

Part 1

# **What Is Trauma and How Can It Affect Your Life?**

## Chapter 1

# How People Respond to Traumatic Events

People are not robots—they have complicated thoughts, feelings, and emotions. That's why it is perfectly normal to react to traumatic events; it makes us human. Most of us start out as loving, trusting people. Trauma interferes with some of our basic assumptions about the world. For example, many people believe on some level that the world is predictable, or that bad things don't happen to good people. The fact that trauma changes your basic beliefs about the world is why it is so difficult to process on your own.

## What Is Trauma?

In common conversation, people sometimes use the word "traumatic" interchangeably with "stressful." If you've lived through a traumatic event, you know trauma and stress are not the same thing. Everyday hassles (for example, a long commute) and even enduring difficulties (for example, dealing with unemployment) can be stressful. The difference is that traumatic events are life-threatening. With a traumatic event:

- You experience or witness a situation that involves threat of actual death or serious injury.
- You experience or witness a situation where your physical well-being—or someone else's—is seriously threatened.
- You react to what you've experienced or witnessed with fear, helplessness, or horror.

Based on this list, you can see why things like combat, being physically or sexually assaulted, or living through a natural disaster or car accident are types of traumatic events. They involve a serious threat to your life (or the lives of those around you) and your physical safety.

In worksheet 1, you will take a look at your potentially traumatic life experiences. A number of the more common traumatic events are listed down the left side of the page. There is also room near the bottom to fill in a traumatic event (or events) that isn't on the list—just remember the criteria of a serious physical threat to life and safety (either yours or someone else's). The point of this exercise is not to overwhelm you. You do not need to go into great detail about any of these events, you simply need to see if any of them have happened to you. It takes a great deal of courage to start looking at these events, and it is the first step toward healing.

## Worksheet 1: Have I Experienced a Traumatic Event?

**Purpose:** To see if you have experienced traumatic events, and if so, what they were.

**Instructions:** For each of these categories of traumatic events, write down whether you experienced or witnessed it and, if so, whether your life or safety, or someone else's life or safety, was in danger. Describe briefly (in a few words or a sentence) how you reacted to the event. Use more paper if you need to.

Difficult Experience	Experienced or Witnessed It?	Was My Life (or Someone Else's Life) in Danger or Was My Safety (or Someone Else's) Threatened?	How I Reacted
Example: Sexual assault (as an adult)	<i>Happened to me last year</i>	Yes	<i>I felt completely helpless, frightened, and numb—I was shocked that this could happen to me.</i>
Fire, flood, or other natural disaster			
Accident (for example, car accident or explosion)			
Unwanted sexual contact before the age of eighteen (childhood sexual abuse)			

Unwanted sexual contact as an adult			
Physical assault or threat of assault by someone you know (for example, domestic violence)			
Physical assault or threat of assault by a stranger or in your community (for example, mugging, stabbing, or shooting)			
Exposure to combat as a soldier or civilian			
Captivity, imprisonment, or torture			
Sudden, unexpected death of a loved one			
Other:			

## What Is PTSD?

*Post-traumatic stress disorder (PTSD)* is a common reaction to experiencing something traumatic. To have a diagnosis of PTSD, you need to have been exposed to a traumatic event that involved death, threat of death, injury, or threat to the physical safety of yourself or someone else. Your reaction to this event usually involves intense fear, helplessness, or horror. In addition, after the trauma, you experience one or more of these other types of symptoms: re-experiencing, avoidance, or feeling constantly anxious or on edge.

### *Re-experiencing*

There are various ways that a traumatic event can be re-experienced. People with PTSD often experience bad dreams about the event; may have distressing memories of the trauma; and may have times they feel the trauma is actually happening all over again. In addition, you may feel very emotionally or physically distressed when you are re-experiencing traumatic events. For example, your heart might start racing, you might start crying uncontrollably, or you might feel highly anxious.

#### CASE EXAMPLE

Don is a twenty-five-year-old veteran who served in the US military as a marine. He was deployed three times to Iraq and Afghanistan over the course of twenty-eight months. Don and his unit experienced hostile fire on numerous occasions. Don says the most distressing incident took place when his good friend and fellow marine was killed in a sniper attack. They were in the same vehicle on a street in Iraq. His friend died before they could get him medical attention, and Don held him during the last moments of his life. Since returning home, Don has had trouble sleeping because of nightmares, and he is very reactive to loud noises and people walking behind him. When Don watches television, any violent images can trigger a flashback. Once when he was watching the local news, he saw some footage of a car accident. It brought back vivid memories of holding his injured friend. Don said he was shaking and crying uncontrollably and felt confused about how much time had actually passed. His wife said he began screaming for help and didn't realize that he was at home and not in Iraq.

## *Avoidance*

Because being reminded of the traumatic event (or events) is so painful, you may find yourself going to great lengths to avoid any reminders. For example, you might not want to talk about or think about the trauma. You might also avoid certain people or places that remind you of the event. For some people, the avoidance runs so deep that they cannot remember important aspects of the event. Also, you might lack interest in life—feeling you are not connecting with people. Many people with PTSD feel numb emotionally, particularly when it comes to positive emotions. Also, you may feel there is no reason to plan for the future, or that you may not live to experience positive things in your life.

### CASE EXAMPLE

Carla is a twenty-year-old college student. When she was nineteen years old she was sexually assaulted by the coach of her college basketball team. Prior to the assault, he showed Carla a great deal of attention, often paying her compliments and offering her rides back to her dorm. Carla enjoyed his attention but thought it was harmless flirtation. After the assault, Carla immediately quit the basketball team. She hasn't returned phone calls from her former teammates and she hasn't attended class regularly for over six months. Carla stopped dating and rarely goes out with friends. She used to enjoy watching sports on television, but she avoids it now because it causes her to cry uncontrollably and think about what the coach did to her. Carla feels betrayed, angry, and lonely and says she doubts that she will ever be able to trust anyone again, particularly a man.

## *Feeling Constantly Anxious or on Edge*

The final set of symptoms having to do with PTSD has to do with feeling overly anxious, worried, or on edge most of the time. For example, you may have difficulty sleeping and concentrating. Many people with PTSD talk about difficulty managing their anger, or feeling very irritable. You may also be "on guard" a lot of the time, always scanning your environment for a possible threat. Related to this, you might be easily startled or reactive to noises or unexpected changes in your environment.

### CASE EXAMPLE

Mike is a forty-five-year-old father of two. Five months ago, while waiting at the train station to go to work, Mike was robbed at gunpoint by a group of four teenagers. Mike was badly beaten during the incident, and he had to be rushed to the emergency room for a concussion after being kicked and punched. Although Mike recovered physically, he had a great deal of trouble returning to work. He tried to take the train again, but found that he was continually examining the faces of the people on the train, worried that someone might harm him. If he felt nervous, he would exit the train or try to enter another car while the train was in motion. On several occasions he ran out of the station and hailed a cab to work. Mike says he's quick to pick fights with people who look at him the wrong way, and that he usually thinks that people are out to hurt him in some way.

Different people experience different symptoms. One way to decide which techniques will work best for you is to figure out which types of symptoms you are experiencing. Worksheet 2 will not give you a diagnosis of PTSD—only a trained professional can provide you with an official diagnosis. Instead, the purpose of this worksheet is to help you decide a) which types of symptoms you are experiencing, and b) which chapters of this workbook will be most helpful for you.

## Worksheet 2: What Types of Symptoms Do I Have?

**Purpose:** To determine what symptoms of trauma you may have, and which exercises it will be most helpful to focus on based on your symptoms.

**Instructions:** Mark the symptoms below that apply to you. If you have more than one symptom in a cluster, you should focus on the exercises in the relevant chapters for that cluster.

<b>Cluster 1: Feeling Constantly Anxious or On Edge</b>	<b>Relevant Exercises in Chapter 4</b>
You often have difficulty falling or staying asleep.	___ Yes
You experience intense irritability or anger on a regular basis.	___ Yes
You often have difficulty concentrating.	___ Yes
You feel anxious and worried much of the time, often scanning the environment for threats.	___ Yes
You are easily startled (for example, when you experience unexpected noises or feel threatened).	___ Yes
<b>Cluster 2: Avoidance</b>	<b>Relevant Exercises in Chapter 5</b>
You try to avoid thoughts, feelings, or conversations that remind you of the traumatic event.	___ Yes
You try to avoid people, places, and situations that remind you of the traumatic event.	___ Yes
You can't recall important aspects of the traumatic event, even if you try.	___ Yes
You are not really interested in things you used to enjoy before the traumatic event.	___ Yes
You don't feel connected or close to other people.	___ Yes
You have trouble experiencing emotions and feelings (for example, you feel emotionally numb).	___ Yes
You rarely make plans for the future (for example, you sometimes think your future will be cut short).	___ Yes

<b>Cluster 3: Re-experiencing</b>	<b>Relevant Exercises in Chapter 6</b>
You have recurrent and upsetting recollections of the event (for example, distressing memories, images, thoughts, and feelings).	___ Yes
You have repeated, upsetting dreams about the event.	___ Yes
There are times when you feel or act as if the event is happening all over again (for example, having flashbacks or images that make you feel you are in the situation all over again; losing your sense of time).	___ Yes
You feel extremely upset when something in the environment, or a thought or feeling in your own mind, reminds you of the event.	___ Yes
Your body reacts when things remind you of the trauma (for example, sweating, heart racing, light-headedness, upset stomach).	___ Yes

## How Are Traumatic Memories Processed?

Part of the key to understanding how we react to traumatic events is to look a little closer at how these memories are processed. It is probably obvious that we don't remember every single second of every day. Normal memory isn't like a video recorder. Let's say you park your car in a large parking lot and go to a meeting. An hour later, you'd have a lot of trouble remembering the color of the car parked next to you. It is true that you probably saw the car, but it is unlikely that you encoded or remembered any sort of information about it. After all, the car color probably isn't an emotionally charged memory. It is just an everyday event.

Trauma memories are different. These events are not run of the mill. They are frightening, horrible, and emotionally upsetting. Before a traumatic event you probably had some preexisting beliefs about how the world works, such as:

- The world is basically a safe place.
- Life is predictable.
- Horrible things don't happen to good people.

- Really bad things can happen to other people, not me.

The reason trauma memories are so difficult to deal with is that they are highly emotionally charged and they go against our beliefs about how the world works. You may be replaying a traumatic event over and over again in your mind to find a way to understand how it could have happened—trying to fit it into your belief system (Cahill and Foa 2007). When you cannot find a way to understand what has happened to you, you may experience anxiety, depression, shame, and guilt (Janoff-Bulman 2002).

Another reason that trauma memories are so difficult to deal with is that they may actually be stored in different parts of the brain and coded differently than regular memories (LeDoux 1992). Some parts of a traumatic event are processed consciously and are *verbally accessible*. Verbally accessible information is information you easily remember about where you were, what you were doing, and how you reacted after a traumatic event. There is also a portion of the event that is processed nonconsciously—out of your awareness. These emotionally charged memories are *situationally accessible*, meaning you have less control over when and how you remember them. They are often triggered when something reminds you of the traumatic event. People, places, smells, sounds, and feelings can all remind you of these types of trauma memories. These situationally accessible memories are often rich in detail; they were processed rapidly by the brain during the time of the actual traumatic event (Brewin, Dalgleish, and Joseph 1996). To tackle traumatic memories we need to get a handle on the situationally activated memories (usually these are what people experience as “flashbacks”) as well as find a way to integrate our shattered assumptions about the world into a new, coherent belief system. Figure 2 illustrates the relationship between verbally and situationally accessible memories.

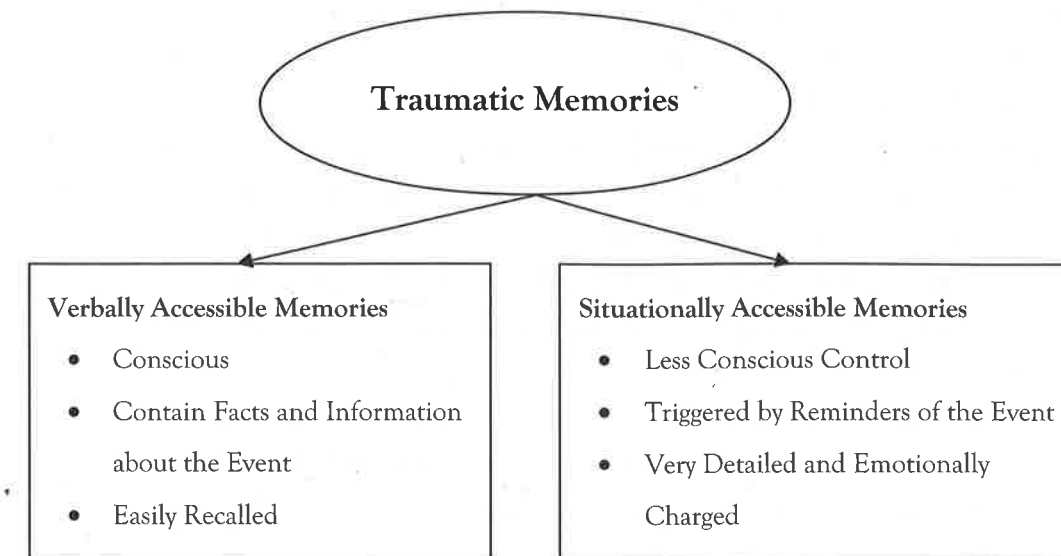


Figure 2: How Trauma Memories Are Stored and Retrieved

People cope with trauma memories in different ways. Some find that the memories play in their minds over and over again. They may find that the verbally accessible memories completely interfere with their life and their ability to function. Others try to avoid the trauma memories at all costs, particularly the situationally accessible memories, which tend to be very detailed and intense. They avoid any situations or thoughts that might bring up these memories. The end result is the same, however: avoidance makes it difficult to lead a happy and healthy life.

## Prevalence of PTSD

The good news is that even though traumatic events are common, PTSD is not as common. Eight percent of men and twenty-five percent of women who are exposed to something

traumatic develop full-blown PTSD (Kimerling, Ouimette, and Wolfe 2002), which means that they suffer from re-experiencing symptoms and from avoidance and increased anxiety. The likelihood of developing PTSD after a traumatic event depends on lots of factors, including the nature of what happened to you and your level of social support. The important thing to remember is that people are incredibly resilient and have the ability to heal from even the most difficult traumas, given the right set of tools and circumstances. Even if you have many symptoms of PTSD, do not lose heart. There is help and there is healing. This book will help you explore what treatment approaches may be right for you.

As mentioned above, some types of traumatic events are more closely linked to the development of PTSD. For example, compared to other types of traumas, people who live through combat and sexual assault are more likely to develop PTSD (Foa et al. 2000). This may be because these traumas are highly violent and unpredictable, and they involve a perpetrator deliberately inflicting violence against you.

## What Are Other Reactions to Traumatic Events?

There are many reactions to traumatic events that are somewhat different from PTSD. These include acute stress and grief reactions, depression, and other types of anxiety reactions. Although the exercises in this book are mainly focused on PTSD, some of the techniques may also be useful for helping you with feelings of depression or anxiety.

### *Acute Stress and Grief Reactions*

A person with *acute stress disorder* has many of the symptoms of PTSD for a period of several weeks after the stressor. It is not a prolonged reaction, and usually it resolves on its own, particularly if you have a good support system and are generally healthy. *Grief reactions* are another way that people may respond to traumatic events. These usually consist of extreme sadness, difficulty maintaining a routine, difficulty concentrating, and problems with guilt and anger. Grief reactions can happen after the sudden, unexpected death of a

loved one, and they can last a few weeks or longer. They may also be associated with sudden illness or injury.

### *Depression*

Depression is a common consequence of experiencing a traumatic event. The prevalence of depression varies a lot depending on the type of trauma experienced and the amount of social support available after it happens. Many survivors experience extreme sadness, weight loss or weight gain, difficulty concentrating, and a general loss of interest in things they used to enjoy. This may be accompanied by feelings of guilt, hopelessness, irritability, or anger. Depression can last for several weeks or for much longer periods. Survivor guilt and self-blame are closely related to depression. If you lived through something traumatic and others did not, you may be asking yourself why you survived. Sadly, it is not uncommon for people to feel a sense of guilt and self-blame, thinking about what they could have done differently to prevent the traumatic event or change the outcome.

### *Other Reactions*

Some people who have lived through a traumatic event may have different types of anxiety-related actions. For example, you may have intense periods of fear and anxiety that last approximately five to ten minutes. During these *panic attacks*, you may feel like you are going crazy, fear you are losing control, and experience nausea, dizziness, sweating, and a racing heart. The panic attacks may be cued by something that reminds you of the trauma, or they may come out of the blue. You may also find yourself avoiding situations or going to great lengths to reduce your feelings of anxiety. For example, a combat veteran may avoid standing with his back to the door in a crowded room. He might be afraid that he will not be able to escape in case of an ambush.

Finally, some people may find themselves coping with a traumatic event by using drugs and alcohol. The next chapter will explore issues of substance abuse and coping in greater detail.



## Worksheet 3: What Are My Other Symptoms?

**Purpose:** To help you decide a) if you are experiencing other symptoms related to your trauma, and b) which chapters of this workbook will be most helpful for you.

**Instructions:** Mark the symptoms below that apply to you. If you are experiencing the symptom listed, focus on the exercises in the relevant chapters.

I have prolonged periods of sadness, crying, and hopelessness.	<input type="checkbox"/> Yes	Focus on chapters 4 and 5
I am unable to keep up with my routine (for example, go to school, meet deadlines at work, finish tasks around the house).	<input type="checkbox"/> Yes	Focus on chapters 4 and 5
Sometimes I blame myself for the traumatic event.	<input type="checkbox"/> Yes	Focus on chapter 4
Sometimes I feel guilty about what I did or didn't do during the traumatic event.	<input type="checkbox"/> Yes	Focus on chapter 4
I experience periods of intense anxiety that usually peak and subside in a few minutes (panic attacks) and that are associated with the traumatic event.	<input type="checkbox"/> Yes	Focus on chapters 5 and 6

## Conclusion

Many people with PTSD find it difficult to talk about their symptoms and diagnosis. You may feel that thinking about your PTSD makes you feel ashamed, helpless, or alone. But it is important for you to remember that a diagnosis is just a tool. Looking at your symptoms, naming them, and understanding them will help you to choose exercises that can help you to heal. The symptoms don't need to define you and they don't need to control your life.

There is great evidence that people are resilient. There are several factors that predict recovery from a traumatic event:

- Experiencing one rather than several traumatic events in your life
- Having friends and family to support you
- Getting support from people who've been through a similar trauma
- Finding a sense of meaning and purpose for your life
- Feeling that you can handle the challenges of life (a sense of mastery)
- Keeping up your routines and staying involved in daily life
- Using therapy if you have overwhelming symptoms
- Using coping strategies that help you face rather than avoid your fears and symptoms.

Some of these factors are things you cannot change. For example, you cannot control whether you have experienced more than one traumatic event. But there are many other factors that you can influence—for example, your level of social support and your attempts to face your fears. The exercises in chapters 4, 5, and 6 will focus on helping you develop your own resilience.