Trauma Explained

The F.O.R.C.E. ‘in the know’ webinar

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Overview

• What is trauma?
• Typical reactions to traumatic events
• Post Traumatic Stress Disorder defined
• What does evidence-based treatment look like?
• How do children react to traumatic events?
• What parents can do to help
• Additional resources
What is Trauma?

- An event experienced as life threatening
  - fear
  - helplessness
  - horror
Some Examples

- Natural Disasters
- Motor Vehicle Accidents
- Life threatening illness or injury
- Fire or explosions
- Assault
- Physical, sexual and emotional abuse
- Sudden death of loved ones
- War/ terrorist attacks
Fight, Flight or Freeze Response

- Normal response to danger
- Seen in all animals (including us)
- Automatically mobilizes the body to protect itself
Typical Reactions

Range of Responses:

Stressed out
Transitory difficulties

Depression
Anxiety
PTSD

Trauma Impacts

- Physiology
- Thoughts
- Behavior
- Emotions
Physical Reactions

**Common**
- Fatigue
- Jumpiness
- Aches and pains
- Stomach upset
- Tenseness
- Eating fluctuations
- Sleep fluctuations

**More Serious**
- Startle reactions
- Shaking/trembling
- Spaced out
- Lasting sleep problems
Cognitive Reactions

Common

- Poor concentration
- Forgetfulness (short term)
- Nightmares
- Thinking a lot about the same thing
- Repeated and vivid memories of the event

More Serious

- Loss of motivation
- Disregard for rules
- Thoughts of harming self or others
- Violent nightmares
- Can’t get mind on anything else
# Emotional Reactions

<table>
<thead>
<tr>
<th>Common</th>
<th>More Serious</th>
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</thead>
<tbody>
<tr>
<td>• Irritable/ angry</td>
<td>• Rage</td>
</tr>
<tr>
<td>• Nervous</td>
<td>• Panic attacks</td>
</tr>
<tr>
<td>• Grief</td>
<td>• “Flat” expression</td>
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<tr>
<td>• Tearful</td>
<td>• Immobilizing depression</td>
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<tr>
<td>• Sense of loss of control</td>
<td>• Hopelessness</td>
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<tr>
<td>• Depressed/ withdrawn</td>
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# Behavioral Reactions

## Common
- Conflicts with others
- Failing to meet deadlines
- Avoiding things

## More Serious
- Alcohol/ drug use
- Suicidal/ homicidal actions
- Impulsive behaviour
- Family violence
- House-bound
In General...

**Common**
- Transitory
- Relationship Strain
- “Off Days”

**More Serious**
- Lasting Changes
- Relationship Breakdown
- Can’t Meet Demands
Aman’s Story

Anxiety BC Website: //youth.anxietybc.com
Post Traumatic Stress Disorder

- Traumatic Event
- Re-experiencing
- Avoidance and Numbing
- Hyperarousal
- Symptoms for at least 1 month
- Significant impairment
Re-experiencing

- Nightmares
- Intrusive memories
- Flashbacks
- Being upset by reminders of the trauma
Avoidance

- Avoiding thoughts, feelings, conversations
- Avoiding people, places, situations
- Trouble remembering
- Emotional numbness
- Loss of interest
- Feeling disconnected from others
- Sense that the future is limited
Hyperarousal

- Irritability
- Poor sleep
- Poor concentration
- Excessively watchful for danger
- Startling easily
How Does PTSD Develop?
Effect of Life-Threatening Events

- Activates survival mode responding
- Overloads and disrupts our capacity to comprehend and integrate the experience

Diagram:
- Traumatic Event
- F/F/F Defense Response
- Disrupted Memory Processing
Trauma Memory

- Elements present during the trauma
- Physical, emotional, and behavioral responses that occurred during the trauma
- Meanings
- May be realistic and unrealistic
Unprocessed Memory of Car Accident

Me

afraid

Got hit

uncontrollable

Car

speeding

lady

blue

Main & 1st

Red light

4 P.M.

Got hit

hurt

scream

PTSD sxs

incompetent

dangerous
Memory Triggers

- Memory evoked
- Re-experiencing
- Danger
- Hyperarousal
- Incompetence
- Avoid blue cars
Avoidance works in the short term but...

- Avoiding triggers tends to control decision making
- Life experience narrows
- Prevents new learning from taking place
- The trauma memory remains unprocessed
What is the Solution?

- Exposure

Wikipedia Definition: Repeated confrontation with situations and objects that cause distress but are not inherently dangerous
How Does Exposure work?

- Break avoidance habit
- Learn that trauma memories and situations are not dangerous
- Learn that negative feelings eventually dissipate
- Learn to discriminate between what happened then and what is happening now
- Gain increased sense of control and competence
Evidence Based Treatments

- Research supports treatments with exposure and cognitive processing elements
  
  - Cognitive Processing Therapy
  
  - Eye Movement Desensitization and Reprocessing
  
  - Prolonged Exposure
Prolonged Exposure

- Type of cognitive behavioral therapy
- PE has large body of empirical evidence that it works
- Positive results with wide variety of trauma
- 10-15 sessions
- Homework
Aman’s Treatment Blog

Anxiety BC Website: //youth.anxietybc.com
PE – 2 Main Components

- Real life exposures
  - Situations, activities, places, objects perceived as dangerous
  - Trauma memory triggers
  - Activities that get people back into life

- Revisiting the memory
  - In session
  - Listen to tape in-between sessions
Processing the Memory
Unprocessed Memory of Car Accident

- Me
  - Afraid
  - Hurt
  - Screamed
- PTSD symptoms
- Car
  - Speeding
  - Lady
  - Blue
- Got hit
  - Main & 1st Street
  - Red light
  - 4 P.M.
- Uncontrollable
- Incompetent
- Dangerous
Processed Memory of Car Accident

Me

afraid

hurt

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Trauma During Childhood

- Traumatic life events are fairly common in children. Research suggests 14-43%.

- Wide range of responses from mild to severe, temporary to chronic.

- Responses vary with age and developmental stage.
How Children May React

- Young children lack an accurate understanding of the relationship between cause and effect
  - May believe their thoughts, wishes and fears can cause things to happen
- Young children less able to anticipate danger and know how to keep themselves safe
- May inaccurately blame themselves or their parents
- May experience overwhelming stress if their parent is unable to help them regulate their strong emotions.
- May not be able to accurately express their emotions or needs – lead to relationship problems
Preschool and Young school age

- Difficulty describing their distress in words
  - Helplessness
  - Uncertainty about whether there is continued danger
  - Generalized fear

- May temporarily lose previously acquired developmental skills (e.g., toilet training, separating from parents at school, speech)

- Nightmares, night terrors, fear of going to sleep

- Traumatic play – working and gaining mastery of the event
School Age

- Persistent safety concerns (self, family, friends)
- Preoccupation with own actions during the trauma
  - Guilt, shame
- Constant retelling of the traumatic event
- Overwhelmed by fear or sadness
- Fear of sleeping alone and other sleep difficulties
- Difficulty concentrating at school
- Physical symptoms (stomach ache, headache)
- Reckless or aggressive behavior
Adolescents

- May feel self-conscious about their emotional responses to the event
  - Fear, sense of vulnerability, sadness, anger, shame, guilt
- Withdrawal from family and friends
- May express fantasies of revenge and retribution
- May develop radical shift in the way they think about the world (e.g., sense of safety, ability to trust)
- Attempts to cope with overwhelming emotions may appear self-destructive
What Parents Can Do To Help

- Let your child know it’s normal to feel upset or scared when something bad or scary happens.
- Encourage your child to express thoughts and feelings without making judgments, and in their own time.
- Protect your child from further exposure to traumatic events.
- Return to normal routines.
- Reassure your child that it was not their fault and that you will keep them safe.
What Parents Can Do To Help

- Allow your child to feel sad or cry
- Give your child a sense of control by offering reasonable options for daily activities (e.g., choosing meals, clothes, etc.)
- If your child starts to engage in behavior from a younger age, remember that this is common and do not criticize the behavior.
- Adults should take care of themselves as children can be distressed by their caretakers’ distress
Young Children

- Provide support, comfort, reassurance
- Help children verbalize their feelings
- Provide consistent caretaking to re-instill sense of security (e.g., make sure that children are picked up from school at anticipated times)
- Tolerate regressive behavior
Older Children

- Encourage the expression of feelings in a supportive environment
- Acknowledge the normality of their feelings
- Correct any distorted understandings of the traumatic event
- Keep teachers in the loop by informing them if thoughts and feelings are interfering with concentration
Adolescents

- Encourage discussion of the traumatic event
- Offer support and normalize the strain on relationships
- Help them understand acting out behavior as attempt to express their feelings about the event
- Help them address sense of helplessness or thoughts of revenge by formulating constructive alternatives
What Can You Do For Yourself?

- Recognize what is happening
- Give yourself time to adjust
- Take care of yourself
  - Eat
  - Exercise
  - Sleep
- Spend time with supportive people
- Communicate your experience
- Do enjoyable things
When a Parent Has PTSD

- The entire family can be affected
- The healthy spouse and/or children may over-function
- Children’s needs may be difficult to meet (emotionally distant, limited patience, children can be reminders)
When Should Someone Seek Treatment?

- Need information
- Things are getting increasingly difficult to handle
- Feel hopeless about their situation
- Changes seem more lasting than transitory
  - More than one month or getting worse
Where families can get support

- Victims of Crime – Crime Victim Assistance Program
- Military, Veterans, RCMP – Operational Stress Injury Clinics
- Mental Health Professionals
  - Psychologists, psychiatrists, counselors, mental health programs, school counselors
- Peer support programs (e.g., OSISS)
- Self-help resources (e.g., Anxiety BC)
For More Information

- National Center for Posttraumatic Stress Disorder
  
  www.ptsd.va.gov

- International Society for Traumatic Stress Studies
  
  www.istss.org

- Australian Centre for Posttraumatic Mental Health
  
  www.acpmh.unimelb.edu.au
For More Information

- National Child Traumatic Stress Network
  - www.nctsn.org

- Anxiety BC
  - www.anxietybc.ca

- Center for the Study of Traumatic Stress
  - www.cstsonline.org
Questions?

Comments?