

Understanding Post- Traumatic Stress

A Normal Reaction to Abnormal Events

A traumatic event is an emotional shock. It is not easy to take in what has happened and to come to terms with it. After a trauma, it is quite normal to experience all kinds of unpleasant feelings, emotions and body sensations. These may take some time to die down. In the meantime, memories and images of the trauma, and thoughts about it, come into your mind even if you try to shut them out. These experiences may be confusing and even frightening. You may wonder if you will ever get over the trauma, if you are losing control of yourself, or even if you are going mad. These worries are entirely understandable. However you will discover from this handout that the thoughts, feelings and sensations you are experiencing are **a normal reaction to stress**, and show that your body and your mind are working to come to terms with the traumatic event.

Each person reacts to trauma in his or her own unique way. Nonetheless, there are common reactions which many people share. This handout describes some of these common reactions. You may find that you have experienced, or are experiencing, many of them. Read the handout carefully and see which parts apply particularly to you. The handout is yours to keep, so feel free to underline particular passages or make notes in the margin. You will have an opportunity to discuss your reactions to the handout with your therapist when you next meet.

1. Fear and Anxiety

The most immediate and striking reactions people experience after a trauma are **fear and anxiety**. Sometimes these feelings occur as a result of being reminded of the trauma; at other times they seem to come “out of the blue”. Fear and anxiety can be understood as reactions to having been in a dangerous, life-threatening situation. A trauma often leads to changes in people’s views of the world and their sense of safety. After experiencing trauma, it takes a while to feel secure again. You may feel that life is full of risks, and that you can never be sure when disaster will strike.

This heightened sense of danger may be partly because the trauma has made you more aware of **real** risks. It may also be because fear has led you **overestimate and exaggerate** how dangerous life is. Let us take the trauma of a road traffic accident as an example. Although you knew road traffic accidents happen, you may never really believed that one would happen to you. After a crash, it is as if an accident is waiting to happen at every roundabout and junction, and around every corner. Even as a passenger, you cannot afford to take your eyes off the road for an instant. In actual fact, an accident is no more likely than it was before. But in your mind it seems extremely likely that history will repeat itself. Naturally enough, these changes in how you see things lead to heightened fear and anxiety.

Typically, after a trauma, fear and anxiety are experienced in two ways:

- a) Continuing to re-experience memories of the trauma (you will find more detail about this in section 2 below);
- b) Feeling physically on the alert, hyped up and jumpy (you will find more detail about this in section 4 below).

Sometimes particular **triggers or cues** may remind you of the trauma. When this happens, you will automatically respond with fear. Some triggers are obvious and closely resemble the original traumatic event (for example, returning to the site of a road traffic accident). Others, however, may in themselves seem quite trivial and bear only a distant or vague resemblance to the trauma (for example, a flash of a particular colour, a certain smell, a change in the light, a shift in temperature, or a tone of voice). Subtle triggers like these are often more difficult to spot. Once you have identified them, your automatic fear reaction will make better sense.

Because fear and anxiety are distressing, people often attempt to reduce them by trying to avoid places, people, and other reminders of the trauma or by distracting themselves from upsetting memories and thoughts. These strategies may well help you to feel better in the short term, but in the longer term they will actually slow down recovery and keep the problem going. This point is explained in more detail in section 5 below.

2. Re-experiencing

People who have undergone a traumatic event often **re-experience** the trauma. You may find that you are having “**flashbacks**”, when visual images of what happened suddenly pop into your mind. Sometimes flashbacks can be so vivid that you may feel as if the trauma is actually happening all over again. You may also find that you are re-experiencing the trauma through **nightmares**. Or you may re-experience the trauma emotionally, or in your thoughts, without having a flashback or a nightmare. These experiences are intrusive - they happen whether you want them or not, and you may well come to feel that you have no control over what you are feeling, thinking and experiencing, day or night. Trying to push flashbacks and memories out of your mind will not stop them from coming back, and may in fact make them all the more persistent. Your therapist will help you to find other ways of dealing with them.

3. Difficulty concentrating

You may also find that you have **trouble concentrating**. This is another common experience after a trauma. It is frustrating and upsetting to be unable to concentrate, pay attention to, or remember what is going on around you. This experience too may lead to a feeling that you are not in control of your mind or that you are going crazy. It is important to remember that these reactions are temporary. They are a result of intrusive and distressing feelings and memories about the trauma. In an attempt to understand and digest what happened to you, your mind is constantly going over the trauma, bringing it back up, chewing over it, trying to digest it. Naturally this means that you have less mental space available to concentrate on other things.

4. Physical arousal

Another common reaction to trauma is **physical arousal**, feeling jittery or agitated, overly alert, trembling, being easily startled and having trouble sleeping. You may have trouble getting to sleep, or you may wake repeatedly during the night, or sleep restlessly, or have troubled dreams. Feeling tense and jumpy all the time may lead to feelings of **irritability**, especially if you are not getting enough sleep. You may find yourself snapping at people close to you, or losing your temper for trivial reasons.

These physical arousal symptoms are a result of fear. Animals, including humans, have several ways of reacting to being startled, attacked, threatened or in danger. One reaction is to **freeze**. You may have noticed that, when approached by a dog, a cat will crouch down and keep very still when it is afraid. A second possible reaction is **to run away or flee**. A third reaction is to **fight**. Fleeing and fighting both require a burst of adrenaline, a hormone released by a gland near your kidneys. Adrenaline mobilizes your body and helps you to respond adequately to genuine danger.

After a very frightening trauma, your body may stay constantly on the alert, prepared for instant action, even though this is no longer necessary. The trauma has forced you to realise that there is danger in the world, and you are all set to deal with it. It is as if your body has failed to realise that the danger is past. It continues to react as if you were still under threat and might need at any moment to fight, flee or freeze. This is why you may feel constantly keyed up, tense and irritable.

5. Avoidance

You may find that you are physically avoiding or avoiding thinking about things that remind you of the trauma. Or you may be blocking off or avoiding the feelings that are triggered by reminders. **Avoidance** is a strategy to protect yourself from things that you feel have become dangerous, and thoughts and feelings that seem overwhelmingly distressing. Sometimes the desire to avoid memories and feelings about the trauma may be so intense that you find you have **forgotten** important aspects of what happened. Or you may find yourself “**blanking out**” or “**switching off**” when reminders of what happened occur. **Emotional numbness** (the loss of the ability to feel anything very much, including affection and pleasure), is another common way of trying to cope with painful feelings and thoughts about the trauma. It may include feeling alienated from people you care about. Because they have not experienced what you have, it is as if they cannot possibly understand what you are going through.

As we have already said, avoidance is often a good way of reducing distress in the short- term. When it is successful, it reduces distressing feelings. But it is not always the best longer term strategy for getting over the trauma. Firstly, it is difficult to avoid one’s own thoughts and feelings successfully. They keep coming back, and indeed trying to avoid them actually makes them more frequent and

persistent and increases the sense of being out of control. Secondly, avoidance is usually a result of predictions that if you face what you fear, disaster will occur. Your feelings will overwhelm you, or you will be attacked again. It makes perfect sense to avoid things that you believe will harm you. But it stops you from discovering that your fears may be exaggerated, and that the world is not as dangerous as it seems. As a result, your life may become more and more restricted.

6. Feeling low

Another common reaction to trauma is **sadness** or feeling **down or depressed**. You may have feelings of hopelessness and despair, frequent crying spells, and sometimes even thoughts of hurting yourself and suicide. **Loss of interest** in people and activities you used to enjoy often follows trauma. Nothing may seem much fun to you any more. You may also feel that life is no longer worth living, and that plans you had made for the future no longer seem important or meaningful.

7. Loss of control

During the trauma your life, and the lives of those you care about, may have been threatened. You may well have felt that there was absolutely nothing you could do to prevent the worst from happening. You may have felt that you had **no control** over your feelings, your body, your physical safety, or your life. Sometimes the feelings of loss of control may be so intense that you may feel as if you are “**going crazy**” or “losing it”.

8. Guilt and shame

Feelings of guilt or shame may be present. These may be related to something you did, or did not do, in order to survive. In the weeks and month following a trauma, it is common to go over and over what happened in your mind, and blame yourself for what you did or did not do- steps you might have taken to prevent the trauma from occurring, or different ways you might have reacted. It is as if you are trying to put things right in your mind after the event- if only you had done such- and- such, or if only you had not done something else, it would all have been different. You may also blame yourself for not having been able to put the trauma behind you and get back to normal. Perhaps you see this as a

sign of weakness or inadequacy in you, rather than understanding your symptoms as a normal, human reaction to intolerable stress. Furthermore, blame sometimes comes from family and friends because often people wrongly place responsibility on those who have been hurt or victimised, rather than on those who have done the hurting. Equally, others may not understand the nature of post-traumatic stress, and give you the message that you should be pulling yourself together and getting on with life. Self-blaming thoughts are a real problem, because they can lead to feeling helpless, depressed and bad about yourself.

9. Anger

Anger is also a common reaction to trauma. The anger is often directed at the person responsible for causing you physical injury, abusing you, or disrupting your life. But feelings of anger may also be stirred up by the presence of people or circumstances that remind you of the trauma, even if they had nothing to do with it.

Sometimes you may feel so angry that you want to hit someone or swear. If you are not used to feeling angry these feelings may feel foreign to you. You may not recognise them, or know how to deal with them. Some people direct the anger towards themselves for something they did or did not do before, during or after the trauma. Anger directed at the self may intensify self-blame, guilt, helplessness and depression.

Many people also find they are experiencing anger towards those they love most: family, friends, their partners, their children. Sometimes you may **lose your temper** with people who are most dear to you. This may be confusing: why are you so angry with those you care about most? Being close to others may feel good. But it can also lead to feelings of dependency, vulnerability and helplessness. Having those feelings may make you feel angry and irritable because they remind you of the trauma.

10. Self- image

Your self-image can also suffer as a result of a trauma. You may tell yourself: “I am a bad person, and bad things happen to me”, or “If I had not been so weak and stupid, this would not have happened”. Or you may be hard on yourself for not coping better with what has happened- why can you not just put it

behind you and get on with living? Both the trauma itself and the feelings you experience afterwards can be a source of self-criticism and self-doubt.

11. Negative thoughts

You may also develop negative thinking about other people and about life in general. The world, previously seen as safe and rewarding, may suddenly seem a very dangerous place. You may feel for the first time that you cannot trust anyone. People often say that the trauma has changed them completely. They say, for example: “Before the trauma I was not afraid of anything. I could cope with any kinds of stress, no matter how difficult the situation was, and I could get along with others. And now I am afraid of my own shadow, and I cannot cope with even trivial problems.”

On the other hand, people who have had previous bad experiences and negative beliefs about themselves, the world and other people, the trauma may confirm pre-existing ideas such as “the world is a dangerous place” and “no one can be trusted”. Some people feel the trauma was “the last straw”. It seems to them to prove things they always “knew”, for example that they cannot trust themselves, or that they are the sort of people who cannot handle even the slightest difficulty.

12. Reminders of the past

Finally, the trauma may remind you of similar experiences in the past. You may suddenly recall incidents that previously you had forgotten, and which may be as disturbing to you as the memory of your recent trauma. The reminders may be **physical aspects** of the trauma (for example, a cold sensation in your body, or a man’s angry voice). Or it may be that you are reminded of other experiences that have a **meaning** similar to the trauma, for example other times when you saw yourself as vulnerable or helpless, or believed your life to be at risk. As we said in section 1, the triggers for past memories may be very subtle and fragmentary, and so difficult to identify and make sense of.

Memories of past experiences may be stirred up to such an extent that it becomes difficult for you to think of any experiences or situations in the past that were not negative. It may even become very

difficult to believe that you will ever feel happy again, or get back to normal, or enjoy life. But you will. It is possible to put these painful experiences behind you.

Conclusion

In this handout you have read about common reactions to trauma, and will have had an opportunity to identify those which particularly fit how you have been feeling. **The main message of the handout is this: the feelings, thoughts and body sensations you have been experiencing are entirely normal. They are a natural, human reaction to extreme stress.** This is why the problems you are experiencing are called “post- traumatic stress disorder”. They are a sign that you have not yet been able to come to terms with what happened to you. It is as if the trauma continues to happen over and over again in the here and now. Through therapy you will come to understand how this happens, and you will learn ways of dealing with your upsetting thoughts and feelings, and gaining perspective on the trauma and how it has affected you. This will help you to take the heat out of your memories and to put the trauma in the past, where it belongs.

Fennell, M., Ehlers, A. & Clark, D.M. (1998). Unpublished Manuskript. Bearbeitung eines früheren Informationsblattes von Foa & Rothbaum (1998). Treating the trauma of rape. New York. Guilford Press.

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