

Psychological responses to traumatic stress: What to expect (English)

In recent years much has been learned about how people are affected by the experience of events which seriously threaten their safety or the safety of their family or friends. It is not only the survivors of such traumatic events who are affected, but also people who are bereaved, as well as helpers, rescuers and others who have worked with survivors or the bereaved.

Common reactions during the trauma:

When we experience a threatening event our bodies automatically respond in a way that allows us to protect ourselves or escape from the situation. This '*fight-or-flight*' response involves an increase in heart rate, blood pressure, muscle tension and breathing rate. All these changes help us to physically deal with danger or to leave the situation very quickly if necessary.

During an extremely traumatic event this reaction will be very strong. The common reactions experienced may include:

- shock
- anger
- fast breath
- disbelief
- confusion
- sweating
- numbness
- pounding heart
- excitement
- intense fear
- trembling or shaking
- nausea.

Remember however that, while these responses are to be expected, it is usually helpful to discuss these responses and feelings with somebody when they occur.

Common reactions the days following the trauma:

It is also common for individuals to continue to experience a number of thoughts, images and feelings for some days, or even weeks following the trauma. Again, these reactions are common and are a sign that the body is recovering from severe stress.

The most commonly reported reactions include:

- **anxiety or fear** of danger to self or loved ones; being alone; being in other frightening situations; having a similar event happen again

- **avoidance** of situations or thoughts that remind you of the traumatic event
- **being easily startled** by loud noises or sudden movements
- **flashbacks** where images of the traumatic event come into your mind suddenly for no apparent reason, or where you mentally re-experience the event
- **physical symptoms** such as tense muscles, trembling or shaking, diarrhoea or constipation, nausea, headaches, sweating, tiredness
- **lack of interest** in usual activities, including loss of appetite or interest in sex
- **sadness** or feelings of loss or aloneness
- **shock** or disbelief at what has happened; feeling numb, unreal, isolated or detached from other people
- **sleep problems** including getting to sleep, waking in the middle of the night, dreams or nightmares
- **problems with thinking**, concentration, or remembering things (especially aspects of the traumatic event)
- **preoccupation** with thinking about the trauma
- **guilt and self-doubt** for not having acted in some other way during the trauma, or for being better off than others, or feeling 'responsible' for another person's death or injury
- **anger or irritability** at what has happened; at the senselessness of it all; at what caused the event to happen, often asking "Why me?".

Not everyone will experience all of these reactions, or experience these reactions to the same extent. There may also be other reactions to add to the list. However, in most cases, *these symptoms will disappear after a short period of time* (i.e. a few hours or weeks).

Psychological responses to traumatic stress - what to do:

Immediately after the event:

- Make sure you are with people. Do not go home to an empty house - ask a friend or relative to stay with you.
- Talk about the incident with others. Talking will help you get over the reactions.
- Remind yourself that the event is over and that you are now safe.
- If possible get some physical exercise. This will help to 'burn off' some of your tension and anxiety.
- Avoid alcohol, sedatives or sleeping pills (they will only dull the experience and not allow you to deal with your feelings properly).
- Restrict stimulants (such as tea, coffee, chocolate, cola or cigarettes) because you do not want to make your body even more agitated that it already is at present.
- Try to eat something even if you do not feel like eating.
- If you cannot sleep, do not lie in bed tossing and turning - get up and do something until you feel tired.

How to handle the next few days:

- Remind yourself that your reactions are a normal result of trauma and will pass in time.
- Try to get back into your normal routine as soon as possible. You may need to gradually introduce yourself to tasks that seem difficult.
- If you feel uncomfortable, scared or anxious, take some long, slow breaths and remind yourself that you are safe and that the trauma is over.
- Make sure that you are doing things that are relaxing and enjoyable - be kind to yourself.
- Continue to talk to your family, friends and colleagues about the trauma. This will help you to get over your feelings. Even if you feel a bit distant from other people, do not reject their support. Do not be afraid of your feelings.
- Work on your general stress levels by ensuring that you have adequate sleep, a good diet and regular exercise. Practice relaxation to help reduce nervous tension.
- Drive more carefully and be more careful around the home and with machinery. Accidents are more common after severe stress.

- Allow yourself time to deal with the memories. You will need commitment and patience. There may be some aspects of the experience that will be difficult to forget.

If your reaction continues to seriously disrupt your life, please talk to your clinician.

For more information

For more information, please contact the Queensland Transcultural Mental Health Centre.

Telephone: (07) 3317 1234

Email: QTMHC@health.qld.gov.au

Website: www.health.qld.gov.au/metrosouthmentalhealth/gtmhc/default.asp

This fact sheet is available in English, Greek, Hmong, Italian, Maltese and Punjabi.

Andrews, G., Crino, R., Hunt, C., Lampe, L. and Page, A. (1994) The treatment of anxiety disorders. Melbourne: Cambridge University Press.

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