

Trauma Response® E-News

A PUBLIC SERVICE OF THE AMERICAN ACADEMY OF EXPERTS IN TRAUMATIC STRESS®

For Survivors of Traumatic Events and Those Who Care For Them

HURRICANE KATRINA

21 Things You Can Do When You're Living Through a Traumatic Experience

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In the wake of Hurricane Katrina, our heartfelt sympathy goes out to the countless people touched by this unfortunate event. In view of numerous requests for information to help survivors, the Academy is sending this information out through an Urgent Trauma Response E-News.

1. Take immediate action to ensure your physical safety and the safety of others. If it's possible, remove yourself from the event/scene in order to avoid further traumatic exposure.
2. Address your acute medical needs (e.g., If you're having difficulty breathing, experiencing chest pains or palpitations, seek immediate medical attention).
3. Find a safe place that offers shelter, water, food and sanitation.
4. Become aware of how the event is affecting you (i.e., your feelings, thoughts, actions - and your physical and spiritual reactions).
5. Know that your reactions are normal responses to an abnormal event. You are not "losing it" or "going crazy."
6. Speak with your physician or healthcare provider and make him/her aware of what has happened to you.
7. Be aware of how you're holding-up when there are children around you. Children will take their cues from the adults around them.
8. Try to obtain information. Knowing the facts about what has happened will help you to keep functioning.
9. If possible, surround yourself with family and loved ones. Realize that the event is likely affecting them, too.
10. Tell your story. And, allow yourself to feel. It's okay - not to be okay during a traumatic experience.

11. You may experience a desire to withdraw and isolate, causing a strain on significant others. Resist the urge to shut down and retreat into your own world.
12. Traumatic stress may compromise your ability to think clearly. If you find it difficult to concentrate when someone is speaking to you, focus on the specific words they are saying - work to actively listen. Slow down the conversation and try repeating what you have just heard.
13. Don't make important decisions when you're feeling overwhelmed. Allow trusted family members or friends to assist you with necessary decision-making.
14. If stress is causing you to react physically, use controlled breathing techniques to stabilize yourself. Take a slow deep breath by inhaling through your nose, hold your breath for 5 seconds and then exhale through your mouth. Upon exhalation, think the words "relax," "let go," or "I'm handling this." Repeat this process several times.
15. Realize that repetitive thinking and sleep difficulties are normal reactions. Don't fight the sleep difficulty. Try the following: Eliminate caffeine for 4 hours prior to your bedtime, create the best sleep environment you can, consider taking a few moments before turning out the lights to write down your thoughts - thus emptying your mind.
16. Give yourself permission to rest, relax and engage in non-threatening activity. Read, listen to music, consider taking a warm bath, etc.
17. Physical exercise may help to dissipate the stress energy that has been generated by your experience. Take a walk, ride a bike, or swim.
18. Create a journal. Writing about your experience may help to expose yourself to painful thoughts and feelings and, ultimately, enable you to assimilate your experience.
19. If you find that your experience is too powerful, allow yourself the advantage of professional and/or spiritual guidance, support and education.
20. Try to maintain your schedule. Traumatic events will disrupt the sense of normalcy. We are all creatures of habit. By maintaining our routines, we can maintain a sense of control at a time when circumstances may lead us to feel a loss of control.
21. Crises present opportunities. Cultivate a mission and purpose. Seize the energy from your experience and use it to propel you to set realistic goals, make decisions and take action.

[To learn more about Acute Traumatic Stress Management, visit
www.ATSM.org](http://www.ATSM.org)

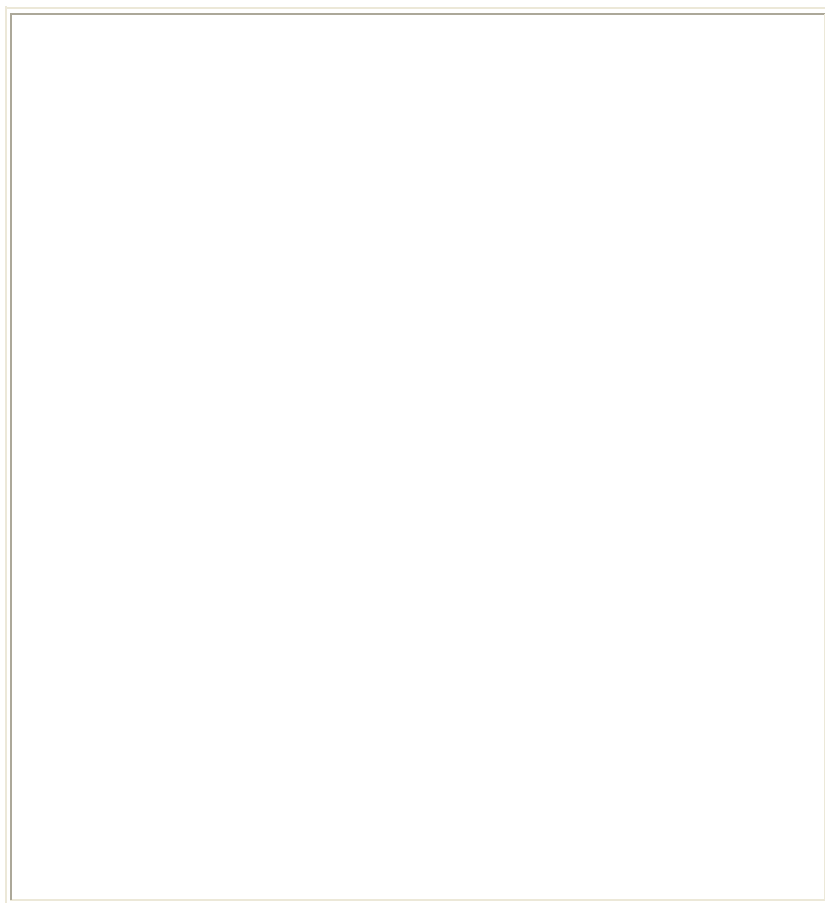
Common Reactions Experienced in the Face of Traumatic Exposure

Emotional Responses during a traumatic event may include shock, in which the individual may present a highly anxious, active response or perhaps a seemingly stunned, emotionally-numb response. He may describe feeling as though he is "in a fog." He may exhibit denial, in which there is an inability to acknowledge the impact of the situation or perhaps, that the situation has occurred. He may evidence dissociation, in which he may seem dazed and apathetic, and he may express feelings of unreality. Other frequently observed acute emotional responses may include panic, fear, intense feelings of aloneness, hopelessness, helplessness, emptiness, uncertainty, horror, terror, anger, hostility, irritability, depression, grief and feelings of guilt.

Cognitive Responses to traumatic exposure are often reflected in impaired concentration, confusion, disorientation, difficulty in making a decision, a short attention span, suggestibility, vulnerability, forgetfulness, self-blame, blaming others, lowered self-efficacy, thoughts of losing control, hypervigilance, and perseverative thoughts of the traumatic event. For example, upon extrication of a survivor from an automobile accident, he may cognitively still "be in" the automobile "playing the tape" of the accident over and over in his mind.

Behavioral Responses in the face of a traumatic event may include withdrawal, "spacing-out," non-communication, changes in speech patterns, regressive behaviors, erratic movements, impulsivity, a reluctance to abandon property, seemingly aimless walking, pacing, an inability to sit still, an exaggerated startle response and antisocial behaviors.

Physiological Responses may include rapid heart beat, elevated blood pressure, difficulty breathing*, shock symptoms*, chest pains*, cardiac palpitations*, muscle tension and pains, fatigue, fainting, flushed face, pale appearance, chills, cold clammy skin, increased sweating, thirst, dizziness, vertigo, hyperventilation, headaches, grinding of teeth, twitches and gastrointestinal upset.



Dr. Mark Lerner is a Clinical Psychologist and Traumatic Stress Consultant who focuses on helping people during and in the aftermath of traumatic events. He is the President of the American Academy of Experts in Traumatic Stress (www.aaets.org) and the originator of the Acute Traumatic Stress Management intervention model (www.atism.org). Dr. Lerner wrote and produced the newly released audio book, *Surviving and Thriving: Living Through a Traumatic Experience* (www.DrMarkLerner.com). He is the Editor and Publisher of *Trauma Response*, the Academy's official publication, and the author of five books. Dr. Lerner consults regularly with individuals and organizations - where he specializes in the education, training and implementation of Acute Traumatic Stress Management and the development of organizational crisis management teams. Dr. Lerner has conducted numerous interviews, including CNN Headline News, the Los Angeles Times, the Palm Beach Post, Newsweek, Self Magazine, Stars & Stripes, Reuters, the Associated Press and U.S. News & World Report. Most recently, he appeared on *Your Morning* on CN8, CNN and Dateline NBC. Dr. Lerner lives in New York with his wife and three children.

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