

FD Consultants

Psychosocial Support and Trauma Specialist Services

Trauma information sheet

Traumatic stress is a normal reaction to an abnormal event. Everyone can recover from trauma with the appropriate help.

What is Trauma?

- Trauma is often defined as *'a deeply distressing or disturbing experience'*.
- Psychological trauma refers to the response a person has to an event or situation they find threatening and overwhelming.
- What someone experiences as traumatic is personal and subjective. Therefore, what one person experiences as traumatic another might not. However, traumatic experiences often involve a person feeling:
 - threatened
 - harmed
 - humiliated
 - invalidated
 - trapped
 - powerless
 - ashamed
 - unsupported
- Traumatic experiences may therefore include (but are not limited to):
 - sexual violence and sexual harassment
 - sudden or complex bereavement
 - any kind of abuse (physical, psychological or sexual)
 - being attacked
 - being involved in war, a transport accident or act of terrorism
 - natural disaster
 - bullying and harassment
 - a difficult childbirth or experience of illness or hospital treatment
 - organisational restructuring
 - prejudice and racism
 - domestic violence or difficult breakup of a relationship
 - social media threat, intimidation and stalking



- We can also be traumatised when directly witnessing someone else suffering in one of these ways.
- There are several different types of trauma:
 - **acute or single event trauma** refers to a one-off event or situation that is traumatic (for example, a sexual assault or serious accident)
 - **complex trauma** refers to repeated or ongoing trauma that may be multi-layered and go on for a long period of time (for example, child abuse or domestic violence, or the experience of living through conflict)
 - **relational trauma** is trauma that occurs in the context of a close caregiving or intimate relationship
 - **vicarious or secondary trauma** refers to the impact hearing about other people's trauma can have on an individual, and is common amongst professionals working with the traumatized (please see FD Consultants separate info sheet on vicarious trauma)

Traumatic events that result in individuals suffering Post-Traumatic Stress Disorder (PTSD) are not processed in the brain in the same way as other experiences. The memories can be triggered through visual, auditory and other somatic senses, resulting in flashbacks and intrusive thoughts. The traumatic experience does not get 'date stamped' and therefore, can be re-lived, as if happening in the present moment.

What are the common symptoms of Trauma?

We may experience trauma symptoms acutely and immediately or they may lay dormant for months, or even years. In a trauma situation, our bodies and brains automatically focus on survival. It may only be when the situation settles, and we begin to feel safe again, that the after-effects of trauma come to the surface. Additionally, trauma symptoms may also be triggered when someone who has experienced trauma in the past finds themselves in another traumatic or stressful situation.

Some common symptoms of trauma may include:

- hyperarousal/anxiety
 - avoidance
 - intrusive thoughts
 - lack of concentration/impaired memory
 - headaches/migraine
 - digestive problems
 - difficulty sleeping
 - emotional outbursts
 - feeling detached/not really there
 - exhaustion
- Common responses in the midst of a traumatic situation are:
 - **Fight** – fighting back, struggling or protesting against what is happening
 - **Flight** – seeking to hide or run away
 - **Freeze** – feeling paralysed and unable to move or act
 - **Fawn/Flop** – seeking to appease or please whoever is harming us or feeling unable to object, as if we're 'giving in' or submitting to the situation

These responses tend to be automatic and unchosen. They represent our most primitive and survival-focused instincts kicking in.

- Whilst in *fight and flight* our *sympathetic nervous system* will become engaged, and we may experience:
 - dry mouth
 - increased heartbeat
 - increased need to go to the toilet (or loss of control of bladder or bowels)
 - 'fluttery' stomach
 - sweatiness
 - racing mind
 - narrowed vision
- Whilst in *freeze, fawn or flop* our *para-sympathetic nervous system* will become engaged and we may experience:
 - trembling
 - dissociating (feeling numb and detached from our body and surroundings)
 - lack of focus
 - sense of being overwhelmed

The intensity and overwhelming nature of trauma affects our brain's ability to process, store and retrieve trauma memories of our own will. Therefore, many people who suffer *post-traumatic stress disorder* (PTSD) or *complex post-traumatic stress disorder* (CPTSD) will experience:

- **flashbacks** (disturbing memories returning involuntarily, often with a strong sensory element related to sound, smell, taste etc.)
- **nightmares** (unpleasant dreams relating to a past traumatic event)
- a strong need to **avoid** certain places, people or situations that feel linked to the initial trauma

Unfortunately, many people who have experienced trauma carry shame around what happened to them, or a sense that they could or should have responded differently.

This can result in:

- reluctance to seek appropriate support
- secrecy and difficulties within relationships
- a tendency to seek comfort and escape through alcohol, drugs or other addictive behaviours
- thoughts of self-harm or suicide

Self-help tips for Trauma

- **Breathing/Grounding techniques.**

Flashbacks, panic attacks, and anxiety are all common but unsettling responses to trauma. To help yourself in the moment when these things happen:

- attend to your breath, breathing deeply and making your out breath longer than your in breath (this will soothe and calm your system when you feel 'activated' by trauma)
- find an object to touch or fix your gaze on that reminds you that you are away from your past situation and you are currently safe (this will ground you in the present)
- look around the room and find five things that are the same colour or that begin with the same letter (this will re-engage the pre-frontal cortex, the more rational part of the brain, which tends to go 'offline' when we're highly anxious or stressed)
- chew some minty gum, touch something cold, or stamp your feet up and down on the floor (this will re-engage your senses and bring you back into your body if you're dissociating)
- **Look after your body.** Trauma memories are often stored in our bodies and the experience of being in a trauma response state can leave an imprint and the possibility of physical health issues further down the line. Whilst it is important to seek medical advice for any persistent aches, pains or other complaints, the following will also likely help:
 - take some gentle exercise on a regular basis to relieve tension (yoga, pilates and martial arts or strength training can especially help in terms of showing kindness to your body and rebuilding confidence after trauma)
 - aim to eat regular, healthy meals and snacks that will give your body the nutrients it needs and remind it that it is safe and cared for

- be mindful of your use of alcohol, caffeine, nicotine, sugary snacks and drinks, or other substances such as drugs (these can further dysregulate your system and may also represent unhelpful avoidance of your situation)

- incorporate good sleep hygiene into your lifestyle and, if nightmares continue to interrupt your sleep, consider professional support or try using some of the breathing/grounding techniques above

- **Foster self-compassion.** Your trauma responses represent a 'normal reaction to an abnormal event'. You will not have chosen to experience trauma. Nor will you have been able to consciously choose your response to it, which will have been governed by your automatic survival instincts. Try to avoid self-blame where possible.

- **Self-help and learning.** There are many books and online articles out there that can help in terms of self-education about trauma. It can be both empowering and normalising to come to understand your symptoms better and learn how to address them. There's a possibility this may be triggering, though, so it's wise to consider what support and resources you have in place before engaging with material about trauma.

- **Find specialised support.** Consider seeking professional support if your trauma symptoms persist or worsen, particularly if you are thinking of suicide or self-harm. It is worth trying to find a therapist, medical or mental-health professional who is *trauma-informed* and incorporates this into their approach. The recommended approaches to trauma care by WHO, NICE and APA are Eye Movement Desensitization & Reprocessing (EMDR) and Trauma-Focused Cognitive Behaviour Therapy (TF-CBT).

Professional resources for Trauma

- MIND www.mind.org.uk is the UK's main mental health charity. This link provides information on trauma
- The Royal College of Psychiatrists www.rcpsych.ac.uk provides a leaflet 'Coping after a Traumatic Event', available in many different languages
- UKPTS (UK Psychological Trauma Society) www.ukpts.org connects professionals working with those affected by psychological trauma, promoting new treatment approaches and running training and events.

Further useful information for those who have experienced Trauma

- NAPAC (National Association for People Abused in Childhood) www.napac.org.uk. Support and advice for individuals whose trauma relates to childhood abuse.
- Van Der Kolk, B. (2014) *The Body Keeps the Score: Brain, Mind & Body in the Healing of Trauma*. New York: Penguin Press Viking. A highly influential book on trauma and recovery.
- Lee, D. (2012) *The Compassionate Mind approach to recovering from Trauma using Compassion Focused Therapy*. London: Constable & Robinson. Promotes use of a compassion focused approach to understand and heal from trauma.
- Dunkley, F. (2018) *Psychosocial Support for Humanitarian Aid Workers: A Roadmap for Trauma and Critical Incident Care* London and New York: Routledge. Although written specifically for humanitarian workers, this book is a helpful guide to anyone whose work exposes them to traumatic material. It also offers advice to organisations for their duty of care to employees.

FD Consultants

Individual support

At FD Consultants we can help individuals recover from trauma and Post-Traumatic Stress Disorder (PTSD). We are a network of accredited therapists. We specialise in stress, anxiety, depression, burnout and trauma care.

Organisational support

For organisations looking for employee psychological support, FD Consultants are the well-being service who will best deliver a reliable, quick, and bespoke support system in the workplace. FD Consultant's team of accredited specialists will offer ongoing support to help manage stress, prevent burnout and provide specialist trauma care where required, enabling your staff with the tools to cope, and recover more quickly.