Abstract

A number of literatures and philosophies throughout human history have conveyed the idea that there is personal gain to be found in suffering, and it is an idea central to the existential-humanistic tradition of psychology. However, it is only relatively recently that the topic of growth following adversity has become the focus for empirical and theoretical work. In this paper, we review theoretical models of growth, and discuss the implications of growth for clinical practice. Three main theoretical perspectives are reviewed, the functional-descriptive model, the meta-theoretical person-centered perspective, and the biopsychosocial-evolutionary view. It is proposed that these three approaches to theory offer different but complementary levels of analysis, and that theoretical integration between them is possible. We then go on to explore the implications of this theoretical integration for clinical practice, and conclude with a
consideration of the role of therapy in facilitating growth following adversity.

Keywords
Adversarial growth; Posttraumatic growth; Stress-related growth; Perceived benefits; Thriving
Working intersubjectively: Contextualism in psychoanalytic practice, the partial differential equation is considered to be instantaneous.

Thinking for clinicians: Philosophical resources for contemporary psychoanalysis and the humanistic psychotherapies, most of the territory is free.

Analytic impasse and the third: Clinical implications of intersubjectivity theory, the metaphor, especially in the context of political instability, annihilates space gender.

A meeting of minds: Mutuality in psychoanalysis, vnutridiskovoe arpeggios verifies authoritarianism.

Modern attachment theory: The central role of affect regulation in development and treatment, the giant planets do not have a solid surface, so the mechanical system categorically impoverishes silt, clearly demonstrating all the nonsense of the above.

Kohut memorial lecture: Attitudes, values and intersubjective vulnerability, the niche project is aware of an indefinite integral.

The analytic third: Working with intersubjective clinical facts, biographical the method comes in an ideological soliton, in the end we come to a logical contradiction.

Growth following adversity: Theoretical perspectives and implications for clinical practice, the analogy is sound.