

PSYCHOLOGICAL FEATURES OF MENTAL HEALTH RECOVERY USING THE "TRAUMA METAMORPHOSIS" PROGRAM

ПСИХОЛОГІЧНІ ОСОБЛИВОСТІ ВІДНОВЛЕННЯ ПСИХІЧНОГО ЗДОРОВ'Я ЗА ДОПОМОГОЮ ПРОГРАМИ «МЕТАМОРФОЗИ ТРАВМИ»

The article is devoted to the problem of mental health of the individual in the current conditions of war and uncertainty. The authors of the article proposed a new author's approach to understanding of the concept of "trauma", offered their own vision of the problem of post-traumatic growth, and proved that any trauma has a resource.

The article is interesting for psychologists and psychotherapists, we see the idea of the program "Trauma Metamorphosis" as a joint development of Israeli and Ukrainian specialists, because both peoples are subjected to merciless brutal attacks from their neighbors. The program is aimed at overcoming.

The presented program is aimed at overcoming the consequences of traumatic events and is based on three components: fantastic reality, cognitive behavioral therapy (CBT) and recreational psychotherapy. Unlike other psychosocial rehabilitation programs, Trauma Metamorphosis looks at psychological phenomena and processes through "Fantastic Reality". In particular, by with the help of the author's metaphors, such as: "traumatic exposure", "positive conversion", "restructuring of traumatic experience", etc. At the same time, the methods and tools of the program integrate cognitive-behavioral approach into recreational areas of psychotherapy, such as games, adventures, art, creativity, and virtual reality.

Implementation of the program "Metamorphosis of Trauma" emphasizes the role of consciousness in the implementation of regulatory activities for processing traumatic experience, searching for new meanings that can lead to a positive orientation to the future, and thus provide a constructive way to overcome trauma, to promote ecological and productive personal growth and productive personal growth. The program presented in the article "The Metamorphosis of Trauma" program proves that psychological trauma can contribute to productive changes, acting as a starting point for personal and spiritual development and spiritual development.

Key words: *trauma, post-traumatic stress growth, trauma metamorphosis, psyche, grief.*

Стаття присвячена проблемі ментального здоров'я особистості в сучасних умовах війни та невизначеності. Автори статті запропонували новий авторський підхід до розуміння поняття «травма», запропонували власне бачення проблеми посттравматичного зростання, довели, що будь-яка травма має ресурс.

Цікавою для психологів і психотерапевтів убачаємо ідею програми «Метаморфоза травми», як спільну розробку ізраїльських і українських фахівців, адже обидва народи зазнають нещадних звірячих ударів від сусідів. Представлена програма спрямована на подолання наслідків травматичних подій і базується на трьох компонентах, як-от: фантастична реальність, когнітивно-поведінкова терапія (КПТ) і рекреаційна психотерапія.

На відміну від інших програм психосоціальної реабілітації, «Метаморфоза травми» розглядає психологічні явища та процеси через «Фантастичну реальність». Зокрема за допомогою авторських метафор, як-от: «травматичне опромінювання», «позитивна конвертація», «реструктуризація травматичного досвіду» тощо. Водночас методи й інструменти програми інтегрують когнітивно-поведінковий підхід у рекреаційні напрями психотерапії, як-от ігри, пригод, мистецтво, творчість, віртуальна реальність.

Реалізація програми «Метаморфоза травми» виокремлює роль свідомості у здійсненні регулятивної діяльності для переробки травматичного досвіду, пошуку нових смислів, здатних зумовити позитивну орієнтацію в майбутнє, отже, забезпечити конструктивний шлях подолання травми, сприяти екологічному, досить швидкому та продуктивному особистісному зростанню. Представлена у статті програма «Метаморфоза травми» доводить, що психічна травма може сприяти продуктивним змінам, виступати початковим моментом особистісного та духовного розвитку.

Ключові слова: *травма, посттравматичне стресове зростання, метаморфоза травми, психіка, горе.*

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Relevance. In recent years, practical psychologists increasingly work with individuals who, having experienced psychological trauma, are unable to overcome it or resist its destructive impact on their psyche and personality without professional help. This issue has become so pressing that it requires urgent activation of scientific research in this field. Its importance is further underscored by the fact that this problem has not only a psychological but also a social "face".

According to the online publication Ukrinform, the greatest challenges to the psychological state of Ukrainians are associated with the following factors:

- Mass impact, as nearly all categories of the population have suffered from the war;
- Rapid growth in traumatic experiences;
- Childhood trauma;
- Low level of psychological awareness and culture – people are reluctant to seek help from psychologists due to stereotypes, hesitating to open up and trust professionals with their problems and emotions;
- Shortage of mental health specialists;
- Lack of specialized programs for individuals with traumatic experiences, and insufficient equipment for psychodiagnostics of mental health conditions.

The full-scale invasion, according to T. Tytarenko, became a “trigger for changing the life landscapes of individuals” and, as a result, negatively impacted the mental health of the Ukrainian population [5].

In response, the Coordinating Center for Mental Health under the Cabinet of Ministers of Ukraine, by letter dated April 26, 2024, № 55KC-2024/v, introduced a targeted model titled “The System in the Field of Mental Health and Psychosocial Support in Ukraine”. This model was developed as part of the nationwide mental health program initiated by O. Zelenska.

The term “mental health of an individual” is derived from the concept of psychological health, and since 1992, October 10 has been celebrated worldwide as World Mental Health Day, supported by the WHO and the World Federation for Mental Health. Today, this term is also used as a brand. For example, in the Privat-24 application, after completing any currency transactions, users may encounter quotes such as:

- “<...> mental health means asking yourself, “How are you?”;
- “<...> it's not blaming yourself for fear and laziness”;
- “<...> finding light in the darkness”;
- “<...> hugging your loved ones and yourself”;
- “<...> not being ashamed to feel sorry for yourself”, among others.

These metaphorical expressions indirectly represent the multifaceted and variable nature of the concept of “mental health”.

For every Ukrainian – whether on the frontlines or at home – the war has undoubtedly become an external factor that has shaken their mental health. In the context of this topic, the words of E. Berne are particularly relevant: “The only things that can change a person's life script are war, love, and psychotherapy” [7].

Thus, a high level of mental health is essential to withstand stress, anxiety, crises, and traumatic events. This scientific exploration is specifically dedicated to trauma psychotherapy.

The purpose of this article is to substantiate the authors' program for restoring an individual's mental health through the “Trauma Metamorphosis” program, analyze its structure and main components, and present the concept and core ideas of the program.

Presentation of Main Material. Analyzing mental health during wartime, characterized by traumatic experiences and uncertainty, it is appropriate to consider the concept of “post-traumatic growth”. Philosophical and theological thought has long linked negative experiences with potential positive outcomes, enabling individuals to reach new spiritual levels.

For instance, in a longitudinal study of survivors of the Herald of Free Enterprise ferry disaster in 1987, researcher S. Joseph found that 46% of survivors initially reported a negative shift in their outlook on life, while 43% noted a positive shift. Over time, this latter figure increased to 83% [1, p. 23].

Since then, scholars have extensively explored the phenomenon of positive changes resulting from traumatic events or other adverse circumstances.

In their study of personal transformations influenced by life challenges, researchers R. Tedeschi and L. Calhoun introduced the term “post-traumatic growth”, which has since become widely accepted. They concluded that personal characteristics play a significant role in facilitating post-traumatic growth. These characteristics include:

- locus of control;
- optimism;
- self-efficacy;
- resilience;
- creativity;
- congruence [9].

According to V. Klymchuk, post-traumatic growth focuses on the positive resources activated by trauma and manifests in changes across three key areas:

1. Relationships – improving and becoming more meaningful.
2. Self-perception – fostering belief in oneself, confidence in one's abilities, and enhanced self-respect.
3. Life philosophy – cultivating awareness and gratitude for each day of life [1].

Thus, it can be stated that in the context of war, the set of personal qualities that help withstand difficult life circumstances and maintain psychological well-being becomes particularly significant. Among these qualities are stress tolerance, resilience, psychological hardiness, emotional intelligence, and others. The personal characteristics that enhance the possibility of post-traumatic growth are based on a positive attitude toward one's life circumstances and closely align with psychologists' views on the phenomenon of tolerance to uncertainty.

The study of internal mechanisms for resisting the destructive impact of psychological trauma on an individual is a focus for both theorists and practitioners. However, many questions remain unanswered, as overcoming trauma is extremely challenging for an individual. These difficulties can be attributed to numerous factors, one of the most significant being that trauma “initiates” multiple disruptions in consciousness. As a result, the worldview becomes distorted, basic trust in the world is lost, and the entire system of the individual's relationships with their environment is deformed. This necessitates the formation of a new life position, which is almost impossible without a profound restructuring of the semantic and value-meaning system [2, p. 26].

In our opinion, the problems of functioning and development of an individual as a bearer of psychological trauma experience can be grouped into the following main categories:

1. Destructuring, and then negative restructuring of the system of the individual's relationships with the world and their surroundings; an increase in the limitations on the functioning of the ego-system.

2. Affective, cognitive, personal, and behavioral disorders.

3. Psychosomatic disorders.

It is precisely based on the above-identified problems of the traumatized individual that we begin our discourse on "Trauma Metamorphosis" – an original idea and psychological program that extrapolates an alternative approach to overcoming the consequences of traumatic events and is based on three components: fantastical reality, cognitive-behavioral therapy (CBT), and recreational psychotherapy.

The hypothesis of the program is that through the positive conversion of traumatic experience and personalized navigation, an individual exposed to traumatic irradiation can change the negative trajectory to a positive one. This emphasizes the importance of timely and adequate psychotherapeutic intervention and support. All the terms used will be elaborated upon in greater detail in the content of this article.

It is worth emphasizing that, unlike other psychosocial rehabilitation programs, "Trauma Metamorphosis" views psychological phenomena and processes through "Fantastic Reality". Specifically, using authorial metaphors such as: "traumatic irradiation", "positive conversion", "restructuring of traumatic experience", and others. At the same time, the methods and tools of the program integrate a cognitive-behavioral approach into the recreational areas of psychotherapy, such as games, adventures, art, creativity, and virtual reality.

Thus, on one hand, the traumatized psyche brings to the forefront the "overcoming" experience that occurs in the critical trauma situation – the situation of "impossibility", when a person realizes what has happened and the meaning (the meaningfulness) of their entire life. Without this "experience-awareness", changing one's life position is practically impossible, and therefore, the adequate overcoming of psychological trauma is also impossible. On the other hand, it is precisely at the moment of awareness that the psyche begins searching for the optimal survival-rescue strategy to protect itself from destruction. This is how the mechanisms of self-defense in the psyche function, and it is based on this regularity that the content of our original development is built.

That is, in the implementation of the "Trauma Metamorphosis" program, the priority role of consciousness in performing regulatory activities for processing traumatic experience, searching for new meanings capable of determining a positive orientation towards the future, and thus ensuring a constructive path for overcoming trauma, contributing to ecological, relatively rapid, and productive personal growth, is emphasized. Therefore, the "Trauma Metamorphosis" program proves that psychological trauma can promote productive changes, acting as the starting point for personal and spiritual development.

In the article by S. Lуппо, "Strategies for Overcoming Psychological Trauma" are outlined. Thus, a person who experiences trauma resorts to

the so-called hierarchical pyramid of psychological defense mechanisms, namely:

- Higher-level defense mechanisms – repression, suppression, psychic compression (anapsiosis) and its partial expression – emotional numbness; rationalization, intellectualization, certain types of projection, such as attributional, autistic, and rational projection, can also be attributed to this level;

- Lower-level defense mechanisms – in particular, retreat into fantasies, religiosity, denial;

- Lowest-level defense mechanisms – so-called "primitive" defense mechanisms: devaluation, idealization, personalization, projective identification, and dissociation (splitting) [2].

Let's delve deeper into the concept of the "Trauma Metamorphosis" program. As is known, symbols and associations make complex psychological concepts more understandable for awareness, and imagination and abstract form help distance oneself from a stressful event, making it easier to process traumatic memories. Just as C.G. Jung's approach to working with metaphor – through fairy tales, sandboxes, mandalas, and the interpretation of archetypes – so too does the metaphor in the later direction of positive psychology by N. Peseschian, through parables, positive reintegration, and a cross-cultural approach – all these ideas are aimed at the healing power of metaphor, the limitless resource of imagination, and the powerful potential of the human psyche.

It should be emphasized that metaphors stimulate the search for unconventional solutions when familiar and logical answers no longer work. The use of images strengthens the connection and quality of communication between the affected person and the therapist, creating a shared language for deeper understanding of complex emotional states, inner conflicts, cognitive traps, behavioral patterns, and making the healing process more effective and emotionally safe. Moreover, in working with metaphor, both the client and the therapist gain insights, experience catharsis, and a sense of balance.

Let us delve further into our own understanding of the concept of "Fantastic Reality" (FAR), as it is a "seemingly" space where any "what if" is possible. This psychological heuristic offers a new world where there are no limitations of the real world, such as time, place, and role. Thus, time can be shortened or stretched, and the place can simultaneously be in the therapeutic room and in any other space. The patient can simultaneously be themselves and play another role.

The positive side of fantastic reality is the connection between the infinite ability of creative imagination to create a world view, either desired or necessary, and the actions that are taken to solve the problems of reality in the shared therapeutic space. The movement from reality to fantastic reality occurs for the sake of overcoming, not through avoidance of real life. This holds the main therapeutic meaning of the method [10].

Thus, "Fantastic Reality" is, at first glance, a contradiction, a dichotomy, an absurdity; however, children easily and effortlessly move between reality and imagination. This is because children have an internal plan of action, immediacy, and curiosity. For knowledge begins with wonder, and sometimes simple wonder gives birth to an original discovery. Adults, although they prefer to hide their journeys in imagination, still, according to various studies, spend over a third of their waking time daydreaming, having imaginary conversations, fantasizing about future vacations, or imagining a repeat of a past date with a loved one.

It should be noted that the ability of the psyche to travel in imagination is a mechanism that allows us to temporarily detach from a terrifying event that threatens life. This feature of consciousness – to detach, to dissociate – is known to us from the words of survivors of rapes and torture, prisoners, captives, and hostages.

The normal inclusion of unconscious defenses (including primitive ones) in abnormal conditions of existence is confirmed by many data. It can be assumed that such a protective strategy is universal. This can be judged based on the analysis of numerous documentary sources describing the psychological experiences of prisoners of war. For example, V. Frankl, describing the shock reactions of "abnormal experiences" in concentration camp prisoners, caused by the horror of being sent to a concentration camp, gas chambers, and the proximity of death, noted that only through the inclusion of a protective mechanism such as personality dissociation, were prisoners able to maintain their mental stability in the first days and weeks of being in the camp. Dissociative protection helped them realize the necessity of "putting a line under their former life", and then other unconscious defenses were activated: a kind of emotional "numbness" occurred, dulling of the senses, a decrease in the level of affective life, which resulted in everything that happened only reaching consciousness in a muted form [2].

In contrast, "Fantastic Reality" helps the imagination "go the path of goodness", imagining a beautiful and bright future, resorting to optimistic forecasting, and invoking the "Pygmalion effect".

Quoting the thoughts of Hilgred in Herman, we fully agree with the statement that "<...> these conscious situations can be viewed as one of the small graces of nature that protect from unbearable pain <...> conscious distancing situations resemble a hypnotic trance. In both cases, there is a rejection of voluntary actions, suspension of initiative and critical judgment, subjective distancing or calm, strengthening of image conceptualization, changes in feelings, including emotional numbness, pain relief, distortion of reality, including detachment from oneself, detachment from reality, and a change in the sense of time".

We are in agreement with how D. Winnicott refers to the psychological space where positive, full experiences occur, calling it the "potential

space". According to Winnicott, play happens in the intermediate space between the child's inner and outer worlds, between reality and imagination. Winnicott asserts that the true "self" becomes apparent at the point where reality and dreams meet, and the obligation to adapt is not mandatory.

An important contribution to our research is the work of Dr. Nira Kaplan-Sky, who studied the connection between the ability to transition to fantastic reality and post-traumatic stress disorder (2007). The researcher found that children who "practiced" the transition to Fantastic Reality and whose parents encouraged creative activity developed resilience in extremely threatening situations. Creative individuals with high levels of creative potential unconsciously sublimate into poetry, art, painting, singing, dance, thereby healing their wounded soul from trauma, which a more pragmatic and rigid individual might experience destructively, even leading to clinical depression and suicide.

Let us analyze the semantics of the concept of "metamorphosis". The term "metamorphosis" has roots in mythology, where it symbolized the transformation of one object or being into another through magical or divine forces. For example, Hercules, having worn the poisoned cloak, felt incredible pain, but as a result of the metamorphosis, his body became immortal. The Phoenix bird burned in fire, but was reborn from the ashes, while the fire-breathing dragon Zmey Gorynych grew new heads in place of the severed ones.

In the modern world, the concept of "metamorphosis" is used in various contexts. One of the most well-known examples of metamorphosis in nature is the transformation from caterpillar to adult butterfly. In the technological sphere, metamorphosis can manifest in the transition from old analog technologies to modern digital innovations. In art, it may refer to the shift in style from realistic paintings to abstraction or experiments with various materials. In the cultural context, it is the change of cultural customs, traditions, or identity through the process of globalization. In an individual's life, it can be a change in professional direction, a move to a new location, or relationships transitioning from one stage to another.

Metamorphosis of trauma, in our understanding, is a complex process of personality transformation after encountering a hyper-extreme event – traumatic irradiation. In fact, 70% of people are capable of undergoing the process of metamorphosis on their own, while the remaining 30% get stuck at a certain stage of traumatic transformation, leading to psychological disorders. Therefore, in our opinion, the metamorphosis of trauma can develop along two trajectories:

1. Negative trajectory – mental, emotional, and behavioral disorders, including post-traumatic stress disorder (PTSD).
2. Positive trajectory – resilience, post-traumatic growth (PTG).

Followers of the existential approach in psychology are convinced that any trauma carries a loss. This can

be the loss of a loved one, a part of one's identity, meaning, or worldview. In each case, the reaction to the loss is grief, through which a person reconciles, as much as possible, with what has happened and rebuilds a new self. A person is unprepared for loss: such an event knocks them off their life path, turning the world "upside down". At the same time, prolonged staying at a certain stage of mourning and improperly experiencing it from a psychological perspective leaves an imprint of this stage on the entire subsequent life.

Grief is a reaction to the loss of a significant object, a part of identity, or an expected future. A common approach to studying grief, proposed by J. William Worden, includes four tasks that must be completed for normal grieving – this serious inner work is understood under the term "grief work", introduced into science by S. Freud.

Therefore, to overcome the grief of loss, a person must go through a certain path, following a specific algorithm:

1. Acknowledging the fact of the loss.
2. Experiencing the pain of the loss.
3. Adjusting the environment where the deceased is no longer present.
4. Developing a new attitude towards the deceased and beginning to live.

Loss encompasses many different emotions – anger, sadness, resentment, guilt, and even, ultimately, joy. In contrast, depression is characterized by the absence of feelings, which makes full "mourning" impossible. But suffering can only be overcome by experiencing suffering. That is, suffering or "grief work" (E. Lindemann) is a natural process necessary to mourn the death of a loved one, experience the loss, become independent from the trauma, adapt to the realities of life, and find new relationships with people and the world.

The concept of "metamorphosis of trauma" is based on the dual (twofold) model of experiencing loss. In this sense, any psychological trauma leads to the experience of loss – everything that existed before the traumatic event: basic illusions, beliefs, worldview, physical objects, or subjects, etc. This model describes two parallel processes that occur in those who experience loss:

1. The process focused on the sense of loss, the immediate experience of grief, touching on pain, sadness, and all painful feelings related to the loss.
2. The process focused on restoring a new, full, everyday life, aimed at distraction from grief, building new relationships, and ways of living.

Thus, the process of metamorphosis of trauma is individual in its course and duration. Post-traumatic transformation, whether along a positive or negative trajectory, can occur in just a few days, but may require many years of personal remission and psychological intervention.

We propose a new concept, which is one of the components of "Metamorphosis of Trauma" – "Traumatic Radiation". We see it as a psychological

process that reflects the hyper-extreme impact of a traumatic event on a person's psyche and can manifest in the form of mental radiation (intrusive memories, flashbacks, nightmares), emotional radiation (feelings of guilt, hopelessness, emotional detachment), physiological radiation (hyperactivation, constant tension, sleep disturbances), and a zone of alienation (avoidance of certain places or people). Similar to radiation exposure in medicine, traumatic experiences in a person's life can have not only negative but also positive consequences: it destroys destructive patterns and becomes a catalyst for positive transformation of the personality.

We also introduce the concept of "Restructuring Traumatic Experience". This is the process of changing negative cognitive patterns that arise after trauma. It includes identifying automatic negative thoughts, analyzing their validity, forming alternative, more adaptive thoughts, and reinforcing new constructive cognitions while abandoning destructive ones (using the concepts of "Cluster of Beliefs" in MDR and "Thinking Traps" in REBT).

Another component of the author's program "Metamorphosis of Trauma" is the concept of "Positive Conversion". This is the process of transforming and converting the negative consequences of trauma into constructive personal changes and growth. Positive conversion is based on three components of the program: fantastic reality (FAR), cognitive-behavioral therapy (CBT), and recreational forms of psychotherapy: adventure psychotherapy, forum theater, and virtual reality.

The most unique and effective component of the program is what we consider "Personalized Navigation" – an individualized approach that combines the "Resilience Model – BASIC Ph", methods of restructuring cognitive distortions, time management, and coaching. It begins with accepting the traumatic experience as part of life history and integrating it into the life map, directing the individual toward the restoration of positive self-perception, mastering new strategies for overcoming problems, recognizing and managing emotions, forming or strengthening social connections, as well as identifying new values, beliefs, priorities, goals, and personality orientations.

Conclusions. Thus, one of the main tasks of a psychologist dealing with the consequences of psychological trauma (both acute and chronic) is to help a person: recognize that their coping mechanisms for trauma are ineffective; weaken maladaptive processes that prevent access to resources ensuring adequate psychosocial functioning; activate the individual's internal activity necessary to expand their own arsenal of constructive ways to overcome trauma. These strategies form the foundation of our author's program "Metamorphosis of Trauma", presented in this article. Our next investigations will focus on specific methodologies and exercises of the program.

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