

When to Call for Help

Should you experience any of these reactions beyond the initial four week period following the incident, please call us immediately.

The traumatic event is persistently reexperienced in at least one of the following ways:

- 1. Recurrent, intrusive, distressing recollections of the event, including images, thoughts, or perceptions.
- 2. Recurrent, distressing dreams of the event.
- 3. Acting or feeling as if the traumatic event were recurring (includes a sense of reliving the experience, illusions, halfucinations, and dissociative flashback episodes, including those that occur upon awakening or when intoxicated).
- 4. Intense psychological distress at exposure to internal cues that symbolize or resemble an aspect of the fraumatic event. (Fear, anxiety, anger are possible examples.)
- 5. Physiological reactivity upon exposure to internal or external cues that symbolize or resemble an aspect of the traumatic event. (Nausea, difficulty breathing, faintness are a few examples.)

Numbing and Avoidance

Persistent avoidance of stimuli associated with the trauma or numbing of general responsiveness (not present before the trauma).

- 1. Efforts to avoid thoughts, feelings, or conversations associated with the trauma.
- 2. Efforts to avoid activities, places, or people that arouse recollections of the trauma.
- 3. Inability to recall an important aspect of the trauma.
- 4. Markedly diminished interest or participation in significant activities.
- 5. Feeling of detachment or estrangement from others.
- 6. Restricted range of affect (e.g., unable to have loving feelings).



7. Sense of a foreshortened future (e.g., does not expect to have a career, marriage, or children, or a normal life span).

Hyperarousal and Persistent Symptoms of Increased Arousal (not present before the trauma - see note)

- 1. Difficulty falling or staying asleep
- 2. Irritability or outbursts of anger
- 3. Difficulty concentrating
- 4. Hypervigilance
- Exaggerated startle response

These reactions are not at all unusual during the first four weeks following a traumatic event. Reactions may extend beyond the four week acute stress period when a person is involved in disasters or other external events where physical reminders cannot be avoided. The same may occur when the details of an incident are kept alive in the media for an extended period of time.

Should any of these symptoms persist beyond a 4-8 week period and/or emerge as delayed reactions months later, we strongly recommend consultation with a trauma specialist.

NOTE: Trauma can induce biological and neurological changes which play a part in the ability to sleep, levels of anxiety, concentration and other trauma specific reactions. Should reactions persist beyond the four week period, consultation for temporary medication should be considered. The loss of sleep, intrusive thoughts, anxiety, and other reactions induced by trauma can deplete an individual of much needed physical rest and inner emotional calmness, and precipitate yet more problems for the individual. Medication, at times, is simply a necessity.

(gathered from the APA-DSM-I	·V)	
You may contact us at		_•



Helpful Strategies For Trauma Victims/Survivors

- It is very important to your recovery to get enough rest, especially the first 4 6 weeks following the trauma.
 - If you cannot sleep at night, take "cat" naps of 15 minutes 1/2 hour during the day.
 - If waking up during the night because of traumatic dreams, know they will pass in time. Do what comforts you. Read a good book until you become sleepy again. Snack, watch television, listen to music, write, do some housework. Remember, this will be a temporary change.
- Exercise of some kind is important to help relieve you of the tension that traumatic experiences create. Even if you have not been exercising, go for a short walk. Walk the dog an extra time. Do housework or add a few minutes to your usual exercise routine.
- Avoid too much caffeine, alcohol, or other stimulants. Do not self medicate.
 <u>NOTE</u>: If you are having difficulties with relaxing or sleeping following the trauma, then call for a temporary prescription to help you sleep, but if this persists beyond 4-6 weeks consult with a trauma specialist immediately.
- Pull back on making a commitment to additional responsibilities for the first four weeks. The tendency for some is to take on additional responsibilities thinking it will help them forget. In reality, it frequently drains them of energy, delays the healing process and intensifies future reactions when they finally emerge.
- Be protective and nurturing of yourself. It's okay to want to be by yourself, or just stay around home with the family. Eat whatever your comfort foods are, as frequently as you need. Do those things which relax you, give you some pleasure.
- Expect during the 4 6 weeks following the event that new memories of and reactions to your experience are likely to emerge. This does not mean things are getting worse. Generally these newer memories and reactions mean you are, in fact, feeling more protected, safer, and rested enough to now deal with them.
- Understand that your trauma reactions need to be expressed and experienced by you in order for you to heal. Kids, for example, go to the same horror movie, like Nightmare On Elm Street, four, five, six times, so they can master their fear, the terror they experience when seeing the movie for the first time.



Traumatic dreams, intrusive thoughts, images and other trauma specific reactions repeat themselves in much the same way. In most cases they will become less upsetting and frightening to you and after 4 - 6 weeks occur less and less frequently.

- If any trauma reaction continues beyond six weeks from when the trauma occurred, you really do need to talk with a trauma consultant. If you do not, such reactions can become chronic, as well as create additional problems for you.
- We all have different reactions. What scares you may not scare someone else.
 If you are experiencing reactions after the six week period, it does not mean
 something is terribly wrong with you. It means your past experiences are such
 that they just don't know how to respond to what happened. Generally talking to
 a trauma specialist a few times will resolve the problem.
- A traumatic experience can, however, terrorize the strongest and healthiest. It can induce such terror, that our lives become disorganized or disoriented. We become someone strange or act in ways we have never acted before. This can panic us.

Trauma is not an experience we want to keep to ourselves. It is in fact an experience we want to get rid of as quickly as possible. Do not hesitate to consult with a trauma specialist when your reactions have the best of you or because you simply want to know what else you might have to be prepared to experience.

Finally, traumatic experiences tend to change the way we look at life, our behaviors, activities, relationships and our future. Expect in the weeks to come to see the world differently, your friends, loved ones, work relationships. In time, you will redefine what you want for yourself.

The first 4 - 6 weeks therefore is not a time to be making any major decisions. Put what you can on hold. During recovery from a trauma everything is a bit distorted. You want to wait whenever possible to deal with major decisions until after you have had time (4 - 6 weeks) to reorder your life and feel stable once again.

Should you need further assistance you may call The National Institute for Trauma and Loss in Children (TLC) at (313) 885-0390.