

## **THE TRAUMA RESPONSE**

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After a trauma, people go through a wide range of normal responses. Such reactions are experienced not only by people who were involved in the trauma first-hand, but often also by those who have either witnessed or heard about or have had different kinds of involvement with the person or persons immediately affected. Many reactions tend to be triggered by persons, places, or things associated with the trauma. Some reactions may appear totally unrelated. Here is a list of common physical and emotional reactions to trauma, as well as a list of helpful coping strategies. These are NORMAL reactions to ABNORMAL events.

### **PHYSICAL REACTIONS:**

aches and pains like headaches, backaches, stomach aches  
sudden sweating and/or heart palpitations (fluttering)  
changes in sleep patterns, appetite, interest in sex  
constipation or diarrhea  
easily startled by noises or unexpected touch  
more susceptible to colds and illnesses  
increased use of alcohol or drugs and/or overeating

### **EMOTIONAL REACTIONS:**

shock and disbelief  
fear and/or anxiety  
grief, disorientation, denial  
hyper-alertness or hypervigilance  
irritability, restlessness, outbursts of anger or rage  
emotional swings -- like crying and then laughing  
worrying or ruminating -- intrusive thoughts of the trauma  
nightmares  
flashbacks -- feeling like the trauma is happening now  
feelings of helplessness, panic, feeling out of control  
increased need to control everyday experiences  
minimizing the experience  
attempts to avoid anything associated with trauma  
tendency to isolate oneself  
feelings of detachment  
concern over burdening others with problems  
emotional numbing or restricted range of feelings  
difficulty trusting and/or feelings of betrayal  
difficulty concentrating or remembering  
feelings of self-blame and/or survivor guilt  
shame  
diminished interest in everyday activities or depression  
unpleasant past memories resurfacing  
loss of a sense of order or fairness in the world; expectation of doom and fear of the future

## HELPFUL COPING STRATEGIES:

mobilize support system -- reach out and connect with others, especially those who may have shared the stressful event

talk about the traumatic experience

cry

hard exercise like jogging, aerobics, bicycling, walking

relaxation exercise like yoga, stretching, massage

humor

prayer and/or meditation

hot baths

music and art

maintain balanced diet and sleep cycle as much as possible

avoid overusing stimulants like caffeine, sugar, or nicotine

commitment to something personally meaningful and important every day

hug those you love: hugging releases endogenous opioids, the body's natural pain-killer - now you know why it can feel so good!

eat warm turkey, boiled onions, baked potatoes, cream-based soups -- these warm foods are tryptophane activators which help you feel tired but good (like after Thanksgiving dinner)

pro-active response toward personal/community safety: organize or do something socially active

write about your experience -- in detail, just for yourself or to share with others

People are usually surprised that reactions to trauma last longer than expected. It may take weeks, months, and in some cases, years, to regain equilibrium. Many people will get through this period on their own, with the help and support of family and friends. But too often friends and family push to "get over it" before you're ready, or encourage feeling sorry for or trying to understand the perpetrator. Remind them that such responses are not helpful for recovery right now. Many people find that individual, group, or family counseling is helpful. Either way, the key word is ATTACHMENT -- ask for help, support, understanding, and opportunities to talk.

The Chinese character for crisis is a combination of two words -- danger and opportunity. Hardly anyone would choose to be traumatized as a vehicle for growth. Yet our experience shows that people are incredibly resilient, and the worst traumas and crises can become enabling, empowering transformations.