

An Ounce of Prevention

Complimentary

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What is PTSD?

The Mayo Clinic

Post-traumatic stress disorder (PTSD) is a mental health condition that's triggered by a terrifying event — either experiencing it or witnessing it. Symptoms may include flashbacks, nightmares, and severe anxiety, as well as uncontrollable thoughts about the event.

Most people who go through traumatic events may have temporary difficulty adjusting and coping, but with time and good self-care, they usually get better. If the symptoms get worse, last for months or even years, and interfere with your day-to-day functioning, you may have PTSD.

Getting effective treatment after PTSD symptoms develop can be critical to reduce symptoms and improve function.

Symptoms

PTSD symptoms are generally grouped into four types: intrusive memories, avoidance, negative changes in thinking and mood, and changes in physical and emotional reactions. Symptoms can vary over time or vary from person to person.

Intrusive memories

Symptoms of intrusive memories may include:

- Recurrent, unwanted distressing memories of the traumatic event
- Reliving the traumatic event as if it were happening again (flashbacks)
- Upsetting dreams or nightmares about the traumatic event
- Severe emotional distress or physical reactions to something that reminds you of the traumatic event

Avoidance

Symptoms of avoidance may include:

- Trying to avoid thinking or talking about the traumatic event
- Avoiding places, activities or people that remind you of the traumatic event

Negative changes in thinking and mood

Symptoms of negative changes in thinking and mood may include:

- Negative thoughts about yourself, other people, or the world
- Hopelessness about the future
- Memory problems, including not remembering important aspects of the traumatic event
- Difficulty maintaining close relationships
- Feeling detached from family and friends
- Lack of interest in activities you once enjoyed
- Difficulty experiencing positive emotions

- Feeling emotionally numb

Changes in physical and emotional reactions

Symptoms of changes in physical and emotional reactions (also called arousal symptoms) may include:

- Being easily startled or frightened
- Always being on guard for danger
- Self-destructive behavior, such as drinking too much or driving too fast
- Trouble sleeping
- Trouble concentrating
- Irritability, angry outbursts, or aggressive behavior
- Overwhelming guilt or shame

For children 6 years old and younger, signs and symptoms may also include:

- Re-enacting the traumatic event or aspects of the traumatic event through play
- Frightening dreams that may or may not include aspects of the traumatic event

Kinds of traumatic events

The most common events leading to the development of PTSD include:

- Combat exposure
- Childhood physical abuse
- Sexual violence
- Physical assault
- Being threatened with a weapon
- An accident

Many other traumatic events also can lead to PTSD, such as fire, natural disaster, mugging, robbery, plane crash, torture, kidnapping, life-threatening medical diagnosis, terrorist attack, and other extreme or life-threatening events.

Prevention

After surviving a traumatic event, many people have PTSD-like symptoms at first, such as being unable to stop thinking about what's happened. Fear, anxiety, anger, depression, guilt — all are common reactions to trauma. However, the majority of people exposed to trauma do not develop long-term post-traumatic stress disorder.

Getting timely help and support may prevent normal stress reactions from getting worse and developing into PTSD. This may mean turning to family and friends who will listen and offer comfort. It may mean seeking out a mental health professional for a brief course of therapy. Some people may also find it helpful to turn to their faith community.

Support from others also may help prevent you from turning to unhealthy coping methods, such as misuse of alcohol or drugs.

The Four F's of Complex Trauma

Astrid Burke, Psychotherapist

Many of us are familiar with the term "fight or flight," a classic model for understanding how individuals cope differently to actual or perceived threats. Over time, however, this black-and-white model has been expanded to give space to additional, more nuanced responses to trauma. By exploring our own survival strategies, we can gain insight into how these strategies may have served to protect us in the past but are no longer useful and can be modified and healed to better suit our present.

Fight

The goal of the "fight" is self-preservation and protection from pain through *conflict*. A "fight" response may feel like a rush of adrenaline, a desire to defend ourselves and feel empowered at all costs, picking fights, or yelling at or controlling others. To an observer, it may look like an explosive temper, angry or aggressive outbursts, bullying, and may be mislabeled as conduct disorder in children or narcissism in adults.

Flight

The intent of "flight" is protection from pain through *escape*. A "flight" response can make it difficult to slow down and rest. It may feel like you're constantly rushing, worrying, panicking, or micromanaging. Someone experiencing this response might look like a workaholic, over-achiever, or perfectionist. They may also physically leave a space when they feel threatened and hide in a bathroom or car or leave social situations by "ghosting" people or avoiding difficult conversations.

Freeze

"Freeze" types attempt to self-preserve through *dissociation*. When we dissociate, it can have the effect of spacing out and feeling detached from the world around us (derealization) or from ourselves (depersonalization). A "freeze" response can be characterized by feeling immobilized by stress, self-isolating, struggling to make or act on decisions, passivity, feeling frozen in a low-risk state making it frightening to step outside of our routine or set new goals.

Fawn

"Fawning" is an attempt at self-preservation and safety through *placation*. This might look like people-pleasing, flattering others to avoid conflict, difficulty saying no, feeling afraid to share what we think or feel, concern with how others perceive us, anticipating others' needs or studying their interests or patterns to fit in with or be useful to them. The belief behind the "fawn" response is, "If I can appease this person, I can be safe from conflict or pain."

Honoring and Healing our Survival Strategies

When learning about our coping skills, it's important not to judge them or feel shame around them, but rather recognize that they were, at one point, the best way we knew how to cope. They got us this far! But our trauma responses don't realize that time has passed, that we're no longer in danger and that our responses may not be appropriate or serving us anymore. Working with a therapist, we can modify our automatic survival strategies by redirecting our energy, grieving our trauma, challenging our inner self-critics, and

learning new coping skills that fit where we are now. This may look like practicing mindfulness and appropriately directing rage to the perpetrators of our trauma if we're in "fight," practicing introspection and slowing down the break-neck speed of "flight," learning skills to cope with dissociation if we're in "freeze," or practicing authenticity and self-expression if we're in "fawn."

Your trauma is valid.

Even if other people have experienced "worse."
Even if someone else who went through the same experience doesn't feel debilitated by it. Even if it "could have been avoided." Even if it happened a long time ago. Even if no one knows. Your trauma is real and valid and you deserve a space to talk about it. It isn't desperate or pathetic or attention-seeking. It's self-care. It's inconceivably brave. And regardless of the magnitude of your struggle, you're allowed to take care of yourself by processing and unloading some of the pain you carry. Your pain matters. Your experience matters. And your healing matters.
Nothing and no one can take that away.

Daniell Koepke

tinybuddha.com

Net News

Here are some web sites you & your family may find helpful.

Emotion Coaching Is Not Just for Kids

https://www.gottman.com/podcast/?utm_source=twitter&utm_medium=social&utm_campaign=s-mall-things-often

How to Build Emotional Intelligence

https://www.gottman.com/podcast/?utm_source=twitter&utm_medium=social&utm_campaign=s-mall-things-often

Calm Down Corner

<https://www.actionforhealthykids.org/activity/calm-down-corner/>

Mindfulness for Children

<https://www.nytimes.com/guides/well/mindfulness-for-children>

Self- Help Corner:

Alcoholics Anonymous: 780-424-5900

www.alcoholics-anonymous.org

Al-Anon/Alateen: 780-433-1818

Support Network / Referral Line: 211

Distress Line: 780 482-4357

Cocaine Anonymous: 780-425-2715

Access 24/7 – 780 424 2424

Informative Links:

The National Women's Health Information Center:

<https://www.womenshealth.gov/>