

COMMON REACTIONS TO TRAUMA

Most individuals who have experienced trauma(s) have similar responses. “Trauma” is an individual experience and isn’t always that “one” hugely terrifying or gruesome event. The accumulation of “yucky” events in our timeline can have these consequences as well.

The most common problems after a trauma are:

1. **Fear and anxiety.**

Anxiety is a common and natural response to a dangerous situation. For many people it lasts long after the trauma has ended. This happens when one’s views of the world and sense of safety have changed and become more negative. You may become anxious when you remember the trauma. But sometimes anxiety may come from out of the blue. Triggers or cues that can cause anxiety may include places, times of day, certain smells and tastes, noises, or any situation that reminds you of the trauma. As you begin to pay more attention to the times you feel afraid, you can discover the triggers for your anxiety. In this way, you may learn that some of the out-of-the blue anxiety is really triggered by things that remind you of the trauma.

2. **Re-experiencing the trauma.**

People who have been traumatized often “re-experience” the traumatic event through unwanted thoughts that are difficult to get rid of- your brain gets hijacked when you don’t want it to!

Some people have **flashbacks**, or very vivid images, as if the trauma is occurring again- while some people feel a more subtle change in emotion [Smell of smoke in the air may create a sense of distress].

Nightmares are also common. Sometimes we remember them, other times notice that the bed is disheveled and we didn’t sleep well. If you are with someone who is sleeping and experiencing a nightmare- do not wake them unless they are at risk of harming themselves or someone else.

These symptoms occur because a traumatic experience is so different from everyday experiences that you can’t fit it into what you know about the world. So in order to understand what happened, your mind keeps bringing the memory back, as if to better digest it and fit it in.

3. **Increased arousal**

A very common response to trauma. This includes **feeling jumpy, jittery, and shaky; being easily startled; and having trouble concentrating or sleeping**. Continuous arousal can lead to **impatience and irritability**, especially if you’re not getting enough sleep. These arousal reactions are due to the *fight or flight response* in your body. The fight or flight response is how we protect ourselves against danger. There are real physical changes that occur when this mechanism of safety is activated by our minds.

People who have been traumatized often see the world as filled with danger, so their **bodies are on constant alert**, always ready to respond immediately to any attack. The problem is that increased arousal is useful in truly dangerous situations, such as if we find ourselves facing a tiger. But alertness becomes very uncomfortable when it continues for a long time even in safe situations. **Another reaction to danger is to freeze**, like the deer in the headlights, this reaction can also occur during a trauma and can lead to feelings of embarrassment and a sense of incompetence in the individual.

4. Avoidance

Avoidance is a common way of managing trauma-related pain. The most common is avoiding situations that remind you of the trauma, such as the place where it happened (the **“scars in the road”**). Often situations that are less directly related to the trauma are also avoided, such as going out in the evening if the trauma occurred at night. Another way to reduce discomfort is to try to push away painful thoughts and feelings [often through overworking, alcohol misuse, and engaging in activities to keep our minds occupied]. This can lead to **feelings of numbness**, where you find it difficult to have both fearful and pleasant or loving feelings [“I can see that everyone is having a good time, but I don’t feel anything”]. Sometimes the painful thoughts or feelings may be so intense that your mind just blocks them out altogether, and you may not remember parts of the trauma.

5. “Quickness to anger over seemingly unimportant things.”

Many people who have been traumatized feel **Anger/ Irritability**. If you are not used to feeling angry, this may seem scary as well. It may be especially confusing to feel angry at those who are closest to you. Sometimes people feel angry because of feeling irritable so often. Anger can also arise from a feeling that the world is not fair. Anger can also give us a sense of control, which may or may not be true. It may seem that people are more likely to listen to us and do what we say- when we come from a place of anger. Many times anger doesn’t come from a desire to control another person, but to keep them safe.

6. Guilt and Shame

Guilt: the fact of having committed a specified or implied offense or crime (an action)

Shame: a painful feeling of humiliation or distress caused by the consciousness of wrong or foolish behavior (belief about self)

Blame: “A way to discharge pain and discomfort.” (Berne Brown) Doesn’t impact change in behavior.

Many people blame themselves for things they did or didn’t do. You may feel ashamed because during the trauma you acted in ways that you would not otherwise have done [can create a change in the belief about competency in yourself- effects decision making and interpersonal relationships]. Sometimes, other people may blame you for the trauma [possibly compromising sense of trust in others]. Feeling guilty about the trauma means that you are taking responsibility for what occurred, when rarely one person is singly responsible for an event.

7. Grief and Depression

This can include feeling down, sad, hopeless, or despairing. You may cry more often. You may lose interest in people and activities you used to enjoy. You may also feel that plans you had for the future don't seem to matter anymore, or that life isn't worth living. These feelings can lead to thoughts of wishing you were dead, or doing something to hurt or try to kill yourself. Because experiencing trauma can change so much of how you see the world and yourself, it may make sense to feel sad and to grieve.

8. Negativity

Self-image and views of the world often become more negative after a trauma. You may tell yourself, "If I hadn't been so weak or stupid this wouldn't have happened to me." Many people see themselves as more negative overall after the trauma ("I am a bad person and deserved this").

"How many of you have learned to trust people more through the course of your career?"

It is also very common to see others more negatively and to feel that you **can't trust anyone**. If you used to think about the world as a safe place, experiences of trauma may suddenly make you think that the world is very dangerous. If you had previous bad experiences, these experiences may convince you that the world is dangerous and others aren't to be trusted. Relationships with others can become tense, and it may be difficult to become intimate with people as your trust decreases.

9. Changes in intimacy & Sexual Relationships

Many people find it difficult to feel sexual or have sexual relationships. This is especially true for those who have been sexually assaulted, since in addition to the lack of trust, sex itself is a reminder of the assault. The opposite can also be true, where sex is used as a means to "feel something", prove ability to make connection, or distract the mind from the intrusive negative thoughts and feelings.

10. Alcohol & Drug Misuse

Some people increase their use of alcohol or drugs after a trauma. There is nothing wrong with responsible drinking, but if your use of alcohol or drugs has increased as a result of your traumatic experience, is being used for a purpose like being able to sleep, it can slow down your recovery and cause problems of its own (avoidance strategy).

Summary

Many of the reactions to trauma are connected to one another. For example, a flashback may make you feel out of control and will therefore produce fear and arousal. Many people think that their common reactions to the trauma mean that they are "going crazy" or "losing it." These thoughts can make them even more fearful.

As you become aware of the changes you have gone through in these experiences and as you process these experiences, the symptoms should become less distressing.

If you find yourself thinking- “Yup, this is me” or maybe you recognize these things in a friend, please reach out to the resources around you for education and support. Trauma related stress has nothing to do with being “broken”, “weak” or “crazy”. It just means you are a human being who has witnessed some terrible facts in our world. The great thing is that there are effective (and time limited) therapies that help us to process and organize these experiences, giving us back a sense of competence and control over our thoughts and feelings again.

Thank you for your service to your community.

Be well,

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Document adapted by Tina Casola, LMFT. Behavioral Wellness provider specializing in first responders and disaster services personnel from materials in the Prolonged Exposure Therapy protocol developed by Edna Foa, PhD, Director of the Center for the Treatment and Study of Anxiety @ U Penn. These “Common Reactions to Trauma” are part of the PE Protocol developed by Edna Foa, PhD and her team (with some adaptations). This is one of the trusted protocols used to treat PTSD in the Veterans Health Administration.