

Common reactions to trauma

Description

Most people involved in a traumatic incident experience some kind of emotional reaction. Although each person's experience is different, there are a number of common responses that are experienced by the majority of those involved. It is reassuring to know that, even though these feelings can be very unpleasant, they are NORMAL reactions in a normal person to an ABNORMAL event. You are not losing your mind or going crazy if you have these feelings. It is often difficult for those who were not involved to understand what the survivor is going through; you may wish to show this pamphlet to friends and relatives, and perhaps discuss your reactions with them. Outlined below are some of the normal reactions to trauma:

Emotional

Shock

- disbelief at what happened
- feeling numb, as if things are unreal.

Fear

- of a recurrence
- for the safety of oneself or one's family
- apparently unrelated fears.

Anger

- at who caused it or "allowed it to happen"
- at the injustice and senselessness of it all
- generalised anger and irritability.

Sadness

- about the losses, both human and material
- about the loss of feelings of safety and security
- feeling depressed for no reason.

Shame

- for having appeared helpless or emotional
- for not behaving as you would have liked.

Physical

Sleep

- difficulty getting off because of intrusive thoughts
- restless and disturbed sleep
- feeling tired and fatigued.

Physical

- easily startled by noises.

Problems

- general agitation and muscle tension
- palpitations, trembling or sweating
- breathing difficulties
- nausea, diarrhoea or constipation
- many other physical signs and symptoms.

Thinking

Memories

- frequent thoughts or images of the incident
- thoughts or images of other frightening events
- flashbacks or a feeling of "reliving" the experience
- attempts to shut out the painful memories
- pictures of what happened jumping into your head
- dreams and nightmares about what happened
- unpleasant dreams of other frightening things
- difficulty making simple decisions
- inability to concentrate and memory problems.

Behaviour

Social

- withdrawal from others and a need to be alone
- easily irritated by other people
- feelings of detachment from others
- loss of interest in normal activities and hobbies.

Work

- not wanting to go to work, poor motivation
- poor concentration and attention.

Habits

- increased use of alcohol, cigarettes or other drugs
- loss of appetite or increased eating
- loss of interest in enjoyable activities
- loss of sexual interest.

Remember that all responses are NORMAL to an ABNORMAL situation.

Coping with disaster and trauma common responses

The signs and symptoms described above are common reactions to a life threatening experience, although occasionally they may not appear until some time after the event. Most of them are part of the normal process of recovery and help the person adapt to the trauma. They can, however, be very unpleasant for those affected and their families. Usually they will diminish over a period of a few weeks, although some may last for months or even years, especially if the experience was particularly frightening. You may also find that the feelings get worse when you are reminded of the event or when you discuss your experiences with other people. Try not to let that stop you from talking about it - in the long term, sharing your experiences and feelings with others will help. Some people benefit from extra help in overcoming the effects of a traumatic experience. Do not be afraid to get help if you think you need it: it is not a sign of weakness or an indication that you are losing your mind. Often, the help you receive will be short and simple, and will prevent you from having longer term problems.

You may need further assistance if

- the problems described above are particularly severe. Or if they continue for more than five or six weeks
- you feel numb or empty and do not have appropriate feelings. You may find yourself keeping busy all the time in order to avoid the unpleasant thoughts and feelings
- you have no friends or family to whom you can talk about the experience and how you feel
- you are using alcohol or drugs to help you cope
- you have any other concerns about the way you or your family are coping and you would like to discuss the matter.

Seek professional help if

- your emotions or physical symptoms are too intense or persistent
- you feel too numb, cut off or you have to keep active in order not to feel
- you continue to have nightmares, poor sleep or 'flashbacks'
- your family, social or work relationships suffer
- sexual problems develop
- you experience loss of memory and concentration
- your performance suffers at school, work or at home
- you have accidents or illness
- you increase smoking, drinking or drug taking
- you have no one to talk to about your experience
- you have lost faith in yourself or the world.

Getting help

The most important thing to remember is that you, your family and your community are not alone. Support is available through a number of Queensland Government agencies and community organisations. There are a number of ways of seeking help for distress.

- **Lifeline** Call 13 11 14 Lifeline Australia provides services from 59 locations. Lifeline Centres maintain a telephone counselling service in addition to providing information, referral and associated services in local areas.
- **Red Cross** The Australian Red Cross has a number free information booklets and fact sheets on recovering from a disaster and cleaning up after a flood. To obtain a copy of the booklets visit the 'After an emergency: what now?' section of the website or call Australian Red Cross on 1800 733 111.
- Help and more information may also be obtained from your general practitioner, local Community Health Centre or local Mental Health Service. Please refer to the White Pages telephone directory.

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