

Post-Traumatic Stress and Growth following Forced Relocation

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Abstract

Forced relocation has been recognised as a traumatic event, which can generate pathological and positive responses. The current study focused on the situation of Israeli residents who were forced to relocate from their homes in the Gaza Strip. Two main questions were examined: the association between post-traumatic symptoms and post-traumatic growth responses following the forced relocation; and the contribution of contextual variables to the variance in those reactions. A sample of 269 participants completed questionnaires, which assessed post-traumatic symptoms and growth following the relocation. The relationship between post-traumatic symptoms and growth was found to be curvilinear, depending on the levels of the post-traumatic symptoms. Participants who expressed a high sense of belonging to the country showed relatively high levels of growth and relatively low levels of post-traumatic symptoms. In addition, participants living in temporary housing reported lower levels of growth than did those in independent housing. These findings highlight the importance of contextual variables that affect people's ability to cope with traumatic events such as forced relocation.

The findings also indicate that the strengths perspective and the Person in Environment approach might help social workers better understand the phenomenon of forced relocation and determine the level of their interventions.

Keywords: Post-traumatic symptoms, post-traumatic growth, forced relocation, sense of belonging, evacuees

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Introduction

In recent years, people all over the world have been forced to evacuate their homes for various reasons, including political developments such as war and urban renewal as well as natural disasters such as floods and earthquakes (Hansen and Smith, 1982; Steinglass and Gerrity, 1990). The move usually involves an overall change in living conditions—including changes in place of residence, workplace and social life—which can affect the mental and physical health of individuals (Ryff and Essex, 1992). In addition to concrete losses, people who have been forced to relocate have to cope with the emotional pain of losing everything they were familiar with and starting over again. Relocation following war, political conflict or natural disaster intensifies the individual's loss of control and sense of threat that are caused by the losses that accompany the move. In light of the above, it is accepted to view forced relocation as a traumatic experience (Hall *et al.*, 2008; Hobfoll, 1989; Shamaï and Lev, 1999).

Exposure to traumatic events can lead to pathological responses and negative consequences such as anxiety, fear, depression and post-traumatic symptoms (Dohrenwend *et al.*, 2006). Post-traumatic symptoms can be grouped into three main clusters. The first is the persistent re-experience of the traumatic event, such as recurrent dreams and flashbacks. The second is persistent avoidance of internal or external cues associated with the trauma, such as avoiding thoughts, avoiding activities, diminished interest, detachment, restricted affect and sense of foreshortened future. Finally, increased arousal is manifested in difficulty sleeping, irritability, difficulty in concentrating, hypervigilance and exaggerated startle responses (American Psychiatric Association, 1994).

Research findings have revealed a diverse range of emotional and psychological responses in the immediate aftermath of relocation, such as: pain, mourning, anger, anxiety, adjustment difficulties, depression, marital and family problems, loss of confidence in one's achievements and abilities, and a sense of uncertainty about the future (Brown and Perkins, 1992; David *et al.*, 1996; Goenjian and Pynoos, 2001). Those responses have been found among refugees who have lost their homes in war and political revolutions (Silove, 2000). In addition, forced relocation

arouses questions about values as well as feelings of anger and betrayal toward the governmental forces that are responsible for the process (Gerrity and Steinglass, 2003).

The current study focused on the impact of forced relocation of Jewish settlements in the Gaza Strip and northern Samaria in Israel in 2005. At that time, about 8,000 residents were forced to evacuate their homes as result of the Israeli government's decision to withdraw from these regions. Research conducted among that population has revealed that high levels of psychological distress existed before and after the evacuation (Billig *et al.*, 2006; Hall *et al.*, 2008), as reflected in symptoms such as intrusive thoughts, hyperarousal, avoidance, mourning and depression (Nuttman-Shwartz, 2008).

Studies have also found that in addition to pathological responses, survivors of traumatic events can experience positive changes and even growth (Tedeschi *et al.*, 1998). Post-traumatic growth (PTG) is described as the subjective experience of positive psychological change reported by an individual as a result of the struggle with trauma. PTG relates to a variety of positive psychological changes, including increased appreciation of life, setting of new life priorities, a sense of increased personal strength, identification of new possibilities, improved closeness in intimate relationships or positive spiritual change (Tedeschi *et al.*, 1998). Such outcomes have been documented following a variety of traumatic events, including natural disasters (Maercker and Herrle, 2003), war (e.g. Fontana and Rosenheck, 1998) and terror (Butler *et al.*, 2005).

Although several studies have explored the association between post-traumatic symptoms and post-traumatic growth, the nature of that association is still unclear and the findings are inconsistent (Ai *et al.*, 2007; Frazier *et al.*, 2001; Linley and Joseph, 2004). Some researchers have argued that stress and growth are antithetical: the more stress one experiences in the wake of a traumatic event, the less one grows from it, and vice versa (Updegraff *et al.*, 2002). Other studies have shown positive correlations, where persons with high levels of distress are most likely to show high psychological growth (Dekel and Nuttman-Shwartz, 2009; Pargament *et al.*, 1998; Tedeschi and Calhoun, 1996). However, there are also studies that have revealed a curvilinear relationship between exposure to traumatic events and post-traumatic growth. That is, when post-traumatic symptoms are at a certain level of severity, growth can occur, but at extreme levels of severity, exposure to traumatic events undermines growth (Butler *et al.*, 2005; Fontana and Rosenheck, 1998; Linley and Joseph, 2004; Powell *et al.*, 2003). Finally, there are studies that have revealed no relationship between post-traumatic symptoms and growth (e.g. Ai *et al.*, 2007).

Regarding the case of forced relocation, studies have documented various stress reactions, but very little research has been conducted on growth reactions among relocated populations. Therefore, one aim of the

present study was to examine post-traumatic symptoms and growth reactions and their associations among people who experienced forced relocation.

In addition, according to the Person in Environment approach in social work and the findings of trauma studies, it is important to take social and environmental resources into account. Personal resources as well as social, environmental and community resources explain and predict the different responses that people will have to traumatic events (Breckenridge and James, 2010) as well as their ability to cope and to adjust (Nuttman-Shwartz and Dekel, 2009b). Hobfoll (1989) argued that a concentrated loss of resources can be particularly traumatic when it is neither chosen nor under the control of the evacuee. One important resource is the person's sense of belonging to the community. However, in the case of forced relocation, the immediate community is fragmented and spread out. Moreover, the community at large, like the whole country, is often accused of not taking responsibility for helping the evacuees manage their losses and difficulties (Dekel and Tuval-Mashiach, 2010). In light of the above, one main contextual question is how evacuees feel towards the communities and societies that forced them to leave.

Sense of belonging

Sense of belonging refers to people's feeling that they are part of a collective, such as their neighbourhood, their immediate community or their nation (Newbrough and Chavis, 1986). This feeling is characterised by mutual concern, connection, community loyalty and confidence that one's personal needs will be fulfilled by means of commitment to the group as a whole. Other manifestations include the desire to remain in the community and the desire to encourage others to join it (Itzhaky, 1995).

Regarding the population examined in the present study, the evacuees had been living in the area for a prolonged period, and they were motivated by the ideology of settling the land of Israel. They had initiated an intensive struggle against the disengagement plan law for evacuation of those settlements, but felt that they were becoming a controversial minority group. Notably, the evacuation took place after a prolonged state of emergency, which increased the sense of solidarity and cohesion within their community but isolated them from the mainstream of Israeli society (Nuttman-Shwartz and Dekel, 2009a).

Housing solutions

In a situation of relocation, and especially in the case of forced relocation, the issue of leaving the house and finding alternative housing is also very

important. Previous studies on disaster, which were conducted at the levels of households and communities, have highlighted the importance of re-establishing housing (Peacock *et al.*, 2006). For example, at a time of war, people prefer to stay together or even to evacuate with their relatives in order to feel safer and more protected (Shacham and Lahad, 2004).

Some researchers have compared people who were displaced in the 1999 earthquake in Turkey with those who remained in the community who indicated that they would prefer to stay in their previous locality of residence, even if they moved to a different house (Salcioglu *et al.*, 2008). The results of post-hurricane research have shown that displacement was negatively associated with owning homes, living in preferred detached housing, maintaining pre-storm income and retaining access to primary health care facilities. In contrast, displacement was positively associated with unemployment and severe mental illness (Hori and Schafer, 2010).

The evacuees participating in the present study were asked prior to the evacuation whether they wished to move to a permanent location. Most of them refused to do so, on the grounds of political views, faith or ideology. After the evacuation, most of the evacuees were relocated to caravan sites. Several hundred of them were sent to temporary accommodations at guest houses or hotels, and others found housing solutions on their own. In light of the above, the second contextual variable examined in the study was place of residence.

Research questions

Recent findings in Israel have shown that the sense of belonging to one's country is a resource that alleviates post-traumatic symptoms and increases PTG in the wake of the ongoing terror attacks (Dekel and Nuttman-Shwartz, 2009). Against that background, the study aimed to examine the following questions:

- (1) How will the sense of belonging to the country affect post-traumatic symptoms and PTG among residents in a situation of forced evacuation?
- (2) How do the housing solutions provided by the country affect post-traumatic symptoms and growth among forced evacuees?

Method

Sample and procedures

The study was conducted among a targeted sample of 269 participants who were evacuated from the Gush Katif area, which was considered to be part of the Gaza Strip. Research assistants visited four temporary housing sites that most of the evacuees had moved to. More than half of the participants

in the sample (57.1 per cent) were living in a large temporary dwelling area, 29.4 per cent were living in caravans in a smaller dwelling area, 8.9 per cent were living in hotels and 4.6 per cent were living in apartments that they had rented for themselves.

The geographical distribution of the participants was similar to the geographical distribution of the entire relocated community. At each site, research assistants approached the evacuees at home, and explained that the study would be dealing with their adjustment to the forced relocation. The research assistants established contact with 360 relocated residents, of whom 269 agreed to participate in the study (74.7 per cent). Only one person per household filled out the questionnaire. The most frequent reasons for refusal to participate were being too busy due to the search for new jobs or lack of interest in participating. Between January 2006 and September 2006, participants received research questionnaires to be completed at their convenience. All of the participants gave their informed consent when the questionnaires were distributed and the completed questionnaires were collected a few days later. Participation was voluntary and participants did not receive any incentives.

The majority of participants were women (62.3 per cent, $n = 170$). Notably, the women were more available to participate in the study, because they stayed at home in their new dwellings, whereas most of the men were out of the home looking for new jobs. The participants ranged in age from eighteen to seventy-one years ($M = 35.49$, $SD = 12.17$). Most of them (86.5 per cent) were born in Israel; 73.9 per cent were married; 26.2 per cent were unmarried. About half of the participants (52.7 per cent) had ten years of education, 26.5 per cent had completed high school and 20.8 per cent had academic degrees; 84.9 per cent were religious or ultra-Orthodox, and the rest were secular or traditional; 56.3 per cent of the participants reported below-average income, 14 per cent reported average income and 29.6 per cent above-average income; 39.6 per cent were unemployed, and 60.4 per cent had been employed in the Gush Katif area prior to the relocation.

Instruments

Socio-demographic characteristics

The questionnaire included data on gender, age, marital status, education, employment status, level of religiosity and current housing arrangement.

Exposure to terror attacks including rockets or missiles

Participants were asked to indicate the extent of their direct exposure to terror attacks on a five-point scale: 1 (*no direct exposure*); 2 (*fell in an*

adjacent neighbourhood); 3 (*fell in my neighbourhood*); 4 (*fell close to my home*); and 5 (*fell on or very close to my home*).

Post-Traumatic Stress Disorder (PTSD)

The seventeen core symptoms were assessed by the Post-Traumatic Stress Disorder (PTSD) Inventory—a self-report scale consisting of seventeen statements that correspond to the core PTSD symptoms of intrusion, avoidance and hyper-arousal listed in the DSM-IV (American Psychiatric Association, 1994). For each statement, participants were asked to indicate whether they experienced that symptom, on a scale ranging from 1 (*not at all*) to 4 (*very often*). The overall level of PTSD was calculated as the sum of the symptoms endorsed. The Cronbach's alpha reliabilities for the seventeen items in the current study was 0.90, and the scale was found to have high convergent validity compared to diagnoses based on structured clinical interviews (Solomon *et al.*, 1993).

The Post-Traumatic Growth Inventory (PTGI)

This self-report inventory, developed by Tedeschi and Calhoun (1996), was used to assess the salutogenic impact of the forced relocation. The measure taps twenty-one positive changes resulting from traumatic experiences, based on five subscales: relating to others (improved interpersonal relations); new possibilities (changes in aspirations and goals); personal strength (increased inner strength); spiritual change (increased spirituality); and appreciation of life (greater appreciation). Each item was scored on a six-point scale, ranging from 0 (*I didn't experience this change*) to 5 (*I experienced this change to a very great extent*). One overall growth score was derived by computing the mean of all of the responses. The Cronbach's alpha reliability of the total scale was 0.93.

Sense of belonging to the country

The measure was based on Itzhaky's (1995) Sense of Belonging Scale. It consisted of fourteen items, which tap the participants' sense of belonging to Israel (e.g. 'I feel part of the country') and their commitment to the country (e.g. 'I won't leave the country even if the security situation deteriorates'). For each item, participants were asked to indicate their agreement on a scale ranging from 1 (*not at all*) to 4 (*very much*). The Cronbach's alpha reliability of the measure used in the current study was 0.87.

Housing solutions

Participants in the present study were asked to respond to a question relating to their actual place of residence, which was adapted to their housing situation following the evacuation. Responses were as follows: 1 (*a caravan site*); 2 (*a guest house or hotel*); 3 (*a tent site*); and 4 (*a rented house or apartment or other independent housing solution*). Essentially, the responses reflected two housing solutions: temporary solutions (1, 2 and 3) ($n = 134$) or independent housing solutions (4) ($n = 83$).

Results

Associations between PTS and PTG

To examine the associations between post-traumatic symptoms and growth variables (PTS and PTG), we conducted Pearson's correlations and charted them on a graph (see Figure 1). The graph shows that the linear correlation and Pearson's correlations between PTS and PTG were negligible. However, a parabolic curve was found, which indicates a significant correlation between those variables ($r = 0.20, p < 0.01$). An inverted-U relationship was found between the plots, in each case with a gentle curve.

Figure 1 indicates that up to a score of 40 on the post-traumatic distress questionnaire, rates of PTG increased as a function of increased distress (PTS). Beyond a score of 40, however, PTG decreased as a function of increased PTS. That is, up to a certain level of post-traumatic distress, the

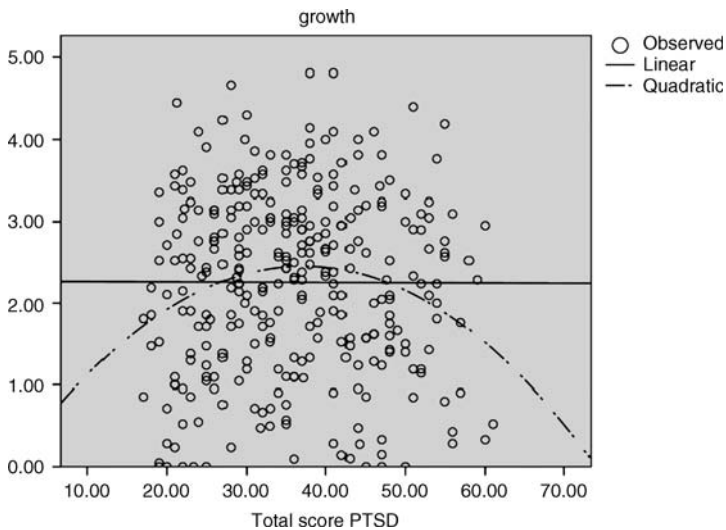


Figure 1 The relationships between PTS and PTG

correlation between PTG and PTS was positive; beyond that level, the correlation between PTG and PTS was inverse.

Housing solutions, sense of belonging and PTS/PTG

Sense of belonging to the country correlated positively and significantly with PTG ($r = 0.13$, $p = 0.05$), and negatively with PTS ($r = -0.19$, $p = 0.01$). Thus, participants who felt a strong sense of belonging to the country reported high levels of PTG and low levels of PTS.

Predictors of PTS and PTG

The second aim of the study was to examine the unique and combined contribution of all of the variables to explaining the variance in PTS and PTG. We conducted hierarchical regression analyses, where the predictors were entered into a five-step regression to explain the variance in PTS, and into a six-step regression to explain the variance in PTG. Personal characteristics such as religiosity, marital status, gender and employment status were entered in the first step; exposure to terror events was entered in the second step; sense of belonging to the country was entered in the third step; and the type of housing solution was entered in the fourth step. In the fifth and last step, the interactions between the variables of personal characteristics, and exposure to terror events, sense of belonging and housing solution were entered. In the second regression analysis, the linear and non-linear components of PTS were entered in the fourth step in order to examine whether the relationship between PTG and PTS might be non-linear. The hierarchical regression analysis revealed that the variables explained 17 per cent of the variance in PTS and 15 per cent of the variance in PTG.

Predictors of PTS

Table 1 presents the hierarchical regression coefficients for explaining the variance in PTS. In the first step, level of religiosity and employment status contributed significantly to explaining that variance: employed participants with high levels of religiosity reported lower levels of PTS. Exposure to a terror event, which was entered in the second step, did not contribute significantly to explaining the variance in PTS. Sense of belonging to the country, which was entered in the third step, contributed significantly to explaining that variance: the more the participants felt a sense of belonging to the country, the lower their levels of PTS. In the fourth step, type of housing solution did not contribute significantly to explaining

Table 1 Beta regression coefficients for explaining the variance in PTS

Steps	1	2	3	4	5
Religiosity	-0.19**	-0.19**	-0.17*	-0.14*	-0.16*
Marital status	-0.10	-0.10	-0.09	-0.09	0.11
Gender	0.13*	0.13*	0.14*	0.14*	0.12*
Employment status	-0.20***	-0.21***	-0.19**	-0.19**	-0.18**
Exposure to terror events		0.05	0.05	0.05	0.05
Sense of belonging to the country			-0.13*	-0.13*	-0.15*
Housing solution				-0.07	-0.05
STR ¹					-0.16**
R ²	0.12***	0.12***	0.14***	0.14***	0.17***
ΔR ²	0.12***	0.00	0.02*	0.00	0.03**

p* < 0.05, *p* < 0.01, ****p* < 0.001.

PTS. In the fifth step, an interaction was found between marital status and housing solutions: among married participants, a significant negative correlation was found between type of housing solution and PTS ($r = -0.21, p = 0.01$), whereas the correlation between those variables among the unmarried participants was low and insignificant ($r = 0.15, p = 0.05$).

Predicting PTG

Table 2 presents hierarchical regression coefficients for explaining the variance in PTG. Because the interactions that were entered in the sixth step of that regression did not contribute significantly to explaining the variance in PTG, only five steps are presented in the table. In the first step, personal characteristics did not contribute significantly to explaining the variance. Exposure to terror attacks, which was added in the second step, also did not contribute significantly. However, the negative beta coefficient of

Table 2 Beta regression coefficients for explaining the variance in PTG

Steps	1	2	3	4	5
Level of religiosity	-0.06	-0.07	-0.10	-0.13	-0.05
Marital status	0.06	0.05	0.05	0.05	0.05
Gender	0.11	0.11	0.10	0.08	0.09
Employment status	0.01	0.02	-0.01	-0.03	-0.02
Exposure to terror events		-0.16*	0.15*	-0.14*	-0.12*
Sense of belonging to the country			0.16*	0.14*	0.13*
PTSD				-0.02	-0.04
Non-linear PTSD				-0.20**	-0.20**
Housing solution					-0.23**
R ²	0.02	0.04*	0.07*	0.11**	0.15***
ΔR ²	0.02	0.02	0.03*	0.04**	0.04**

p* < 0.05, *p* < 0.01, ****p* < 0.001.

that variable indicates that higher levels of exposure to terror attacks might be related to lower levels of PTG. In the third step, sense of belonging to the country contributed significantly to explaining the variance in PTG, with a positive beta coefficient. Thus, the higher the participants' sense of belonging to the country, the higher their levels of PTG.

Most of the explained variance was added in the fourth step and the contribution of the non-linear component of PTS was significant. Type of housing solution after the relocation, which was entered in the last step, contributed an additional 4 per cent to explaining the variance in PTG, beyond the variables that explained the variance in the previous steps. Participants who lived in caravans and in other temporary housing arrangements reported lower levels of PTG than did participants who found independent housing solutions.

Discussion

The findings of the present study highlight the complexity of responses to post-traumatic stress. In many cases, negative post-traumatic effects are contained and they do not interfere with subsequent psychological development as reflected in post-traumatic growth. In that connection, the findings suggest that when individuals recognise that they have experienced a traumatic event, they are usually able to grow from it—unless they experience a strong sense of failure and difficulties in functioning, which reflect extreme post-traumatic reactions and impede post-traumatic growth.

The finding that PTG declined among persons with severe post-traumatic responses is consistent with the results other studies that have revealed a curvilinear relationship between PTS and growth (Butler *et al.*, 2005). The positive association between post-traumatic symptoms and post-traumatic growth in this study is consistent with the results of several other studies and reflects active attempts to cognitively metabolise the event (Horowitz, 1986). Thus, it can be assumed that at this stage, traumatic events and the distress that they evoke precipitate growth (Tedeschi and Calhoun, 1995). Additionally, the curvilinear relationship that was found between trauma symptoms and growth (i.e. the finding that participants with intermediate levels of symptoms reported the highest levels of growth) suggests that there may be a range of challenging experiences that are sufficient to impel growth but do not overwhelm or inhibit the growth promoting processes. It is also noteworthy that the PTG curve tended to fall at around 48–50 on the PTS curve—similar to previous studies (Butler *et al.*, 2005). Hence, it appears that when responses to traumatic experiences characterised with severe disruption, there is a substantial decline in the probability of growth. These findings are consistent with the results of Hall *et al.* (2008), who argued that when PTG is measured

among people who were trying to resist to the relocation, PTG may serve its theorised protective function.

In a similar vein, findings regarding the relationships between predictors of post-traumatic symptoms (Tedeschi and Calhoun, 1996; Tedeschi *et al.*, 1998) and growth are inconclusive. According to Tedeschi and Calhoun (1996), growth is a result of psychologically 'seismic' events and derives from the individual's struggle to make sense of those events. Because seismic events are distressing by nature, post-traumatic symptoms have actually been viewed as a trigger for growth. Along similar lines, Butler and others (2005) viewed the key post-traumatic symptoms of intrusion and avoidance not only as markers of distress, but also as evidence of the organism's efforts to assimilate and accommodate traumatic events in a way that will facilitate growth later on.

However, it is also possible that because the evacuees did not have a choice about relocating, traumatic responses to the event were intensified. The evacuees were left with an unclear future, which diminished their ability for growth. In light of this situation, it would be worthwhile to re-examine whether the relationship between post-traumatic symptoms and growth depends on the type of traumatic event, as well as on the immediate or long-term losses experienced at the time of the survey. Moreover, besides using the PTGI instrument, it would be worthwhile to examine whether PTG is related to the individual's ability to create a better future and to the existence of a sense of hope (Ai *et al.*, 2007; Frazier *et al.*, 2009).

Notably, the findings of this study revealed that the higher the participants' sense of belonging to the country, the lower their levels of PTS and the higher their levels of PTG were. This finding is consistent with research conducted by Canetti *et al.* (2009) among residents of Gush Katif. Accordingly, the extent to which the evacuees feel a sense of connection to the state and believe that the state assumes responsibility for their situation can either mitigate or intensify their distress. As such, community resources can be viewed as a source of resilience (Norris *et al.*, 2008). This argument has also been supported by studies on community resilience, which have found that a high sense of belonging to the country is associated with low levels of pathological responses in the face of traumatic events such as terror (Dekel and Nuttman-Shwartz, 2009).

Type of housing solution was also found to predict PTG. The relationship between those two variables was examined in light of the understanding that in cases of man-made trauma, the state system often plays a major role in generating the event (e.g. in cases of war) as well as in coping with it (e.g. providing assistance after a natural disaster, Norris *et al.*, 2008). Thus, it is necessary to take into account that prior to the evacuation, all of the evacuees participating in the present study were asked whether they wished to move to a permanent location and most of them refused to do so on the grounds of political views, faith or ideology. Regarding

the differences in levels of PTS and PTG among evacuees who moved to caravan sites versus those who chose their own housing solutions, the evacuees in the second group did not accept the assistance offered by the state and coped with the relocation and its consequences on their own or with the help of their local communities. Hence, the finding that the evacuees who lived in temporary accommodations had higher levels of PTS, lower levels of PTG was expected. It is possible that the traumatic event continued to affect the residents of caravan sites, because they were constantly reminded of the lack of preparation for the relocation. In contrast, the move to independent housing solutions might be a symbol of independent coping, which reflects the individual's ability to find an alternative solution and to start a new life following the disruption caused by forced relocation.

With regard to the predictors, the finding that women were more susceptible to PTS than men is consistent with the results of other research (Laufer and Solomon, 2009; Johnson *et al.*, 2009). Additionally, in line with COR theory (Hobfoll, 1989), married religious participants who were employed and had high levels of education reported relatively low levels of PTS (Hall *et al.*, 2010).

Limitations of the study and implications for research and practice

Several limitations need to be mentioned. First, the research design was cross-sectional and all of the data were collected at one point in time. Hence, it was impossible to determine the causal relationship, if any, between the predictors and outcomes (PTS and PTG), as well as between the two outcomes themselves. Furthermore, the participants in the study who had lived at a caravan site for a prolonged period had been experiencing an ongoing situation of distress. Hence, it would be worthwhile to conduct longitudinal investigations, in an attempt to examine whether the evacuees learned to adapt to the situation over time or whether their levels of PTS intensified. In addition, qualitative research would enable the evacuees to raise unique and diverse concerns that might shed further light on the difficulties they experienced as well as on their ability to grow.

Regarding the practical implications of the study, the findings indicate that in line with the strengths perspective (Saleebey, 1996), assessments of growth can be applied towards promoting psychosocial adjustment in the aftermath of traumatic events and reinforcing the strengths-base approach among social workers working with post-traumatic clients (Bell, 2003; Harms and Talbot, 2007). Moreover, social workers can serve as role models and foster approaches to worker–client interactions that build hope and help clients maintain positive perspectives of their current selves and lives.

In addition, with regard to situations of forced relocation, social workers should take housing solutions and sense of belonging to the community into account in their assessments of relocated populations, in addition to

considering the interpersonal or intra-psychic factors that those populations share in common. This perspective is in line with the Person in Environment approach, which integrates cultural, environmental and subjective-individual components in the professional relationships that social workers develop. Hence, it is important for social workers to be involved in promoting policies and interventions that enhance trust and community competence as resources that can strengthen community and personal resilience.

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