

IF A LOVED ONE HAS SUFFERED TRAUMA

(A handout for family and friends of those who have suffered a traumatic event)

Exposure to traumatic events leaves most people with a variety of distressing reactions. Many of them fall into a category that professionals call Post Traumatic Stress Disorder (PTSD) which may be familiar to you. Here are some suggestions that might make this difficult time a little easier for you if someone you know has been traumatized.

The biochemistry:

It is helpful to understand that traumatic memories are different than other kinds of memories. When someone's life is in danger or when one sees something terrifying, the brain gives signals to release great amounts of adrenaline and a range of other mobilizing chemicals. The emotional sensation that accompanies that adrenaline release is fear. The cognitive reaction to that release is heightened sensory awareness (clearer vision, more alert). The physical reaction is greatly heightened physical energy and stamina. During the initial time most people have a warped sense of time, often have confused thoughts, and later may not remember many major aspects of the incident.

After the danger is past people usually go rapidly into shock for some time. During this time it is important to keep them safe, as they may do something like step out into moving traffic without realizing it. People often forget to eat or take in adequate hydration.

If it is important to bring in someone who is trained in the psychology of trauma as quickly as possible, so that people can be debriefed. This is a specific process, and the process is quite different for victims than it is for first responders (911 helpers). If the traumatized person was in uniform, Critical Incident Stress Management is very helpful. If your loved one was a victim or bystander in "civilian" life, it is critical for those providing intervention to have a clearly different approach that is specifically designed to meet the unique needs of victims and bystanders.

Even after people have received intervention, it will likely take some time for the aftermath to calm. There are likely to be some issues that may not make sense to you. Traumatized people have experienced something that makes them feel they've **lost control** of their lives. They may have lost their sense of trust in the world, their belief in their ability to keep themselves safe, even their ability to manage their thoughts and dreams.

Flash-backs are involuntary and vivid visions of the event or a sudden physical sensation that makes them feel they are re-experiencing the trauma. Reactions to flashbacks may include an increased heart rate, immobilizing fear or other reactions similar to what they had at the time of the traumatic event. **Nightmares** are also common. Both of these threaten their sense of control, so they may want/need to control many other areas of life that were unimportant to them before.

Give them every opportunity to make their own decisions wherever possible and appropriate. Often people assume a chronic state of **hyper vigilance** and are unable to relax, have interrupted sleep, and appear to over react to normal daily stimuli (perhaps jumping when a door slams shut). They may have a feeling of impending or immediate danger, even when the environment is safe. All of these are signs that the person is still suffering from a traumatic reaction and would likely benefit from additional professional help. Without intervention, people are at risk of using drugs or alcohol to try to manage the pain, confusion, overwhelm and anxiety. Sleep deprivation often results and the long-term detrimental effects are numerous.

Advice often feels to them as more loss of control. Instead of trying to tell them what you think they need to do to get better, rethink and rephrase your advice into a statement of concern.

Own your concern. Instead of saying "Eat something good for you. You've got to take care of yourself and eat well," try, "I'm concerned about whether you're eating well. I know you like my barbecued chicken, so I just brought you some in case that appealed to you. I knew I'd feel better if I could think of something to do for you." When someone has been victimized or traumatized, nearly every person who loves them has a piece of advice. When is the last time you had 30 people give you advice over the period of a day or two? How would it feel to you to have other people laying expectations on you at a time when what you needed was love, support, and a sense of self-control?



Advice often feels like expectation even when it is really concern. Rephrase it as concern and **own it as your own concern!** Along some other lines, here are some helpful things to try or to say:

- How can I help?
- Is there anything I could do to take off some of the load? Laundry? Cooking? Anything at work?
- Could I take the kids for dinner so you have some time alone?)
- If you're having trouble sleeping, would you like someone to stay with you at night?
- Would it help if I went with you to... (court appearances, follow-up meetings with police, doctors, whatever)
- What is it you wish others understood about how this is for you?
- What is the hardest part at this point?
- Is there someone who really understands how this is for you?
- Would you like to see if we can find someone else who have been through something similar to this?
- Is there a way for us to predict some of the difficult parts yet to come and set up some temporary supports to help get you through those times? (**Very important!**)

Remember, if you ask this and they give you answers, have the grace to remember it is not an invitation for advice -- it is an invitation for understanding and compassion. Realize that many people will have several kinds of **triggers**. A trigger is something that brings on a flashback, which makes victims feel like they are re-experiencing either the event itself or the physiology of their reaction to the original event. A trigger can be a place (like the scene of the accident) or an unrelated but similar event (news coverage of a similar event happening to someone else, even many miles or states away or in another country) or even smelling something that is somewhat similar to something at the event, even if that smell was unrelated to the actual tragedy. For example, it makes sense that the smell of smoke would be a trigger for someone who had been trapped in a house or building on fire, but it might be more surprising that a trigger odor might be the smell of leather or plastic or something else that was in the house or near the person, unrelated to the smoke.

Triggers often aren't predictable nor do they always appear to make sense.

Trigger experiences are like being re-traumatized. Give survivors support and understanding when they occur. Find out whether there is a professional who can give you help with how best to do so.

Do not criticize their reactions. They may feel anger at the police for not having gotten there sooner. You may think that their anger "should be" at the perpetrator. You don't have to agree with their reaction, but you can accept it as being true and real for them. You don't have to lie and say you think so, also. You can say, "I can imagine that if I were in your shoes I might feel the same way," or "Is there more about that?" or, "Is there a constructive thing I can help you do with all the energy or power of your anger?" The woman who started MADD found a very constructive way to channel her anger!

Recovery from trauma can be very complete and successful, but two things are essential -- the victim has to do the work, and if there is a therapist involved, the therapist must have specific knowledge and skill in the area of trauma. Traditional counseling techniques are not helpful. Recovery from trauma always takes longer than we wish, and *the mere passage of time is not helpful*. Even if people are able to bury it for awhile, it will surface at some point later in life, and will then be more complex to handle. Timely professional help makes the greatest difference in recovery.

In summary, let them teach you about how this is for them and what they need from you. Ask what would be helpful. Don't make assumptions. Hang in there with them for the long haul. But don't reverse roles even for a moment and hope that the traumatized person can listen to your frustrations. Find others who can listen to you, not to the victims. They can only feel safe talking to you about their needs if they can feel that you can be totally there for them. As soon as they begin to believe that you have needs around the trauma, they'll be apt to stop talking. They can't afford to feel like they have to support anyone else.

Accept that this has changed your life, too. While you encourage others to take care of themselves, it is critical that you do so as well. If you don't take care of yourself, at some point, you'll have nothing left to give.

