# Coping with Trauma



"Sometimes a breakdown can be the beginning of a kind of breakthrough, a way of living in advance through a trauma that prepares you for a future of radical transformation."

Cherrie Moraga, American poet and playwright (born 1952)

"I learned that courage was not the absence of fear, but the triumph over it. The brave man is not he who does not feel afraid, but he who conquers that fear."

Nelson Mandela, South African statesman (born 1918)

"That which does not kill us makes us stronger."

Friedrich Nietzsche, German philosopher (1844-1900)

We all know the world is a dangerous place. Newspapers and television bombard us with images of catastrophe and destruction. We are constantly reminded that natural disasters, terrorism and violent crime are but a few of the threats that we now live with.

It would be impossible to lead a normal life if we were constantly anticipating disaster, so we carry on with our everyday lives in the hope that we and our families will stay safe from harm. Yet sooner or later, the majority of people will experience some sort of traumatic event.

There are many different ways in which trauma can strike and there are also many different ways in which we respond. Some people feel completely overwhelmed, while others appear to be able to cope. For some, recovery is fairly speedy, for others it can be a long and painful process.

Whatever our response, traumatic events have a significant impact on our lives. Yet with the right kind of support, human beings are well equipped to cope with trauma. We are often far more resilient than we realise, even if we despair of ever returning to a normal existence.

Amid the grief and confusion, it is also possible to find new meaning in life following a trauma. There are many forms of help available and no one need suffer alone. If you'd like to discuss any of the issues raised in this Helpsheet, the CiC 24-hour Confidential Care Adviceline is available for practical and emotional support.

#### What is trauma?

The World Health Organisation (WHO) defines trauma as "a delayed or protracted response to a stressful event or situation (either short or long-lasting) of an exceptionally threatening or long-lasting nature, which is likely to cause pervasive distress in almost anyone".

Based on this definition, we can identify certain key characteristics in trauma, whatever the nature of the incident.

It is overwhelming. Again, it doesn't really matter how big the traumatic event itself is. The point is that we feel that the stress placed on us has exceeded our ability to cope.

It is unexpected. By and large, events that are expected give us some time to prepare. We are always more deeply affected by the things that we didn't see coming.

It causes fear, helplessness and horror. These three factors have been identified as contributing to the lack of control that is associated with trauma.

It is life-threatening. The experience of feeling that you or someone that you love is going to die, even if it is only for a fleeting moment, has a profound psychological impact.

There are two other types that are commonly experienced. Cumulative trauma is often seen in cases of violent or sexual abuse, where someone is exposed to traumatic experiences on a regular and continuing basis. Compassion fatigue, sometimes known as secondary trauma, can occur in those who work closely with people who have suffered trauma. Doctors and nurses, as well as the police and emergency services personnel are particularly at risk, as are aid workers and journalists. It is most commonly experienced as a feeling of burnout.

### Causes of trauma

There are many types of event that can cause trauma, and they are not always obvious. Terrorist attacks and natural disasters are perhaps the most familiar, largely because they receive the most intense media coverage, but they are certainly not the most frequent.

Studies have shown that rape is tragically one of the most common trauma-provoking events. Others include muggings, car crashes, accidents in the workplace, the unexpected death of family members or colleagues or the serious illness of a child.

Often a relatively mundane event can provoke a deeply traumatised response if it follows a long period of cumulative stress or trauma. Commonly referred to as "the straw that breaks the camel's back", these are incidents such as failing to win a contract at work or a trivial argument at home that may not be world-shattering in themselves, but feel catastrophic.

Research has indicated that man-made traumas tend to do greater psychological damage because they destroy our sense of trust in other people. Traumas perpetrated by loved ones are especially harmful. It has also been established that witnessing a traumatic event can be every bit as disturbing as actually being caught up in one.

## Levels of stress

Just as there is a whole gamut of events that we can experience as traumatic, so there are different levels of reaction, each leading to symptoms of varying intensity. We'll return to why some people seem to be more affected by traumatic incidents than others, but let's look at the levels first.

Stress. Every human being, no matter how resilient, will experience a range of physical and psychological responses to stressful experiences. They are completely normal and act as an internal warning system, alerting us to the fact that we are or have been under some kind of threat. Symptoms are many and varied and will often subside of their own accord. They include:

 Fatigue, headaches, back pain, insomnia, forgetfulness, poor concentration, boredom, irritability, depression, mood swings, apathy, loneliness, sense of emptiness, withdrawal, relationship problems, substance abuse, overwork.

Acute stress. These are symptoms that will appear within four weeks of a trauma and can last between a few days and several weeks. Acute stress disorder can severely hamper people's ability to function normally. Symptoms include:

 Chronic sleeping disorders, exhaustion, loss of memory and efficiency, loss of self-esteem, focus on failure, profound disillusionment, unwillingness to take leave, risk taking, panic or paranoid attacks, severe depression.

Post-traumatic Stress Disorder (PTSD). Awareness of PTSD has certainly risen in recent years, but the high media profile of the disorder makes it tempting to believe that it is much more common than it actually is. Research in the United States has shown that an average of 8 percent of people will develop PTSD at some point in their lives (Ronald C. Kessler and colleagues 1995). Having said that, a much higher proportion of those who have survived traumatic experiences will temporarily suffer from some or all of the symptoms, including those mentioned above. So while it's important not to exaggerate the threat, the symptoms must be taken very seriously. They fall into three categories:

- Intrusion. This means reliving aspects of the trauma, either
  through vivid flashbacks, intrusive thoughts and images,
  nightmares, or intense distress when reminded of the
  trauma. It is believed that we repeat traumatic experiences
  internally as a way of trying to work through and master
  the experience.
- Avoidance. At the same time, people who have been traumatised often want to get away from the unbearable feelings or from reminders and places associated with the incident or incidents. This can involve keeping busy, avoiding situations that remind them of the trauma, repressing memories, or becoming emotionally numb and cut off.
- Arousal. The experience of threat and panic in trauma can lead to a state of hyper-vigilance in sufferers, that includes disturbed sleep, irritability and aggressive behaviour, lack of concentration and a very sensitive startle response.

The International Society for Traumatic Stress Studies (ISTSS) lists a host of confusing reactions, including shock and disbelief, numbness, fear and anger. Other more complex responses include euphoria that one has survived, guilt for not having saved others and shame for not having reacted as one might have wished.

Perhaps one of the most serious consequences for many victims of trauma is the impact on their sense of meaning. A traumatic event can make people question everything that they believe in and leave them feeling helpless and hopeless. But there is also tremendous opportunity for growth (see below).

There is disagreement over when exactly a formal diagnosis of PTSD can be made, with estimates varying from between four weeks after a traumatic event to several months. For many people, the symptoms will subside of their own accord, but for others they will persist. There are also others who will not experience symptoms until some time after the event. The point here is to keep a close eye on your reactions and those of the people you live and work with. If you feel you are not coping, it is vital that you consult your doctor or a mental health professional.



# Resilience and the capacity to cope

Despite the vast wealth of information now available on trauma, it is still not fully understood why different people can respond so differently to the same event. It is certainly nothing to with notions of strength or weakness. It is sometimes the most physically frail who end up proving the most resilient to trauma.

What we can say is that there are various factors linked to our personal histories and our environment that can contribute to a vulnerability to trauma. We've looked at the straw that breaks the camel's back; an accumulation of stress and prior traumatic experiences can certainly make a traumatic

event much harder to deal with. Experiences of emotional or physical neglect in early childhood and addictive tendencies are also risky in later life.

Conversely, researchers have identified several key factors that bolster resilience, including adaptability, optimism, sense of humour and openness to experience. Some kind of spirituality is also believed to help people preserve a sense of meaning in times of crisis. By far the most powerful component of resilience, however, is social support ... and lots of it.

## Practical guidelines

The role of social support in dealing with trauma cannot be over-emphasised. And the good news is that it is something that we can all do something about. Trauma robs us of our sense of belonging and meaning, so long before we have to go and see a doctor or a therapist, we need to get connected.

Trusted friends and family are usually the first port of call, but many trauma survivors find it helpful to join support groups, online communities or religious organisations. Finding reliable sources of support is a critical step towards restoring a sense of safety in the world. But there are also many other important coping strategies:

**Give yourself time.** Recovery from trauma can be a long process. We are not designed to "get over it" quickly, but we do have the inner resources to get there in the end.

**Get regular exercise.** Gentle exercise will reduce the levels of stress hormones in your body and give you a sense of

purpose and satisfaction. Lying around doing nothing will only make you feel worse. About 20 minutes of moderate exercise a day is ideal.

Feed yourself well and get lots of sleep. Nourishing the body and giving it the rest it needs will bolster your sense of resilience and wellbeing. Alcohol and drugs can be a tempting escape, but they will only diminish your capacity to cope.

Make room for reflection. Coming to terms with terrifying events takes time. Writing a journal or even sitting in quiet meditation provides an opportunity to gently process the experiences.

Don't be afraid to ask for help. While social support is paramount, there comes a time when professional help is needed, especially if symptoms persist after several weeks. Call the CiC Adviceline (see below) and a trained counsellor will help you think through treatment options.

## Post-traumatic growth

There is now mounting evidence (backed by clinical research) that traumatic experiences can lead to significant personal growth and a richer sense of what it means to be alive. Again, these experiences will not be the same for everyone. Positive feelings will also not necessarily erase painful emotions. But researchers have identified several areas of potential growth:

- Enhanced relationships: valuing friends and family and an increased sense of compassion and altruism
- Improved view of self: a sense of personal resilience and strength, acceptance of vulnerability and limits
- Positive changes in life philosophy: finding fresh appreciation for each day and renegotiating what really matters.

Life may never be quite the same after a traumatic event, but with the right kind of support, our worst experiences have the potential to lead us into new and more profound ways of being.

## Further help and information

CiC - Supporting Organisations

www.well-online.co.uk

24-hour Confidential Care Adviceline, providing emotional and practical support.

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