



Coping after trauma Your guide to PTSD



An introduction to Post-Traumatic Stress Disorder (PTSD)



The term post-traumatic stress disorder (PTSD) describes a range of symptoms that people can develop in response to experiencing a traumatic event. Depending on the person, it can sometimes take weeks, months or even years for the symptoms to appear.

First Psychology has worked with many people with symptoms of PTSD. We've written this booklet to help people understand and recognise the symptoms, methods of self-help and the different ways in which professionals can help you make a recovery. We hope you find it helpful!



What is a traumatic event?

A traumatic event is one where we know we are in danger and feel that our life is threatened. It is often accompanied by feelings of fear and helplessness. It can be a single event or a series of events taking place over a period of time.

How common is PTSD?

PTSD is quite common – it is estimated that up to one in ten people may develop PTSD at some stage in their lives, and up to a third of people who experience trauma will have PTSD.

Who is more likely to develop PTSD?

While it is impossible to predict who will develop PTSD in response to trauma, there are certain risk factors that increase your vulnerability.

You are more likely to get PTSD when:

- · You were directly involved in the event
- You lost someone you were close to
- · The trauma was intense and lasted for a long time
- You were injured
- · You remained conscious during the experience
- · You had a strong reaction to the trauma
- You didn't feel in control of events
- · You didn't get enough help and support after the event
- You blamed yourself for what happened

The more disturbing the experience, the more likely you are to develop PTSD. Some groups of people are more at risk of developing PTSD after a distressing event. These include:

- Women
- Teenagers and children
- · Fire-fighters and other people working in traumatic environments
- · People already suffering from mental health problems
- People with recent and stressful life changes
- · People with prior traumatic experiences

Typical types of traumatic event that may lead to PTSD

- Violent crimes: stabbing, beating, kidnapping, rape and sexual violence, torture, domestic violence, sexual and physical abuse, being taken hostage, assault, robbery, mugging, witnessing violent death, terrorist attacks
- Accidents: witnessing/being in a car/train accident, plane crashes, work accidents
- Witnessing natural disasters: flooding, earthquakes, hurricanes
- **Health events:** traumatic childbirth, surgery, being diagnosed with a life-threatening illness
- Military combat
- · Sudden death of a loved one
- Childhood neglect

Even if you have not been directly involved in a traumatic event, you may still experience symptoms of distress comparable to those who were involved.



The difference between PTSD and a normal response to trauma

Common stress reactions after a traumatic experience

Following a traumatic event, almost everyone experiences symptoms of PTSD. These normal reactions to abnormal events help to keep you going and help you to understand the experience you have been through.

Common reactions after a traumatic experience are:

- Fear or anxiety You may feel tense or afraid, feel on alert and be jumpy.
- Sadness or depression You may lose interest in things you used to enjoy, feel tired, empty and numb, want to be alone all the time or have crying spells.
- Guilt and shame You may feel responsible for what happened, feel guilty because others were injured or killed and you survived.
- Anger and irritability You may overreact to small misunderstandings, have less patience, and lash out at close friends and relatives.
- Behaviour changes You may drink, use drugs or smoke too much, drive aggressively, and avoid certain people or situations.

This acute stress reaction usually lasts for a few days or weeks, but declines afterwards and symptoms start to disappear. If your reactions don't go away after some time and they cause you severe distress and disrupt your life, your body and mind remain in psychological shock. You may have developed PTSD and should seek help.



What are the symptoms of PTSD?

1. Re-experiencing (re-living the event)

Memories of the traumatic event can come back at any time as:

- Vivid flashbacks
- Nightmares
- · Intrusive thoughts and images
- · Intense distress at real or symbolic reminders of the trauma

These memories can be so realistic that they make you feel like you are living through the experience again. Ordinary things can bring back memories of the traumatic event, for example: a sound, a place or seeing someone who reminds you of the trauma.

2. Avoidance (avoiding memories)

You may try to avoid thoughts, situations, conversations, places, people, activities or anything that triggers memories of the trauma, because it is too upsetting to re-live the experience over and over again. You distract yourself by, for example, working hard or by losing yourself in a hobby.

3. Numbness

You may deal with the pain of your feelings associated with the trauma by becoming emotionally numb and therefore:

- · Feel detached and cut off from others
- Find it hard to express your feelings or to have loving and positive feelings towards others
- · Not be interested in activities you used to enjoy
- · Communicate less with other people
- Not talk and remember parts of the trauma
- Not engage in relationships

4. Hyperarousal (being 'on guard')

You may experience increased arousal, which you did not have before the trauma. This can include:

- · Difficulties in going to sleep or staying asleep
- Difficulties concentrating
- Being jumpy
- · Being irritable, which may include sudden anger
- Being alert and looking out for danger
- Feeling anxious

The four main symptoms of PTSD are described on this page, but there are other symptoms too. These may include:

- Depression and hopelessness
- · Feelings of panic and fear
- Feelings of mistrust and betrayal
- · Feeling alienated and alone
- · Guilt, shame or self-blame
- Physical aches and pains (headaches, muscle aches and pains)
- Irregular heartbeat
- Diarrhoea
- Substance abuse (alcohol, painkillers, drugs)
- Suicidal thoughts and feelings

If these symptoms last for more than a month, you may have PTSD. If they last more than three months, you may have chronic PTSD.

Symptoms of PTSD in adolescents and children

Children suffering from PTSD are likely to display different and additional symptoms to adults so it is worth knowing what to look out for.

Young children - age 1-5 years

Young children often re-live the trauma in their play (for example, a child involved in a road traffic accident might re-enact the crash with toy cars over and over again), stories or drawings and have upsetting dreams of the actual trauma. They are scared of being separated from their parents and may develop new phobias and anxieties that seem unrelated to the trauma (for example, a fear of monsters). They can also lose previously-acquired skills, such as toilet training, and often complain about aches and pains with no apparent cause.

Children - age 5-12 years

School-aged children may not have flashbacks or problems remembering the trauma, but might put the events of the trauma in the wrong order. They can also think there were signs that the trauma was going to happen and pay attention to these signs, in order to avoid future traumas. They keep re-living the trauma in their play and might fit parts of the trauma into their daily lives.

Adolescents - age 12-18

Teenagers show some of the PTSD symptoms of adults, but are more likely than younger children and adults to show impulsive and aggressive behaviours. They might not be able to trust others, they might feel alone and worried, feel as if people are looking down on them and have low self-esteem. They might engage in self-harm and substance abuse.



"They keep re-living the trauma in their play and might fit parts of the trauma into their daily lives."

Complex PTSD and its symptoms

When a traumatic situation is continuous and repeats itself for months or years, people experience chronic trauma. These people often report additional symptoms alongside PTSD symptoms.

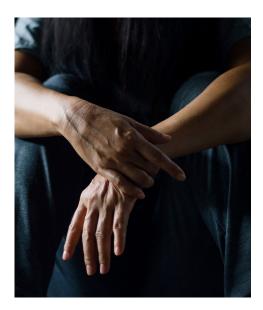
Long-term trauma can be caused by:

- concentration camps
- Prisoner of war camps
- Prostitution brothels
- Long-term domestic violence
- Long-term child physical, and/or sexual abuse
- Organised child exploitation rings

The victim is generally held in a state of captivity and unable to get away from the danger.

Survivors of chronic trauma might have different thoughts and show different behaviour in the following areas:

- Emotional regulations: persistent sadness, suicidal thoughts, explosive or inhibited anger
- **Consciousness:** forgetting traumatic events, reliving traumatic events, having episodes in which one feels detached from one's mental processes or body (dissociation)
- **Self-perception:** shame, guilt, a sense of being completely different from other human beings
- **Distorted perceptions of the perpetrator:** attributing total power to the perpetrator, becoming preoccupied with the relationship to the perpetrator, or becoming preoccupied with revenge
- · Relationships: isolation, distrust, repeated search for a rescuer
- One's system of meanings: loss of sustaining faith, hopelessness, despair





Coping with PTSD – Seeking professional help

Recovery from PTSD is a gradual and ongoing process and will not make you forget the trauma. Recovery will help you cope with its symptoms and increase your quality of life. There are many different treatments for PTSD, which are described in detail below.

Self-help

Self-help allows you to accept the impact of trauma on your life and take action to improve things. It may help you feel stronger and can help you reduce distressing symptoms.

Self-help tip 1: Learn about trauma and PTSD

Find out about natural reactions to trauma and about the signs of needing help from others. You will realise you are not weak, alone or crazy.

Self-help tip 2: Reach out to others for support

Support from people who care about you is important for your recovery, so stay connected by asking close friends and relatives for help and explain what you need. (*See right for ways to reach out to others.*)

Self-help tip 3: Practise relaxation techniques

Practise relaxation (even if it makes you feel worse to start with) - it will help to reduce negative feelings and symptoms over time. (See right for some examples of relaxation techniques.)

Self-help tip 4: Distract yourself

Positive activities can distract you from memories and reactions. They also improve your mood, limit the harm caused by PTSD and help you rebuild your life. Use the resources around you and don't expect too much of yourself. It takes time to heal and adjust to what has happened!

Self-help - tip 2

- Confide in a person you trust.
- Spend time with positive people.

• Join a support group for survivors of trauma (consider an online support group if you can't find one locally).

• Talk to a doctor / counsellor if your symptoms persist.

Self-help - tip 3

- Muscle relaxation exercises
- Breathing exercises
- Meditation
- Prayer
- · Swimming, stretching, yoga
- Listening to quiet music
- · Spending time in nature

Psychological treatment

Mindfulness practice

Mindfulness is a way of thinking and focusing that can help you become more aware of your present experiences. It consists of paying attention to/being aware of the present moment and accepting or being willing to experience your thoughts and feelings without judging them.

This technique might increase your ability to cope with emotions that have arisen from trauma, by noticing them and letting them go, without acting on them. It can prepare you for treatment by giving you skills and confidence so you can handle your feelings and thoughts.

Anxiety management

Anxiety management involves learning skills to help you cope better with PTSD. It aims to reduce the intensity of symptoms and the distress they create. Techniques should be practised repeatedly until they become automatic. (See right to find out what anxiety management techniques may include.)

EMDR (Eye movement desensitisation and reprocessing)

EMDR is a technique that integrates many different approaches, such as psychodynamic, cognitive behavioural, interpersonal, experiential and body-centred therapies to maximise treatment effect.

It uses eye movements to help the brain to process flashbacks and distressing memories, and to make sense of the traumatic experience. During this treatment a therapist will ask you to think of aspects of the trauma. While you are thinking about it, you will follow the movement of the therapists moving fingers with your eyes. It usually takes four to 12 sessions to change your reactions towards trauma.

CBT (Cognitive behavioural therapy)

CBT is the most effective treatment for PTSD and aims to help you work through the trauma and gain control of your fear and distress. It is based on the assumption that most unwanted thinking patterns and emotional behavioural reactions are learned over a long period of time. CBT involves identifying irrational, distorted and upsetting thoughts about the traumatic event and replacing them with more realistic and positive ones.

Techniques used to cope with anxiety

Relaxation

Breathing training – helps against anxiety and fear that provoke hyperventilation.

Assertiveness training – learning to express feelings, needs and opinions in an honest way, without being aggressive.

Positive thinking – Aims to replace negative and destructive thoughts with positive ones.

Thought stopping – Learning to stop thinking distressing thoughts.



You will also learn to expose yourself to feelings, thoughts and situations that remind you of the trauma.

You will be treated for around eight to 12 weekly sessions, although fewer may be needed if you start treatment within one month of the traumatic event.

- **CPT (Cognitive processing therapy)** This type of CBT focuses on examining and challenging thoughts about the trauma and replacing them with positive thoughts. You will:
 - · Learn about your symptoms and how treatment can help you
 - · Become aware of your thoughts and feelings
 - Learn skills to challenge your thoughts and feelings (cognitive restructuring)
 - Understand the common changes in beliefs that occur after a trauma
- **PE (Prolonged exposure therapy)** This type of CBT helps you identify the thoughts, feelings, and situations you have been avoiding and you will be confronted with them until your distress decreases. You will:
 - Learn about your symptoms and how treatment can help you
 - Practise breathing training to help you relax and manage distress
 - Be repeatedly confronted with the situation, thoughts and feelings you have been avoiding (in-vivo exposure)
 - Talk through the trauma to get control of your thoughts and feelings (imaginal exposure)

Family therapy

Family therapy can be especially productive, because PTSD affects not only the person that suffers from it, but also their relatives and friends. It can help other people understand what you're going through and increase communication within your family.



Rewind technique

During this treatment the therapist will help you move to a state of deep relaxation. Afterwards he/she will ask you to imagine you are watching yourself watching a film of the traumatic event. This helps you to distance yourself from the memory. You then rewind and replay it as many times as you need to.

By replaying the traumatic event it gets stored in your 'back memory', rather than in your conscious memory, where it affects your everyday life. One advantage of this method is that you don't need to talk about the traumatic event.

Group therapy

Group therapy provides an ideal therapeutic setting, because trauma survivors are able to share traumatic experiences. At first it is often much easier to accept confrontation from a fellow sufferer than from a therapist and confidence and trust can be established. By telling your story to the group you will directly face grief, anxiety and guilt related to your traumatic experience, which will enable you to go on with your life.

Brief psychodynamic therapy

Brief psychodynamic therapy focuses on the emotional conflicts caused by the traumatic event. Through retelling your experience you will achieve a greater sense of self-esteem, develop effective ways of thinking and coping, and deal with the intense emotions that emerge during therapy. Your therapist will also help you identify current life situations that set off traumatic memories.

Need more information/advice about therapy?

Visit our web page for details of the services we offer for people experiencing symptoms of trauma and PTSD https://www.firstpsychology.co.uk/ trauma-therapy-ptsd.php "Recovery will help you cope with the symptoms and increase your quality of life..."





Treatment for children

When it comes to treating children with PTSD some factors should be included:

- Treatment has to be adapted to suit the child's age, circumstances and level of development.
- Treatment should be regular and continuous
- · Treatment sessions should be delivered by the same practitioner
- · The family should also be involved in the treatment plan

EMDR and CBT are effective treatment methods for children. Some therapists use play therapy to treat young children who are not able to deal with the trauma more directly. The therapist uses games, drawings and other methods to help children process their traumatic memories.

Psychological first aid (PFA) is a method that provides comfort and support, lets children know their reactions are normal and teaches calming and problem solving skills.

Medication should not be offered to children with PTSD, because there is no supporting evidence that this treatment method contributes to their recovery.

Medication

Medication can help to treat adults with PTSD, but for most people it is not as helpful as trauma focused psychological treatment. You would usually be offered psychological treatment before medication but you may be offered medication if:

- · You prefer not to have psychological treatment
- You can't start psychological treatment due to a high risk of further trauma

• You have severe depression or hypersensitivity that affects your ability to benefit from psychological treatment

· Psychological treatment has not helped you

Antidepressants are usually offered to people with PTSD, because they may relieve some of the symptoms and help people to get the best from their psychological treatments.

Most commonly used antidepressants for PTSD are SSRI antidepressants (selective serotonin reuptake inhibitors), which include Paroxetine (Paxil) and Sertraline (Zoloft). These drugs raise serotonin in your brain, which can make you feel better.

It takes up to three months for anti-depressants to fully build up in your system. If you are responding to medication, you should be encouraged to continue treatment for at least 12 months. Afterwards antidepressants can be gradually reduced and stopped.

Antidepressants should be used with caution and with full knowledge of their possible side effects, because they can be difficult to come off. "Antidepressants raise serotonin in your brain, which may make you feel better"



A guide for friends, family and colleagues

How can you support someone who has PTSD?

In order to provide practical and emotional support to your loved one, you first need to take care of yourself. Try and not give up your outside life, don't feel guilty and don't feel bad if things change slowly.

Here are some guidelines how you can help your loved one:

• Learn as much as you can about PTSD, because it will help you understand what your family member is going through and keep things in perspective.

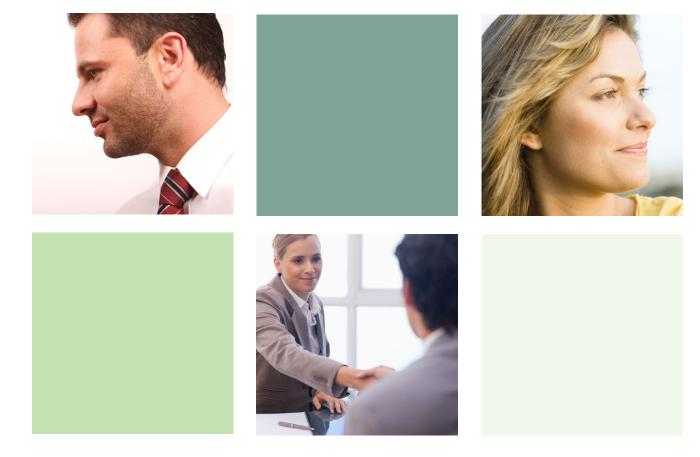
• Tell your loved one you are there when they want to talk and listen to them without being judgmental.

• Support your family member by offering to go with them to the doctor.

• Plan family activities together and encourage contact with family and close friends.

Keep in mind that your family member may not want your help and that this withdrawal can be a symptom of PTSD. If this happens, give your loved one space and let them know that you are there for them. If your family is having a lot of trouble, you might consider trying family therapy *(described on page 9).*





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