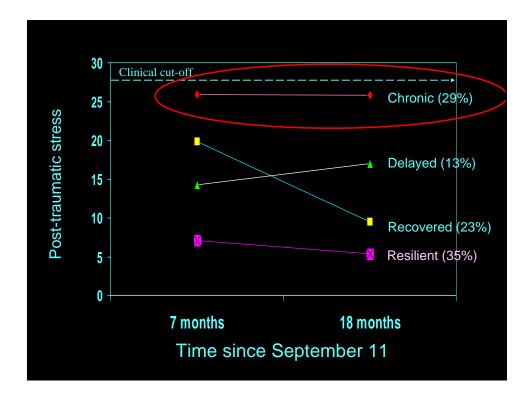
- Air war and emotional stress. Irving Janis (1951)
 Hiroshima and Nagasaki
- Fear and courage. S. J. Rachman (1978)
 WWII: British civilians during aerial bombardment
- Retrospective review of previously published studies
 - Not systematic
 - anecdotal
 - Studies not designed to measure resilient outcomes

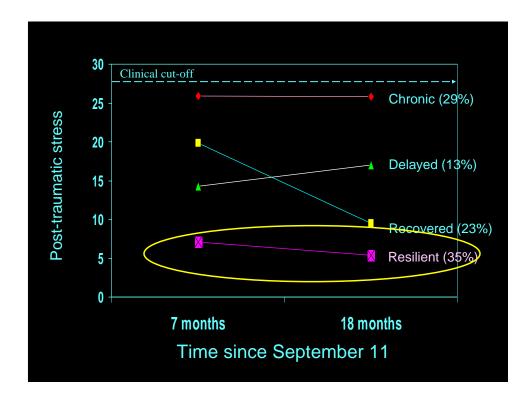
High-exposure WTC sample: In or near the WTC on September 11th

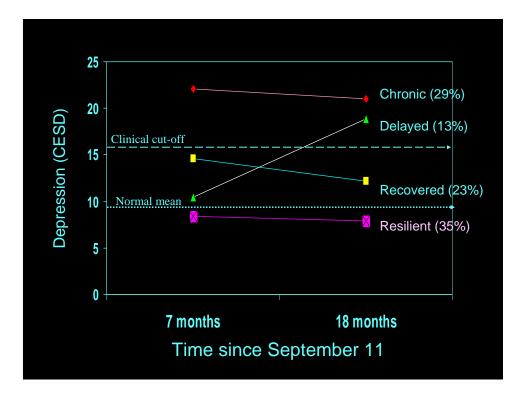
- N = 75; longitudinal analyses n = 55
- Small but rare sample
- Majority...
 - were exposed to life-threatening danger
 - witnessed death/serious injury to others

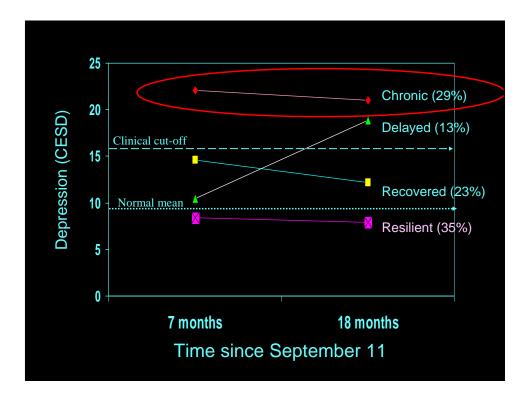
Bonanno, Rennicke, & Dekel (2005) JPSP

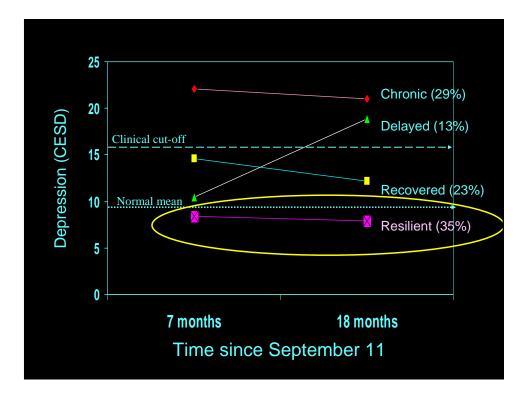


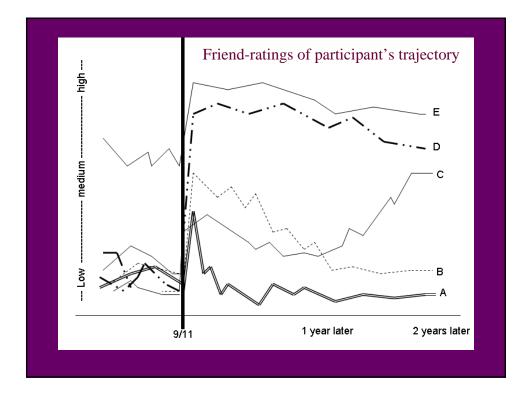


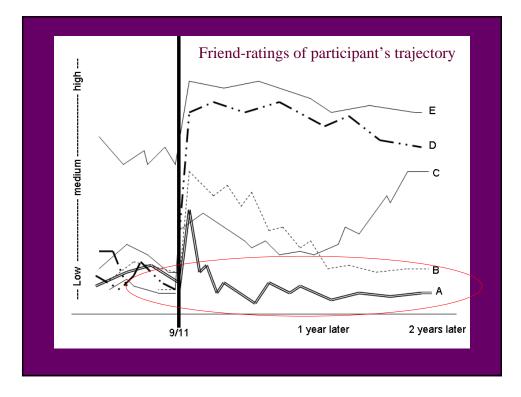












Resilience and PTSD in NYC after 9/11

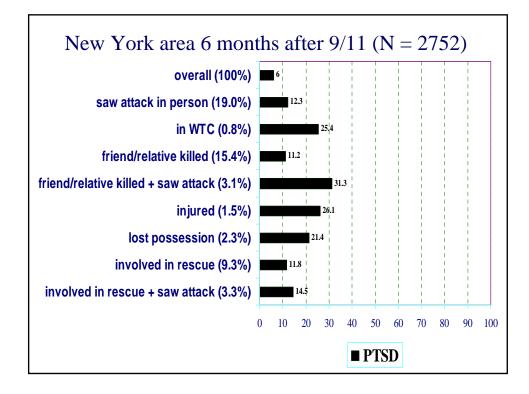
•Random digit dialing, probability sample of contiguous NYC area (N = 2752)

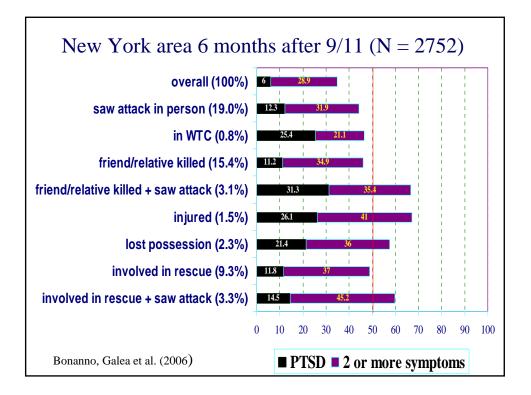
•Demographics comparable with 2000 census

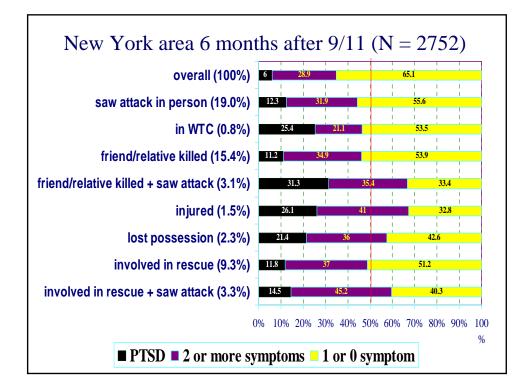
•PTSD symptom estimates were high reliability when compared at 1, 4, and 6 months

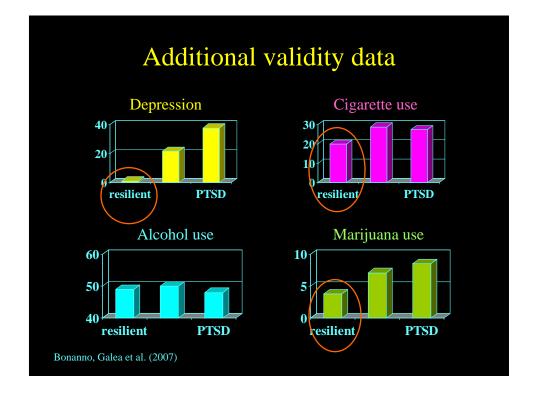
•Cumulative PTSD at 6 months = 6.0%

Bonanno, Galea et al. (2006) Psychological Science











Treatment for Breast Cancer

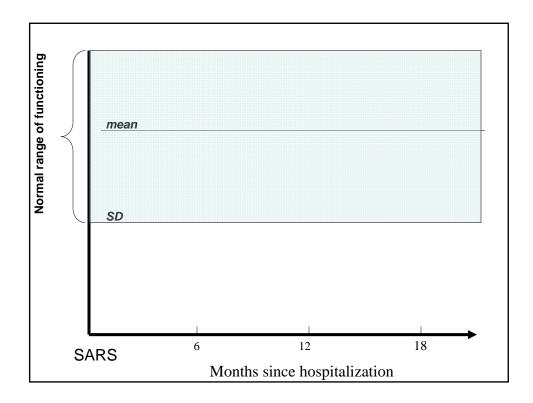
- 84 women treated for breast cancer
- Assessed depression after radiation treatment and 3 and 6 months post-treatment
- 51 (61%) had very low levels of depression throughout the study
- "Our results support assertions . . . that resilience is the most common response to loss or trauma, specifically here the experience of breast cancer"

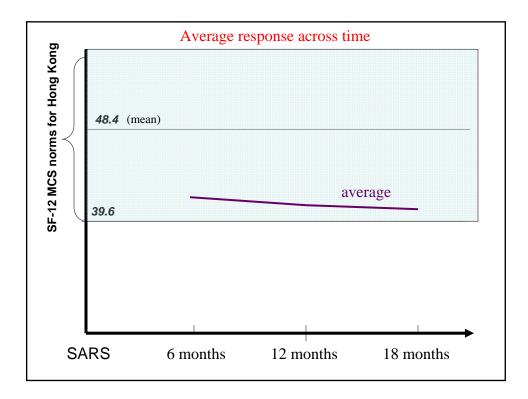
Deshields et al. Psycho-oncology (2006)

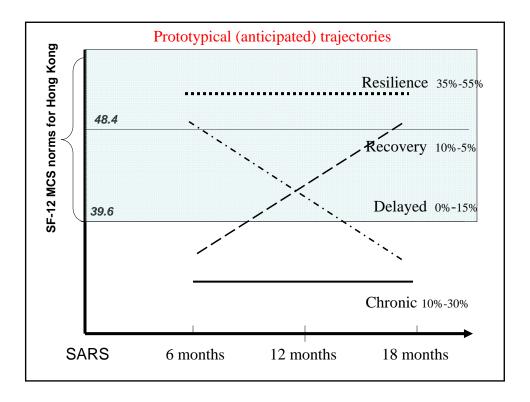
Severe Acute Respiratory Syndrome (SARS)

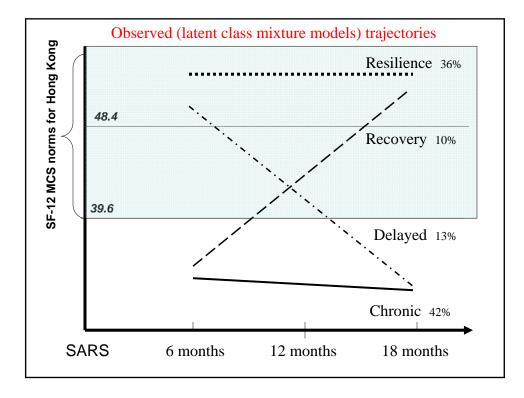
- Fall, 2002: reported in Guangdong Province, People's Republic of China
- Spring 2003: spread to over 30 countries, over 8000 people infected
- Hong Kong hit hard: 1755 infected, 299 dead
- Origins and treatment poorly understood
- Fear of death, quarantine, abandonment
- Study of 997 hospitalized survivors

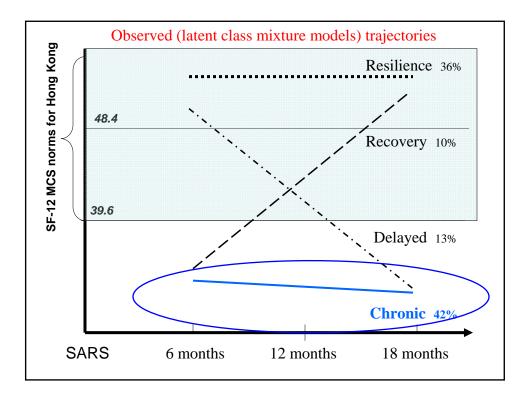
Bonanno, Ho et al. (2008) Health Psychology

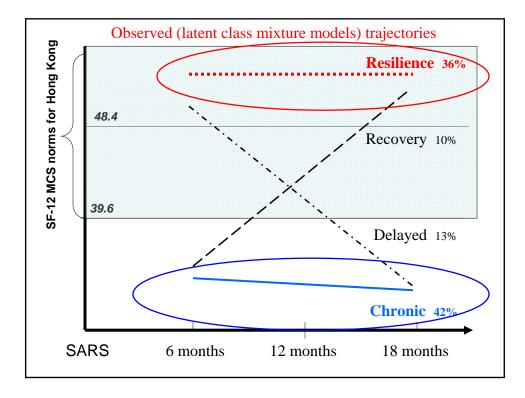


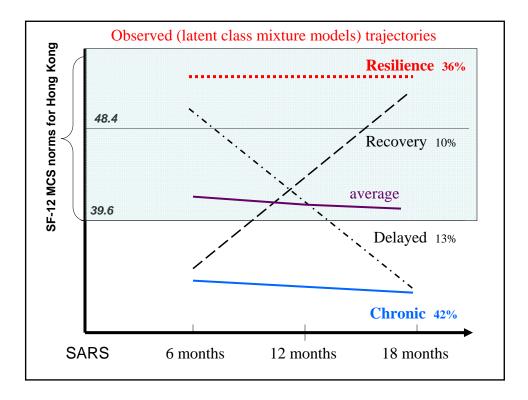


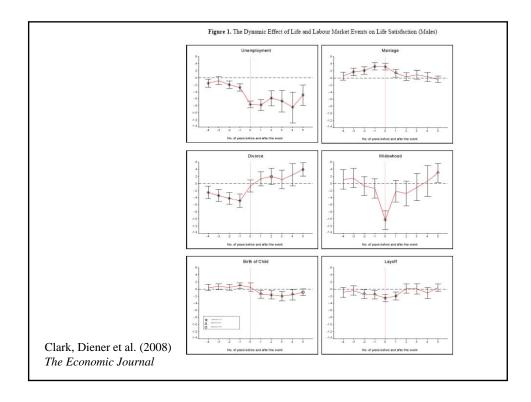


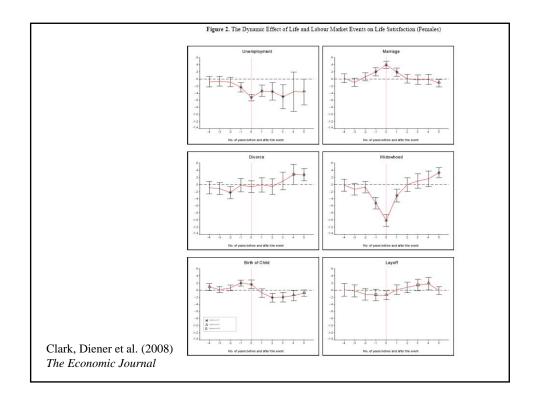


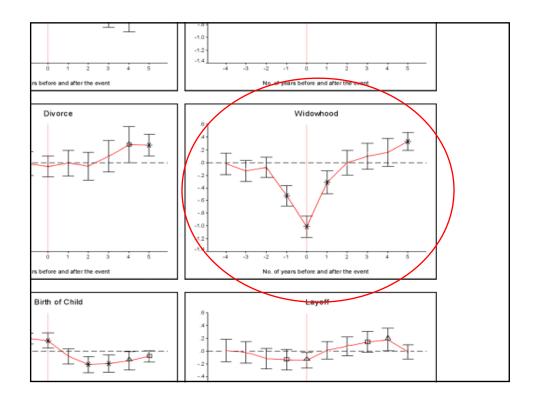


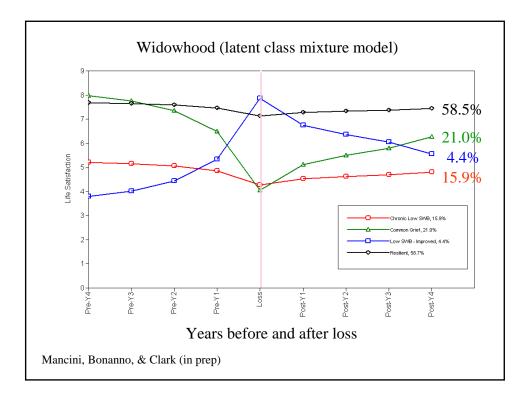


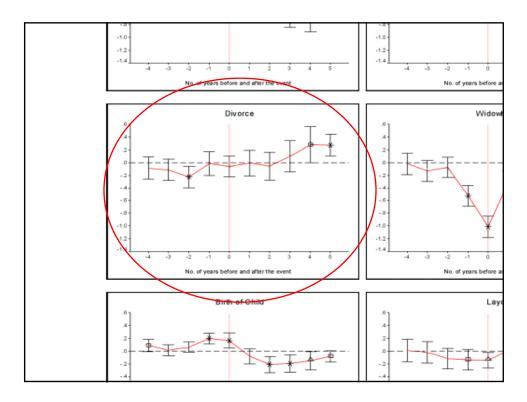


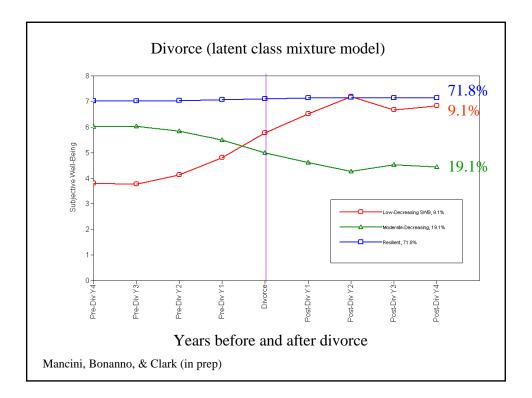


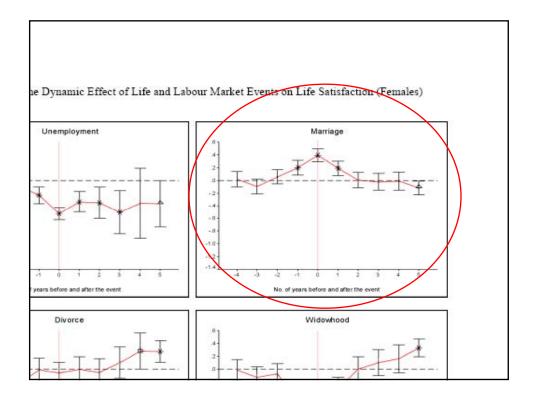


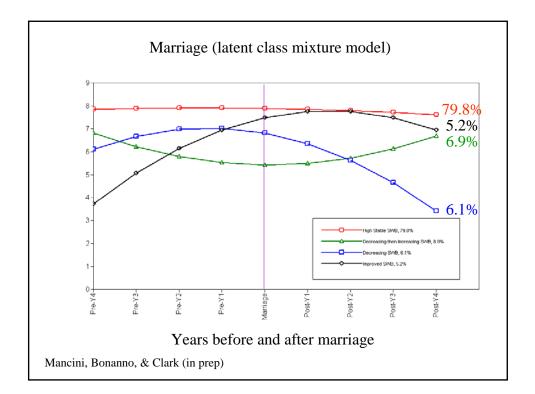


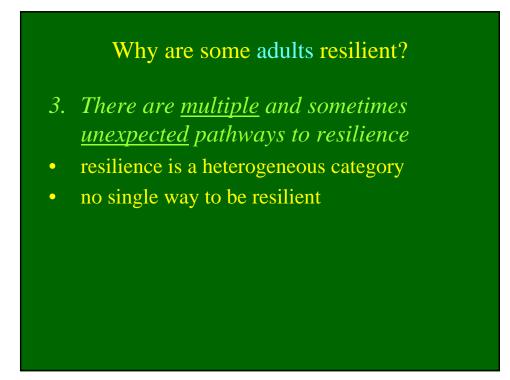






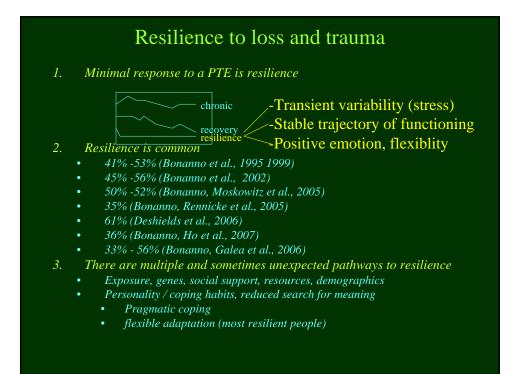






Multiple, Unique Predictors of resilient outcomes

- Demographic factors (gender, age)
- Fewer past and current stressors
- Pre-event beliefs (e.g., acceptance of death, justice)
- Reduced search for meaning
- Reduced worry/rummination
- Capacity for positive emotion
- Social resources (support, broad network)
- Economic resources (employment, no loss of income)
- Health resources (good health, absence of disease)
- Genetic disposition (G X E 5HTT)
- Personality
 - Pragmatic coping
 - Flexibility



Laughter and smiling

What's so funny about loss and trauma?

Laughter and Bereavement

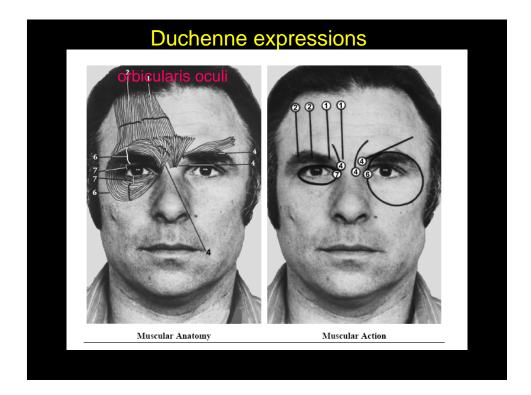
• laughter as dissociation (breather)

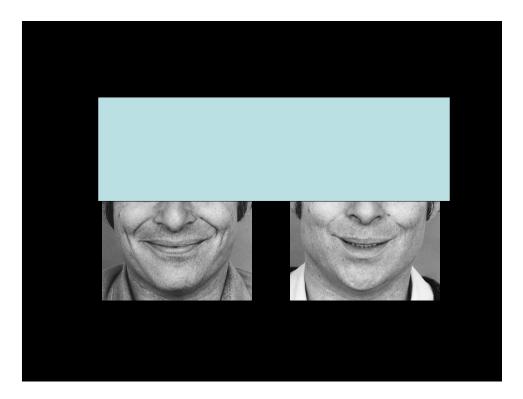
- helps undo negative emotion (Fredrickson)
- associated with distancing, reinterpreting, or reframing of negative events (akin to humor)

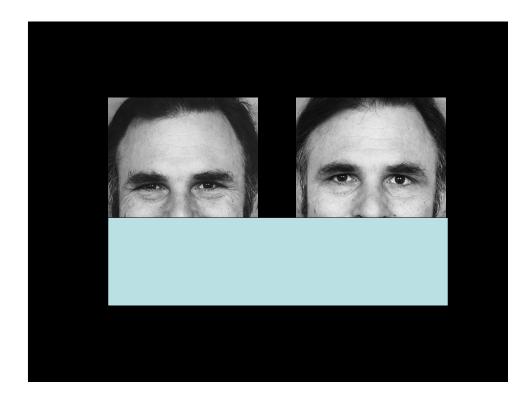
• Social benefits of laughter

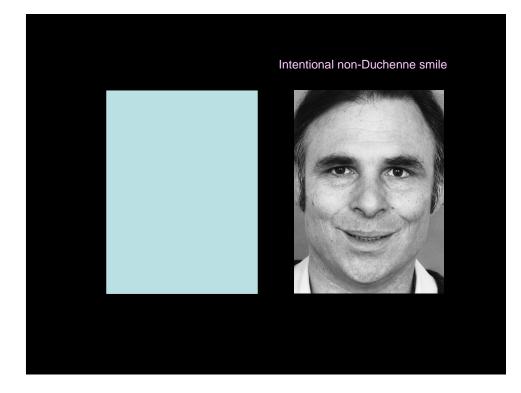
- laughter is pro-social, increases group cohesion
- laughter is contagious and evokes positive responses in others

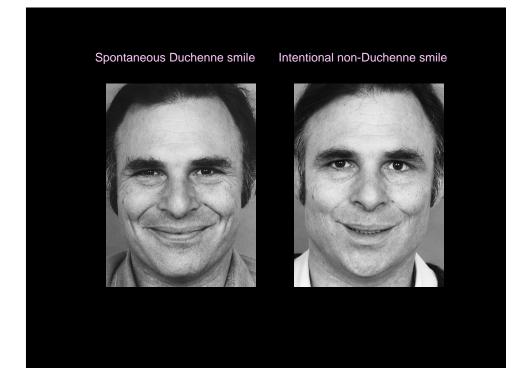
Bonanno, & Keltner (1997). *Journal of Abnormal Psychology* Keltner & Bonanno (1997). *Journal of Personality and Social Psychology*



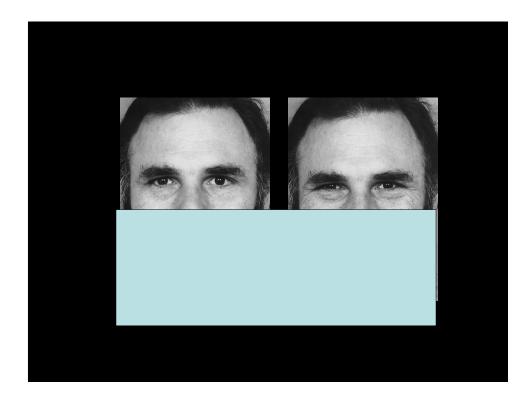


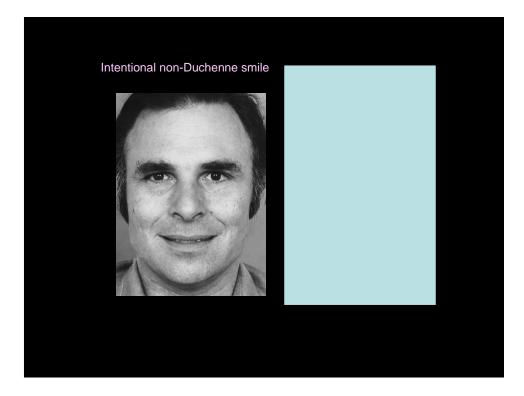


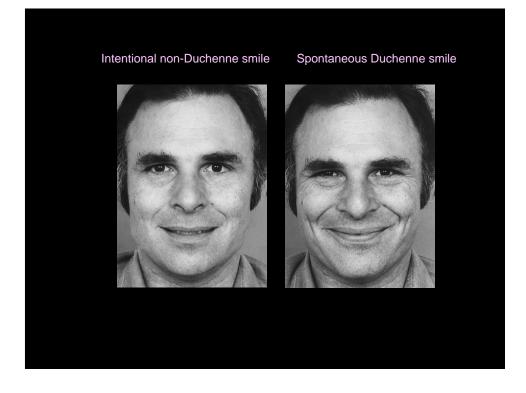


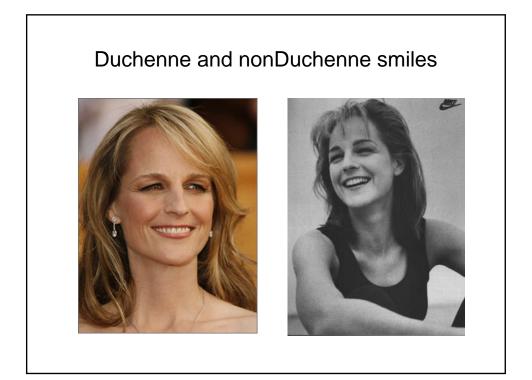












Positive Emotional Expression

- the orbicularis oculi muscles (surround the eye) contract *involuntarily* during positive emotional responding
- Duchenne and non-Duchenne expressions appear to be associated with different neural pathways
- nonDuchenne expressions are associated with social politeness; also concealment, deception
- Only "Duchenne" expressions are associated with genuine positive emotion, contagion

Are Positive Expressions Functional During Bereavement?

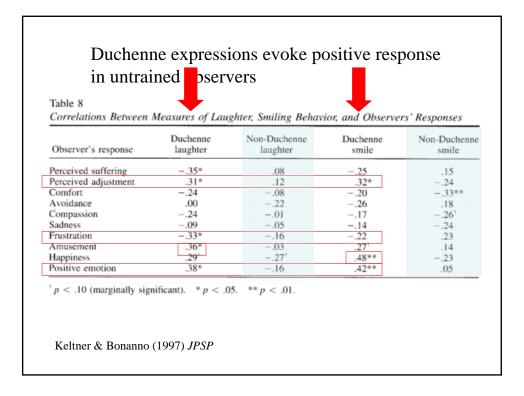
• Proportion of participants showing facial expressions in early months of bereavement

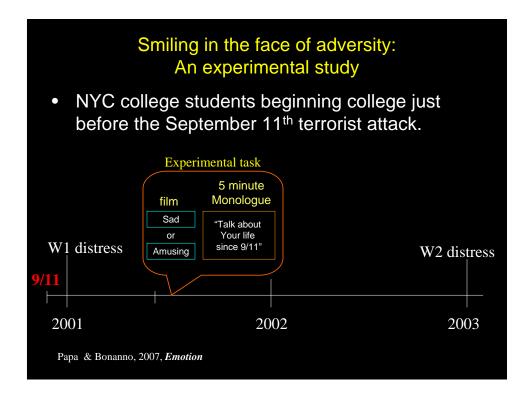
- Duchenne smile 60% Duchenne laugh 55%
- anger 60% Contempt 32%
- Disgust 32%
- Contempt Fear

55% 32% 16%

- Sadness 32%
- Duchenne expressions predicted better long-term adjustment

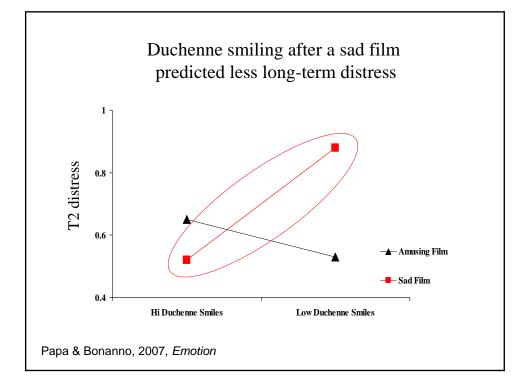
Bonanno, & Keltner (1997). Journal of Abnormal Psychology, 106, 126-137.

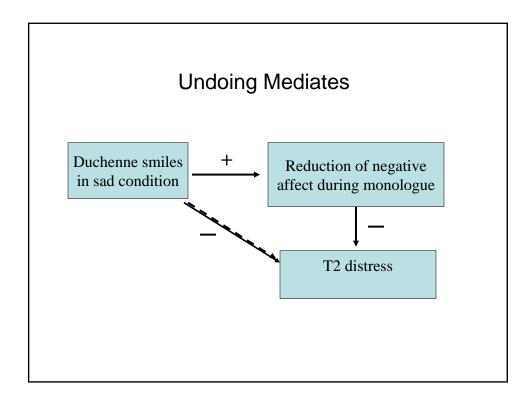


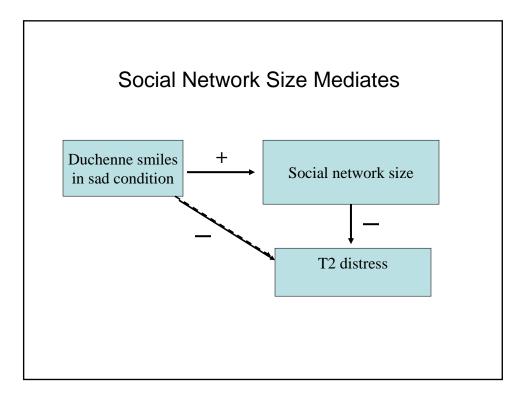


results

- Main effect
 - Duchenne smiles predicted reduced distress at W2 (controlling for W1 distress)
- Interaction effect
 - Smile X film context
- Mediating effects
 - Double mediated moderation





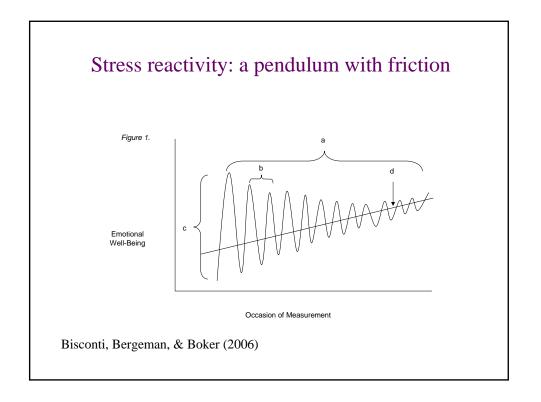


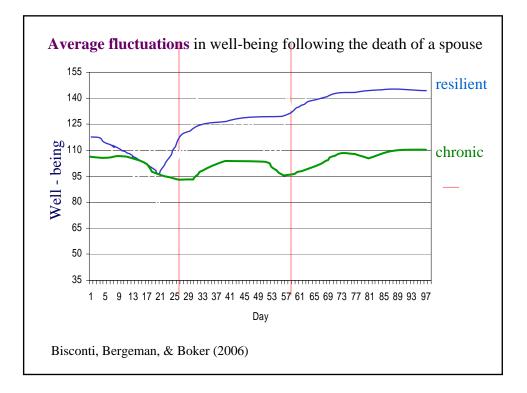
Why do we have emotions?

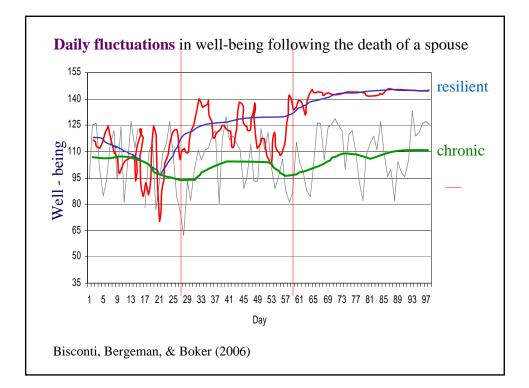
- Emotions are functional (Ekman, 1992, 1993; Frijda, 1986; Lazarus, 1991; Tooby & Cosmides, 1990).
- The *experience* of affect
 - Clarifies the kind of response that may be needed
 - motivates
- The expression of emotion
 - communicates information
 - influences and regulates the behavior of others
- Physiological systems are recruited
 - prepares us to respond
- Negative and positive emotions

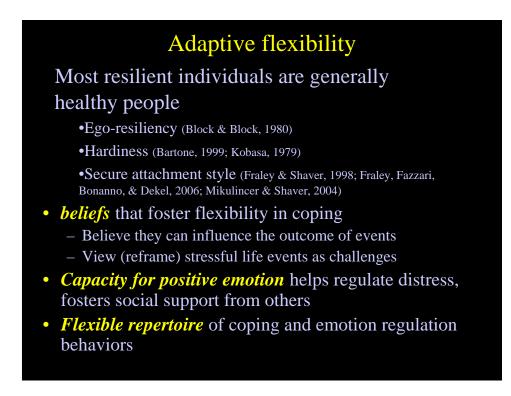
Emotion and Adversity

- Traditional theories emphasized unrestricted expression of negative emotions
 - The work of mourning (Freud, 1917)
 - psychological debriefing (Everly & Mitchell, 1999)
- Greater expression of negative emotion is often predictive of poor long-term functioning (Bonanno & Keltner, 1997; Seery et al., 2007)
- Emotions are useful *but also efficient*; ephemeral, serve their adaptive functions quickly (Bonanno, Goorin, & Coifman (2008)
- When prolonged, emotions are maladaptive (e.g., prolonged sadness leads to withdrawal, undermines support)
- positive emotions help to regulate (undo) negative states, bolster social support
- Oscillation (Schut & Stroebe 1999; Bisconti et al., 2004; 2006)









Expressive Flexibility

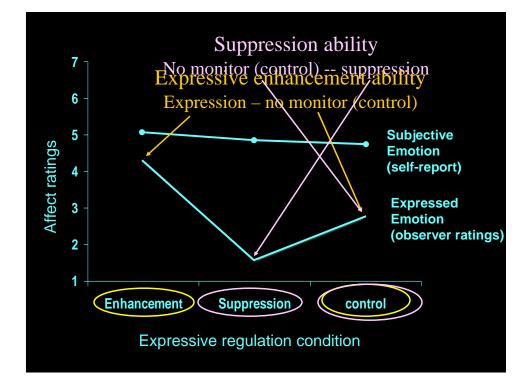
- *flexible application* of coping strategies in a manner that corresponds with the nature of the stressor (Cheng, 2001).
- "whether one expresses or suppresses emotional expression is not as important for adjustment as is the ability to flexibly express or suppress as demanded by the situational
 - *context*" (Bonanno et al., 2004, *Psychological Science*)
- Expressive flexibility is trait-like (Seivert & Bonanno, 2008)

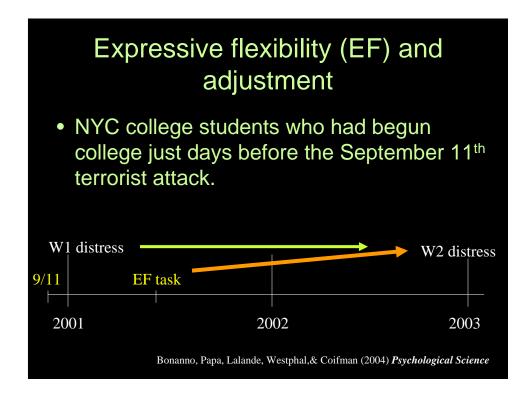


Expressive Flexibility Task

- View emotion-evoking photos
 - rate own affect
- Observed by another participant (on monitor)
 - Will "try to guess your emotion"
- Three within-subjects conditions
 - Enhancement of expression
 - Suppression of expression
 - Control monitor turned off

Bonanno, Papa, Lalande, Westphal, & Coifman (2004) Psychological Science





DV = W2 distress	Beta	R ²	Model
W1 distress	.26*	.19	F(4,80)=4.24**
filler problems completed (cognitive resources)	03		
Expressive enhancement ability	24*		
Expression suppression ability	23*		
DV = W2 distress	Beta	R ²	Model
		10	F(3,80)=5.73***
T1 distress	.26*	.18	F (3,00)=3.73
	.26* 03	.18	F(3,00)=3.75***

Replication and extension

- Repeating *same task in same participants* 3 years later (n = 101)
- A stable ability: Test-retest = .62
- Enhanced expression <u>and</u> suppression each predict anonymous friend ratings of participants' adjustment
- flexibility <u>moderated</u> the relationship of acute life events and adjustment

Seivert & Bonanno (2008)

Flexibility in the expression of positive emotion

- Every adaptation has its cost
 - e.g. the peacock's tail





Are positive emotions always adaptive?

- Every adaptation has its cost
 - E.g. peacock's tail
 - Fosters sexual selection (adaptive)
 - Makes susceptible to predation (maladaptive)
- Duchenne laughter and smiling
 - Foster social affiliation (adaptive)
 - But ??....(maladaptive?)
 - . . . Are there situations in which these signals are confusing or inappropriate?

