

The Mind as a Creator: Tagore, Trauma, and the Truth in Healing

*Contemporary psychology defines trauma as a lasting emotional or cognitive response to distressing events, yet it rarely acknowledges how trauma transforms the self's fundamental relationship with reality. Drawing on Rabindranath Tagore's essay *The World of Personality*, this paper applies his relational model of perception to recast trauma not only as a psychological wound, but as a disruption of the ontological and aesthetic exchange between inner awareness and outer existence. With Tagore's philosophy and the broader Indian, spiritual understanding of human psychology, reality is no longer fixed or objective, but co-created with the personality of the perceiving self. When trauma occurs, this creative dialogue may stagnate, dimming one's perception and engagement with life. Consequently, healing can be understood as a fundamentally relational and holistic process, where the self's relationship and communion is restored to find the ultimate truth and beauty in existence. This theoretical reframing challenges the WEIRD model of trauma-treatment and invites a cross-cultural dialogue, bridging philosophy, art, and clinical practice.*

Keywords: *Trauma; Relational ontology; Tagorean philosophy; Rabindrik Psychotherapy; Post-traumatic growth.*

Introduction

According to DSM-5 Diagnostic Criteria, trauma can be defined as an exposure to actual or threatened death, violent, or sexually disturbing experiences, all causing lasting negative impact on one's mental and physical health (American Psychiatric Association, 2013). The primary focus of trauma-treatment is repairing the internal wounds caused by such events, like cognitive reprocessing, emotional dysregulation, or memory fragmentation (Wilde, 2021). Within this framework, the external world is assumed to be fixed, objective, and separate from the individual. Thus, it remains outside the scope of healing, creating a breach between the internal and the external. If left unaddressed, this separation may build a sense of loss, isolation, and distrust.

Rabindranath Tagore, a polymath of the Bengali Renaissance period and the first Asian to receive The Nobel Prize in any category, explores this idea in *The World of Personality*, published within a series of his essays and lectures called *Personality* (Tagore, 1917, pp. 55–97). According to Tagore, the individual is not a passive recipient of outside experiences, but an active co-creator of their reality; serving as a consumer and an interpreter of the full spectrum of human experiences. Throughout various essays in *Personality*, Tagore uses the term *Jagat*, meaning "the moving one" for *the world*, further emphasizing the ever-evolving and relational nature of reality and its relationship with the self. On this premise, trauma is no longer just an internal psychological wound, but a fracture in one's relationship with the world, stagnating the pace, nature, and beauty of its development (Banerjee, 2021).

This paper argues that Rabindranath Tagore's *The World of Personality*

1 redefines the Western understanding of trauma and its clinical implications for
2 healing (Tagore, 1917). More specifically, it can reframe traumatic experience as an
3 ontological and aesthetic disruption that alters one's mental state internally as well
4 as externally, in their co-creative relationship with the world. This is especially
5 related to growing cultural individualism and social isolation, where the gap
6 between the self and the world is not only a symptom of trauma, but a condition of
7 modern life (Das, 2025).

8 This research paper, situated at the intersection of cross-cultural psychology
9 and Indian philosophical thought, primarily draws on Tagorean literature and
10 humanism with the addition of Eastern spiritual frameworks and Western clinical
11 studies. It offers a holistic view on post-traumatic healing beyond the WEIRD
12 (Western, Educated, Industrialized, Rich, and Democratic) paradigms that dominate
13 contemporary psychology practices (Henrich et al., 2010). This paper does not seek
14 to invalidate the latter, but rather to expand it through a broader, interdisciplinary
15 and intercultural dialogue.

16 Organized into four sections, the paper begins by contrasting mainstream
17 understandings of trauma with Tagore's relational ontology, reviewing existing
18 trauma studies and therapeutic approaches. This synthesis includes Tagore's
19 philosophy and spiritual insights as well as Rabinrik Psychotherapy, exemplifying
20 an emerging pathway to holistic recovery. Having established the scholarly
21 foundation, section three is a discussion on how traumatic experiences can trap the
22 self in a fragmented relationship with the world. The discussion explores how
23 genuine healing is not a restoration of the pre-traumatic self but a transformation
24 towards a more complete and relational existence. The final section serves as a
25 conclusion, calling for a more inclusive discourse between Eastern and Western
26 psychological frameworks and therapeutic practices in the study and treatment of
27 trauma.

30 Literature Review

32 *The Relational World*

34 Contemporary psychology is increasingly challenging the assumption that
35 reality is passive, fixed, or objective for all individuals. Instead, it is taking on the
36 idea of a fluid and dynamic exchange of information between the observer and their
37 environment, through which truth and meaning are co-constructed (Călinescu,
38 2025). One of the earliest authors of this perspective is Rabindranath Tagore, who
39 described the complete human experience as the one that situates consciousness
40 within a broader "web of life," drawing meaning from interaction, relational unity,
41 and creativity (Banerjee, 2021). As Tagore argued, humans possess a unique
42 "surplus" or "excess," known as *atirikta*, which reflects their creative capacity,
43 allowing transcendence from a purely biological existence into a spiritually and
44 artistically developed one (Skorokhodova, 2025). Through this lens, Tagore
45 portrayed people not merely as observers of reality but as active architects and
46 contributors to the ongoing formation of it. As he stated, in a series of essays,

1 *Towards Universal Man*, the agency of an individual as a creator is to “serve as a
 2 vehicle of culture” or “mirror of the anguish of their era” (Rabindranath Tagore,
 3 1961, pp. 231-252). This creative and cultural agency serves as a fundamental
 4 function for situating the individual within a shared narrative – transforming their
 5 subjective experience into collective meaning and anchoring the self within a
 6 broader relational and existential web. For Tagore, it is precisely this integration –
 7 in art, meaning-making, or communal life – that constitutes the fullest expression of
 8 selfhood.

9 Post-classical sciences echo Tagore’s relational ontology, as well. For example,
 10 quantum mechanics’ concepts such as wave-particle duality, superposition, and
 11 entanglement, challenge the idea that objects exist with pre-determined physical
 12 states (Călinescu, 2025). Within this framework, the act of observation in itself
 13 influences the physical system, a phenomenon commonly referred to as the
 14 “observer effect.” This suggests that the observer is not entirely separate from the
 15 phenomena being observed, inviting a direct reconsideration of the relationship
 16 between inner consciousness and outer reality. Truth may, therefore, be viewed as
 17 multidimensional, encompassing intellectual, emotional, social, and vibrational
 18 cores, rather than existing as a singular and purely objective construct (Călinescu,
 19 2025). This idea strongly aligns with Tagore’s vision of a “complete human being,”
 20 who recognizes their unity with the world and understands their surroundings
 21 through subjective and relational observation (Kumar, 2017).

22 Tagore’s relational ontology parallels the constructivist approach in political
 23 science, which emphasizes that individuals can interpret and develop reality through
 24 their cognitive, emotional, historical, or cultural frameworks, all leading to “the
 25 world of our making” (Lowndes et al., 2017). The psychological concept of “the
 26 looking-glass self” – first articulated by Cooley (1902) and since developed across
 27 sociological and psychological traditions – suggests that identity and reality are
 28 fundamentally shaped by external perception and societal roles. Humans have a
 29 habit of internalizing the beliefs others hold about them, creating either an
 30 empowering or disturbing self-fulfilling prophecy for their subjective worldview.
 31 Whether it’s the psyche’s way of confirming its own idea of the truth, “the observer
 32 effect” in quantum mechanics, or relational ontology of Tagore’s philosophy, the
 33 conclusion remains the same – the world is fundamentally multifaceted, fluid, and
 34 interactive with its inhabitants.

35 *Defining Trauma: From A Psychological Injury to Ontological Collapse*

36
 37
 38 Clinical psychology, particularly within DSM-based diagnostic frameworks,
 39 defines trauma as a severe disruption in memory processing, emotional regulation,
 40 and psychological functioning, following deeply distressing, or life-threatening
 41 events (Bajpai, 2025). This definition reflects the evolution of diagnostic categories,
 42 from the initial concept of “gross stress reaction” in psychiatric manuals to Post-
 43 Traumatic, as well as the Complex Post-Traumatic Stress Disorders in ICD-11 and
 44 DSM-5. Overall, the consensus is that prolonged stressors, such as abuse,
 45 displacement, or war, can profoundly disrupt self-identity, interpersonal
 46 communication, and openness towards new experiences (Zoromba et al., 2024). As

1 the majority of negative effects caused by trauma are assumed to be internal, the
2 mainstream therapeutic approaches naturally focus on internal solutions as well.
3 Cognitive Behavioral Therapy (CBT), developed by Dr. Aaron Beck, focuses on
4 modifying maladaptive thought patterns while the psychoanalytic approach,
5 pioneered by Sigmund Freud, explores conflicts between the conscious and the
6 unconscious through techniques such as free association or dream analysis (Dutta
7 & Dey Tapader, 2025).

8 More recent research and theory suggest that trauma extends beyond these
9 internal psychological symptoms, disrupting the very foundation of human
10 experience, such as assumptions about temporality, intersubjectivity, or
11 predictability of reality (Wilde, 2021). Biological research supports this argument
12 too. Studies in epigenetics demonstrate that chronic psychological stress can
13 produce lasting changes in gene expression (Mazzoni et al., 2025). Mechanisms like
14 DNA methylation in the brain regions associated with memory and emotional
15 processing, such as the hippocampus, can directly impair the nervous system. These
16 changes, in turn, can also affect the integration of traumatic experiences into one's
17 autobiographical memory, causing an incoherent sense of identity or narrative
18 continuity (Wilde, 2021).

19 Beyond the individual perception and sensory experiences, what counts as
20 traumatic is further defined by the broader social and cultural backgrounds; shared
21 meanings, norms, and historical conditions all influence how traumatic events are
22 interpreted. This encompasses the “socio-political layer” of the self, emphasizing
23 the collective-generational implications of trauma (Wilde, 2020). Anthropological
24 research supports this idea with “collective aphasia,” a phenomenon where
25 communities respond to catastrophic historical events through silence or
26 suppression of shared narratives (Das, 2024). For instance, in the aftermath of the
27 1945 Partition in India, the majority of survivors avoided verbalizing their
28 experiences as a defense-mechanism against a “collapse of [their] moral universe”.
29 Literary representations of trauma also illustrate this ontological disruption. For
30 example, in Saadat Hasan Manto's short story *Toba Tek Singh*, the trauma of
31 displacement becomes so absolute that the boundaries between personal identity and
32 geography dissolve (Das, 2025). This culminates in the protagonist's death in a “no-
33 man's land” that symbolizes the ultimate rejection of arbitrary political, social, or
34 cultural identities.

35 From a developmental perspective, traumatic events can lead to the
36 construction of a “false self,” a form of protective facade, designed for meeting the
37 expectations of a given context (Winnicott, 1965). Examples of this phenomenon
38 may include: “The Hero” – A child who prematurely becomes cheerful or strong to
39 save a depressed parent, burying their own needs and fears as a consequence. “The
40 Perfectionist,” who adopts rigid behavioral patterns to avoid being disappointed or
41 abandoned. And “The Schizoid Retreat,” who dissociates from overwhelming
42 feelings and memories to survive a “timeless, objectless, and selfless nightmare of
43 pain.” While these defense-mechanisms enable survival, they frequently result in
44 long-term feelings of emptiness, alienation, or inauthenticity (Winnicott, 1965). A
45 clinical case study of Olivia from the book *A Relational Perspective on*
46 *Psychological Trauma*, illustrates how one may even achieve high professional

1 success and social recognition while overcoming a “chronic sense of emptiness” or
 2 feeling “fundamentally flawed and unloved” (Athanasiadou-Lewis, 2019). Olivia’s
 3 identity, built on compliance and perfectionism, rather than authenticity, disrupted
 4 the creative dialogue between the self and the world that Tagore theorized in *The*
 5 *World of Personality* – leaving her relational engagement with existence fragmented
 6 and stagnant (Tagore, 1917).

7 As a final point, trauma may also manifest itself through behavioral patterns
 8 where unresolved conflicts are unintentionally repeated. Freud described this
 9 phenomenon as “repetition compulsion,” when individuals re-enact traumatic
 10 experiences in an attempt to gain mastery or closure of the situation (Freud, 1920).
 11 During this process, one acts as if the traumatic experience is still present, replacing
 12 a sense of potential safety or an opportunity for growth, with an anticipation of
 13 threat. Contemporary psychological approaches view these patterns as attempts of
 14 *failing* to restore coherence and harmony within one’s identity and relationships.
 15 Trauma, then, fractures not only the internal state but also the self’s capacity to
 16 engage meaningfully with the external world – its present relationships and future
 17 possibilities alike. The question that follows is not whether healing is needed, but
 18 what form must it take. An emerging psychotherapy, combining all of the above-
 19 mentioned practices with Tagorean understanding of relativity can meaningfully
 20 answer this inquiry.

21 22 *Holistic Healing Practices – Rabindrik Psychotherapy*

23
24 Rabindrik Psychotherapy (RPT), is a performing arts-based therapeutic model
 25 developed by Dr. Debdulal Dutta Roy at The Indian Statistical Institute (ISI) in July
 26 of 2018. Inspired by Tagore’s literary, musical, and artistic legacy, RPT integrates
 27 aesthetic expression with psychological well-being, aiming to restore harmony with
 28 the broader flow of human consciousness (Dutta & Dey-Tapader, 2025). This
 29 framework defines the latter as an “unbounded, free-floating wave of awareness,”
 30 similar to how it was portrayed in Tagore’s poetry collection *Shyamoli* from his older
 31 creative period (Tagore, 2022). The RPT model views psychological distress,
 32 including trauma, as a form of “turbulence,” where an accumulation of negative
 33 emotions can create a state of disequilibrium or discomfort. Consequently, achieving
 34 a healed psychological state requires “laminar flow,” characterized by emotional
 35 balance, pleasantness of mood, and internal stability (Dutta & Dey-Tapader, 2025).

36 Central to RPT is the concept of Layer Dynamics, which identifies three
 37 interconnected levels of awareness (Mitra, 2025). The first layer, *Murta*, represents
 38 the structural and sensory dimension of experience, where individuals perceive the
 39 external world through direct and physical means. The second layer, *Raag*,
 40 corresponds to the emotional dimension with feelings, attachments, and affective
 41 responses. And the third layer, *Saraswat*, represents the deepest, innermost state of
 42 total harmony of the self and the surrounding world. Trauma survivors often become
 43 trapped within the *Murta* and *Raag* layers, reacting through sensory triggers and
 44 being overwhelmed by emotional turbulence, without ever reaching the *Saraswat*
 45 state of awareness (Mitra, 2025).

46 To facilitate the transition between the three layers, the RPT model employs

1 “buoyant flow,” described as an upward movement of suppressed emotions and
 2 desires with creative engagement (Mitra, 2025). Positive metaphors or mental
 3 imagery, all drawn from Tagore’s dances, songs, dramas, and paintings, provide a safe
 4 space for expressing and transforming internal emotional states. Music plays a
 5 particularly central role here. The body of songs composed by Tagore, *Rabindra*
 6 *Sangeet*, is frequently used as an auto-suggestive symbol of reconstructing cognition.
 7 Tagore’s collection of *Geetobitan*, functions similarly to the latter, with patients
 8 selecting and interpreting songs that resonate with their internal conflicts. Through
 9 these musical discussions, patients gain insight into their unresolved emotional
 10 struggles and reconstruct the “disease semantics” that shape their internal, cognitive
 11 narratives (Mitra, 2025). By combining vocalization, rhythmic movement, and
 12 musical engagement with Tagorean compositions, even the individuals experiencing
 13 severe conditions, such as obsessive-compulsive disorder (OCD) or neurotic
 14 depression, show significant improvement in shifting their consciousness from the
 15 emotional dimension of *Raag* to the harmonious *Saraswat* layers.

16 Rabindrik Psychotherapy strongly connects to the Post-Traumatic Growth
 17 (PTG) framework, developed by Tedeschi and Calhoun (1996), which proposes that
 18 individuals can experience profound positive transformation following adversity –
 19 not despite suffering, but through meaningful engagement with it (Banerjee, 2021).
 20 With this combined approach, healing is not as simple as returning to the pre-
 21 traumatic state, but as transformation to a more complete form of existence. To
 22 illustrate, an individual who has experienced a significant failure or loss may,
 23 through creative and relational engagement, develop a deeper sense of purpose,
 24 expanded empathy, and renewed connection with others. This is what RPT
 25 identifies as hallmarks of growth and what Tagore would recognize as the
 26 awakening of one’s role as *Viswakarma*, a universal worker whose fundamental
 27 responsibility is the act of creation (Kumar, 2017). This process of transformation
 28 is essential for reaching *Milan* (concord) and *Samanjaysya* (harmony), and
 29 connecting with the “spirit of life,” the unity of all forms of existence that mark the
 30 self’s fullest realization (Banerjee, 2021).

31 Taken together, Rabindrik Psychotherapy proposes a holistic pathway to
 32 healing, in which aesthetic expression, spiritual reflection, and relational awareness
 33 converge (Skorokhodova, 2025). Individuals are encouraged to reinterpret their own
 34 psychological and existential boundaries – the perceived limits of self, identity, and
 35 belonging that trauma often rigidifies – not as fixed barriers that separate the self
 36 from others, but as permeable thresholds through which meaning, empathy, and
 37 relational exchange can flow. In practice, this may involve open expression of
 38 internal suffering with performing arts therapy, or everyday encounters that restore
 39 a sense of shared humanity. Through this process, the boundary between the self
 40 and the world becomes not a wall, but a meeting point. Recovery, therefore,
 41 develops from an integration of individual suffering into the collective
 42 understanding of human existence, echoing Tagore’s vision of a “one world”
 43 (Kumar, 2017).

44 As a whole, the existing literature shows that the world’s relational nature and
 45 engagement with the self can be fractured by traumatic experiences in various ways.
 46 Dominant Western frameworks, particularly those rooted in DSM-based models of

1 PTSD, tend to locate both trauma and recovery within the individual – positioning
 2 the suffering self as the primary side of diagnosis and symptom reduction. While
 3 clinically valuable, this approach risks leaving the individual relationally isolated,
 4 measuring recovery by the diminishment of internal symptoms rather than by the
 5 restoration of one’s communion with the world and others. Tagore’s relational
 6 ontology offers a fundamentally different horizon where healing is no longer a
 7 return to the pre-traumatic baseline, but an expansive reintegration – of the self and
 8 the world, of the individual suffering and collective human experience. The
 9 following section will explore how applying this relational framework reveals the
 10 deeper, holistic truth underneath recovery from traumatic experiences.

11

12

13 Discussion

14

15 *The Paradox of Stars: A Tagorean Perspective on Trauma*

16

17 The stars are standing still in the night sky, but only for those who are too far
 18 from them. Scientists would argue that as one gets closer, the stars will be actively
 19 moving. This paradox is how Tagore’s *The World of Personality*, one of the many
 20 lectures delivered in the U.S., begins to observe the conflict between scientific
 21 reasoning and personal, relational model of truth. According to Tagore’s poetic
 22 understanding, the claim that stars are “rushing about” only proves that the observer
 23 is “too near them” (Tagore, 1917, pp. 55–60). He supports this by noting scientific
 24 inconsistencies from the past, such as the “too-near view” of the Earth being flat,
 25 which was later corrected by a more “distant perspective” to find the complete truth.

26

27 To resolve the paradox, Tagore concludes by stating that the apparent stillness
 28 and the measured movement of stars are not contradictory, but rather master truths
 29 of dialectic logic. If seen from a far distance, the stars do appear like “chains of
 30 diamonds hanging on the neck of some goddess silence,” remaining truly unmoved.
 31 However, if astronomy “plucks out individual stars” and examines them from the
 32 lens of mathematics, they are found to be moving (Tagore, 1917, pp. 61–69).
 33 Choosing one side to criticize the other only hurts the ability of understanding both
 34 perspectives, as well as the higher meaning. Here, Tagore cites the *Ishopanishad*, a
 35 key scripture of the Vedanta sub-schools of Hinduism, “It moves. It moves not. It is
 36 distant. It is near” (Śaṅkarācārya & Shukla, 1999, verses 3–8). The stars, therefore,
 37 are only one example of the dialectic logic of perception. The key takeaway is that
 38 the stars are both still and moving, depending on where *the individual* stands upon
 39 perception. This reinforces the idea that the world is neither objective or separate, but
 40 rather a direct reflection of the individual’s personality. Moreover, as Tagore states,
 41 such relational understanding of the world is like a poem or a work of art – an
 42 expression of one’s personality – implemented through a “silent meeting of a soul
 43 with soul” (Tagore, 1917, pp. 77–97). In light of this, trauma could also have an effect
 44 on an individual’s meaning of existence and their perception of external reality.

44

45 With the mind serving as the principal element of creation, actively engaging
 46 the self with the world in given time and space, the effect of a traumatic experience
 47 would not just be a collection of symptoms but rather a fundamental dislocation of
 the mind’s principal role in the process of co-creation. Mapping the duality of

1 Tagore's paradox of the stars onto the contemporary debate between biomedical and
 2 relational models of trauma could highlight two sets of truths. On the one hand, the
 3 scientific "near view" of trauma may focus on the specific biological or cognitive
 4 markers, such as hormonal imbalance, memory fragmentation, or PTSD symptom
 5 clusters (Mazzoni et al., 2025). Although this would be true, Tagore argues that
 6 substituting laws for personality causes the world to "crumble into abstractions"
 7 where things become "nothing at all" (Tagore, 1917, pp. 55-97). On the other hand,
 8 the "distant view" can perceive trauma as an ontological rupture, shattering an
 9 individual's "horizon of possibilities" and "habitual confidence" in a safe world
 10 (Wilde, 2020).

11 Consider, for instance, a survivor of prolonged relational trauma who can no
 12 longer experience intimacy as anything other than a precursor to harm. Their
 13 perceptual world has narrowed to a single, repeating meaning, stripping
 14 relationships of their complexity and potential for growth. As Tagore and other
 15 constructivist philosophers point out, if the "world is what we perceive it to be," then
 16 the traumatized mind becomes a fractured instrument of creation (Lowndes et al.,
 17 2017). This is precisely what such a survivor illustrates: reality itself is no longer
 18 co-created but compulsively pre-interpreted, turning the dynamic exchange between
 19 the self and the world into a fixed and defensive script. Additionally, if one's
 20 perception comes from the "central creative power" of personality, the reality itself
 21 – a meeting point where "infinite becomes finite" – would also come to be
 22 inconsistent and fragmented (Tagore, 1917, pp. 55-97). This connection between
 23 the dialectic view of traumatic experiences suggests a fundamental rupture between
 24 the mind as the creator and the world as an active, relational force. Additionally, it
 25 connects to a larger issue of what *disappears* when an individual becomes stuck in
 26 a "too-near view" of their pain, as well as what their full recovery from trauma
 27 should entail.

28

29 *Dimming the Light: The Loss of Beauty and Meaning from Trauma*

30

31 The damage inflicted by trauma extends far beyond cognitive or emotional
 32 symptoms, reaching the individual's capacity for experiencing life's aesthetic
 33 dimension. The beauty of the world fades; the sun may be shining, the flowers –
 34 blooming, and the people – full of humor and energy – can be beaming around. But
 35 the person who has experienced trauma unconsciously and uncontrollably fails to
 36 notice any of it. In phenomenological terms, this is not merely a psychological
 37 injury, but a "shattering of existence itself," where the world ceases to be beautiful,
 38 and instead becomes a source of pervasive threat (Wilde, 2021). This is also where
 39 the development of a "false self" begins, with adaptations such as the Hero, the
 40 Perfectionist, or the Schizoid Retreat (Athanasiadou-Lewis, 2019). These
 41 adaptations function not only as psychological defense mechanisms, but also as
 42 deeper survival strategies in a world that failed aesthetically and destroyed the sense
 43 of personal agency for one's own reality. New and fruitful experiences may come,
 44 but as the creative dialogue between the self and the world stagnates more and more,
 45 the individual stops "pouring itself" into new expressions and enters a "gloom of the
 46 sunless space" (Tagore, 1917, p. 87). The world is no longer a personal gift, but

1 instead, as Tagore would put it, a “stupendous deception” or “an unimaginable
2 shadow of nothingness.”

3 This aesthetic loss can expand to a collective and cultural dimension, as well.
4 When a society experiences a historical catastrophe, the trauma is not just an event-
5 based wound but a “vivisection” of the collective heart (Das, 2024). Consequently,
6 the shared ethical frameworks and human connections – what Tagore calls the “web
7 of life” – can be violently severed. In response, the traumatized society may
8 experience “collective aphasia,” a state of silence used as a psychological shield
9 against memories that can be too daunting to vocalize. This is especially true for
10 societies that never received acknowledgement of their status as ‘victims’ for the
11 experienced loss. For instance, when the 1947 Partition survivors faced
12 “whataboutism” from across the border, the validity of their narratives and the need
13 for cultural expression was completely silenced (Das, 2024). Moreover, if in a
14 healthy society, life moves in a “rhythm of relationship” that is beautiful and
15 dynamic rather than merely utilitarian, trauma can stall this rhythm and force the
16 people into a state of “inner exile.” Consequently, members of the society may begin
17 to experience a severed cultural identity and lose sight of possibilities for the future.

18 Understanding this collective dimension of trauma is vital because clinical
19 diagnostic models, such as DSM-5 or ICD-11, mainly focus on individual cases.
20 These models are inherently products of WEIRD epistemology, built on
21 assumptions of individualism, cognitive primacy, and internalized suffering of
22 human experiences (Henrich et al., 2010). Thus, missing the impact of systematic
23 violence, historical catastrophes, or mass displacement that define shared identities
24 of entire communities (Wilde, 2020). As a result, phenomena like “collective
25 aphasia” can be misinterpreted as cognitive deficits, rather than socio-cultural
26 survival strategies (Zoromba et al., 2024). The experience of indigenous
27 communities subjected to generational displacement offers a telling illustration –
28 their communal silencing of the traumatic memory is often pathologized by Western
29 clinical frameworks as ‘avoidance’ or ‘emotional blunting,’ when it, in fact,
30 represents a collectively negotiated form of protective and meaning-making
31 mechanism. Healing this collective wound requires a shift toward “one world”
32 thinking, a Tagorean ideal where the “problems of people become part and parcel
33 of the whole mankind” (Banerjee, 2021). This perspective also moves beyond the
34 “near view” of shared trauma to a “distant view” that recognizes the foundational
35 interconnectedness of human life (Kumar, 2017).

36 The clinical implications on this shift are profound: if trauma is understood as
37 an ontological and aesthetic wound that destroys one’s capacity for appreciating
38 beauty, meaning, and creative engagement, then purely cognitive or
39 pharmacological treatments will always remain incomplete (Zoromba et al., 2024).
40 For that reason, aesthetic therapies like Rabindrik Psychotherapy (RPT) are not
41 merely supplementary or alternative. Their approach would address the impact of
42 trauma at its core by targeting the shattered relationship between the self and
43 existence (Mitra, 2025).

44
45

1 *From Restoration to Transformation: Reimagining Trauma Treatment*

2
3 Those who simply cope with their trauma remain within the symptom-
4 management stage. They effectively use coping strategies to regulate their emotions,
5 maintain a positive self-esteem, and improve functioning in their daily life.
6 Although this is part of the recovery process, it is too focused on returning the
7 individual to the pre-traumatic baseline of being “normal” (Zoromba et al., 2024).
8 The symptoms can disappear with biomedical or psychoanalytic interventions –
9 such as pharmacotherapy or structured behavioral approaches like CBT and EMDR
10 – but the traumatized individual may nonetheless remain trapped in a detached and
11 flat perspective of their own history (Wilde, 2021). On the other hand, genuine
12 recovery can lead to Post-Traumatic Growth (PTG), a process of personal
13 transformation where an individual emerges into a more complete and relationally
14 grounded existence (Bajpai, 2025). This transformation is not uniform – it manifests
15 differently across personal and cultural contexts – but it commonly involves a
16 heightened sense of priorities, deeper and more intentional relationships, and a
17 revised understanding of one’s morality. Drawing on Tagore’s philosophy, this level
18 of healing is what brings the “round and continuous” idea of the world forward
19 (Tagore, 1961, p. 58). It enables the individual to move past the fragmented
20 “chapters” of their pain and perceive the broader master truth of existence. In
21 essence, this shifts post-traumatic healing from managing to *mending* the process. It
22 does not disqualify the power of traditional clinical practices, but it does initiate an
23 outlet of growth that can enable the individual to reconnect into their creative and
24 engaged self.

25 Rabindrik Psychotherapy (RPT) offers precisely this kind of mending rather
26 than managing, and its therapeutic logic is inseparable from Tagore’s understanding
27 of the mind as an active, creative force. If conventional therapeutic approaches
28 address the surface of trauma, RPT targets what lies beneath, offering aesthetic and
29 spiritual pathways for restoring the relationship between the self and the world.
30 Through Tagore’s literary imagery, RPT works as a performing arts therapy that
31 addresses emotional distress through real-time, object-oriented, and auto-suggestive
32 methods (Mitra, 2025). By facilitating a transition from the structural *Murta* layer
33 of sensory experiences, to the *Saraswat* layer of total harmony and equilibrium, RPT
34 gradually reopens the patient’s capacity for co-creation (Dutta & Dey-Tapader,
35 2025). This process is further strengthened by fostering sets of positive values in
36 patients, such as self-awakening, serenity, bravery, and enlightenment (Mitra,
37 2025). With performing arts therapy techniques, the patient releases unresolved
38 feelings and learns self-regulation, but the clinically distinctive aspect of RPT begins
39 specifically during the metaphysical stage of mind-body connection. In this
40 moment, the patient does not only recover from their traumatic experience, but
41 reactivates the capacity to find beauty in existence and believe in the personal power
42 of constructing their world.

43 From this perspective, post-traumatic growth is not a return into the previous
44 world the individual inhabited, but a *rebirth* of the mind as a creator. After
45 experiencing what Tagore describes as a “gloom of sunless space,” the healed self
46 carries something it did not have before – the knowledge that the world can be lost

1 *and* reclaimed. For this reason, genuine healing produces not only psychological
2 resilience, but also depth, which moves the individual into a more grounded,
3 relational, and creatively alive existence.

4 This paper does not claim that Tagorean philosophy resolves all questions
5 about trauma treatment. The argument that trauma leads to an ontological and
6 aesthetic rupture is mainly grounded in philosophical reasoning and cross-
7 disciplinary synthesis rather than measurable outcomes. Therefore, the theoretical
8 contribution offered here does not allow empirically falsifiable claims. Although
9 this is not an unusual position for theoretical scholarship, it does create a gap
10 between what the paper proposes and what clinical practitioners can immediately
11 implement. Furthermore, RPT remains in the early stages of development,
12 concentrated in culturally significant areas of Indian and Bengali regions, creating a
13 serious challenge in translating the approach to other parts of the world, or
14 integrating it into the mainstream diagnostic models. Nevertheless, these limitations
15 are not reasons to dismiss the framework, but invitations for future empirical and
16 cross-cultural research on trauma and holistic healing practices.

17 18 19 **Conclusion**

20
21 In summary, this paper has argued that Rabindranath Tagore's relational
22 ontology, drawn from *The World of Personality*, offers a distinctive and clinically
23 relevant framework for understanding trauma – not solely as a psychological
24 wound, but as rupture in the self's co-creative relationship with the world. When
25 trauma occurs, the mind's capacity to actively participate in constructing reality is
26 fractured, narrowing one's perception, severing relational bonds, and dimming the
27 sense of beauty or meaning in existence. Purely cognitive or biomedical
28 interventions, however, no matter how effective their symptom reduction may be,
29 cannot fully address this deeper ontological loss. What Tagore's philosophy
30 suggests to the dialogue is measuring health and well-being not only by the absence
31 of symptoms, but by the quality of the self's engagement with life. Rabindrik
32 Psychotherapy translates this philosophical insight into practice, offering a model of
33 healing oriented towards wholeness rather than baseline functioning. Future
34 research must determine how this restoration succeeds across cultural contexts and
35 whether its outcomes can be empirically validated. However, the broader
36 contribution of this paper is the argument that Tagore's vision of a relational,
37 creative self is not a philosophical curiosity confined in the Indian literary or cultural
38 traditions. It is a framework that speaks to something universal in humanity – the
39 need not to just survive, but to find, on the other side of suffering, a world worth
40 creating again.

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