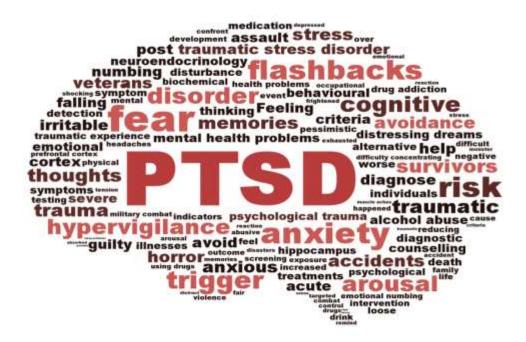
Living with Post-traumatic Stress Disorder (PTSD)



What's inside:	Page:	
What is PTSD and what does it look like?	2	
• Do I have PTSD? – A checklist for seeking help	5	
• How is PTSD treated?	6	
 Some self-help skills for treating PTSD 	9	

This document contains information and strategies that are meant to be helpful to persons experiencing symptoms of PTSD, it is not a substitute for the advice of a qualified mental health practitioner. If you or someone that you know is experiencing symptoms of PTSD, please contact your family doctor or if in a crisis please call the Crisis Line Association of BC (250-753-2495), 310 Mental Health Support Line (310-6789) or the Crisis Intervention & Suicide Prevention Centre of BC (604-872-3311).

What is PTSD and what does it look like?

Post-Traumatic Stress Disorder or PTSD as it usually known is a mental disorder that is usually developed following the experience of a traumatic event or a series of traumatic events. Not everyone who experiences a traumatic event develops PTSD. A person may feel some symptoms of PTSD initially but PTSD itself is characterised by a number of longstanding symptoms that impair on that person's functioning. PTSD can develop almost immediately or it may develop after many years.

PTSD symptoms are generally grouped into four types: intrusive memories, avoidance, negative changes in thinking and mood, or changes in emotional reactions.

Intrusive memories

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

Avoidance

- 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

• Negative feelings about yourself or other people

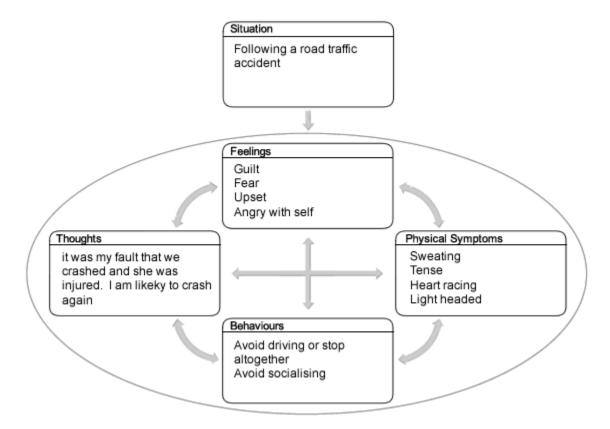
- Inability to experience positive emotions
- Feeling emotionally numb
- Lack of interest in activities you once enjoyed
- Hopelessness about the future
- Memory problems, including not remembering important aspects of the traumatic event
- Difficulty maintaining close relationships

Changes in emotional reactions

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

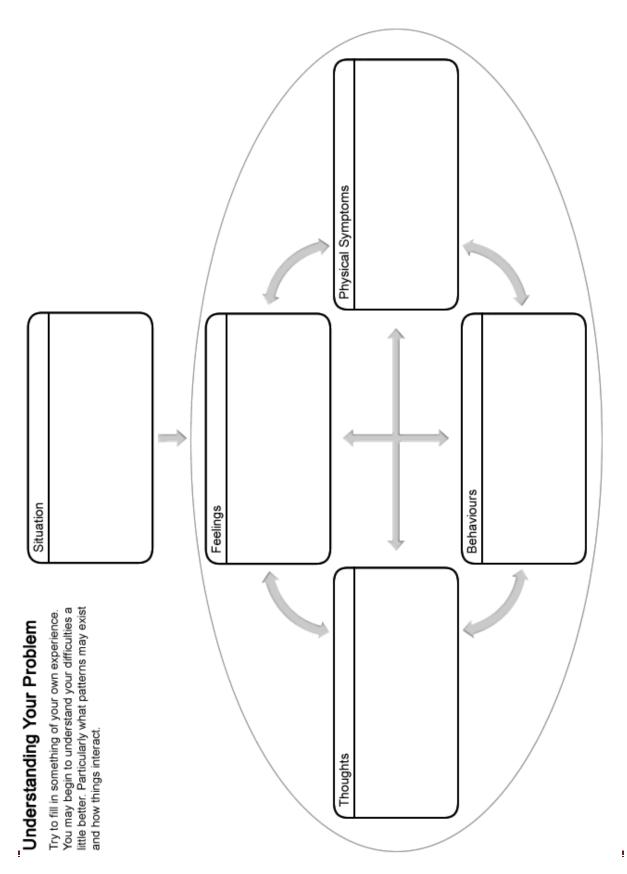
As mentioned, PTSD generally develops following a traumatic life experience. However a person's PTSD is maintained through a number of factors including avoidance of situations, places or people. While this might appear to be a helpful strategy as it means avoiding distress, in the long term it means that the problem is never resolved and the disorder is kept going. In order to change these behaviors a person with PTSD must become aware of how their behaviors, thoughts, feelings and physical sensations all interact to keep it going.

Consider the following diagram:



A person is involved in a serious traffic accident. They immediately feel fearful when they are in a similar situation. This causes them to feel physical symptoms of anxiety including lightheadedness and ultimately leads to them avoiding driving again. While all of this is happening, the person is having negative thoughts about the whole incident. Each of these components feed into one another to keep the disorder going. In order to treat PTSD, the person must be willing to break the cycle.

The following is a blank diagram to help you understand how your own cycle of PTSD might be working:



symptoms of PTSD, it is not a substitute for the advice of a quantieu mental health practitioner. If you or someone that you know is experiencing symptoms of PTSD, please contact your family doctor or if in a crisis please call the Crisis Line Association of BC (250-753-2495), 310 Mental Health Support Line (310-6789) or the Crisis Intervention & Suicide Prevention Centre of BC (604-872-3311).

Lifespan Development Group Inc. Psycho-Educational Materials ©

Feelings

Do I have PTSD? - A checklist for seeking help

If you experience symptoms of Post-Traumatic Stress it is likely that you will recognise many of the feelings, physical symptoms, thoughts and behaviour patterns described below.

Please tick the boxes which regularly apply to you.

Fearful / Scared	()
Emotionally numb	()
Furious / Raging	()
Sad / Tearful	()
Irritable	()
Overwhelmed / Helpless	()
Physical Symptoms	
Restless	()
Heart racing	()
Disturbed sleep pattern	()
Sweating	()
Tense muscles	()
Thoughts	
I'm to blame for what happened	()
I'm out of control	()
Why has this happened?	()
Something awful might happen	()
Flashbacks or nightmares of the event	()
It's going to happen again	()
Behaviour Patterns	
Restless and distractable	()
Angry outbursts and antisocial behaviour	()

This document contains information and strategies that are meant to be helpful to persons experiencing symptoms of PTSD, it is not a substitute for the advice of a qualified mental health practitioner. If you or someone that you know is experiencing symptoms of PTSD, please contact your family doctor or if in a crisis please call the Crisis Line Association of BC (250-753-2495), 310 Mental Health Support Line (310-6789) or the Crisis Intervention & Suicide Prevention Centre of BC (604-872-3311).

Lifespan Development Group Inc. Psycho-Educational Materials ©

Avoiding social contact	()	
Hyper-alert and easily startled	()	
Avoiding things relating to the trauma	()	

If you have ticked a number of these boxes it is possible that you experience symptoms of Post-Traumatic Stress. However, don't be alarmed, there are things that you can do to help.

How is PTSD treated?

There are a number of options for the treatment of PTSD disorder. Research has shown that both psychotherapeutic and medication-based solutions have been effective. It is advisable that you make yourself as informed as possible on what your options are.

There are a number of simple things that you can do yourself to help reduce your PTSD symptoms:

- Exercise: It might sound simple but exercise is an important part of overcoming any mental illness. Research has shown that by really focusing on your body and how it feels as you exercise, you can help reduce your body's stress response to distressing events. Try to spend time outdoors, doing enjoyable and challenging physical activities.
- Take care of yourself: Take time to relax include time to complete relaxation exercises (See the final section of this handout for more information on this). Get enough sleep sleep deprivation only heighten the likelihood of experiencing symptoms of PTSD, aim for 7-9 hours each night. Eat a healthy diet avoid alcohol, drugs and sugars which can exacerbate symptoms.

• **Connect with others:** A supportive environment is crucial to recovering from PTSD. Many people with PTSD often feel isolated and withdrawn but it is important to connect with people around you who you trust. Find someone who will listen to you without judging, criticizing or distraction.

Medication

Medication has been shown to be effective for some people in the treatment of symptoms of PTSD. Antidepressants are often only prescribed as a temporary measure to relieve the secondary symptoms of anxiety and depression associated with PTSD. It is important to remember that medication does not get to the root of the problem and instead just treats these symptoms. Some people experience a number of side-effects when taking medication. If you have any questions or concerns regarding medication, you should seek advice from your doctor or a medical professional.

Psychotherapy

There are a number of psychological therapies that have been shown to be effective for the treatment of social anxiety. Psychotherapeutic treatment for PTSD aims to relieve symptoms by helping you to deal with the trauma that you have experienced. These treatments include but are not limited to:

Trauma-focused Cognitive Behavior Therapy
 (CBT). CBT focuses on identifying, understanding, and
 changing thinking and behavior patterns. In this type of
 therapy the patient is actively involved in his or her

This document contains information and strategies that are meant to be helpful to persons experiencing symptoms of PTSD, it is not a substitute for the advice of a qualified mental health practitioner. If you or someone that you know is experiencing symptoms of PTSD, please contact your family doctor or if in a crisis please call the Crisis Line Association of BC (250-753-2495), 310 Mental Health Support Line (310-6789) or the Crisis Intervention & Suicide Prevention Centre of BC (604-872-3311). Lifespan Development Group Inc. Psycho-Educational Materials ©

own recovery, has a sense of control, and learns skills that are useful throughout life. For PTSD, time is spent gradually exposing the individual to thoughts, feelings, and situations that remind you of the trauma.

- Family Therapy. This can help your loved ones understand what you're going through. It can also help everyone in the family communicate better and work through relationship problems caused by PTSD symptoms.
- Eye Movement Desensitization and Reprocessing (EMDR). EMDR incorporates elements of cognitivebehavioral therapy with eye movements or other forms of rhythmic, left-right stimulation, such as hand taps or sounds. These work by "unfreezing" the brain's information processing system, which is interrupted in times of extreme stress.

Some self-help skills for treating PTSD

• Challenging Negative Automatic Thoughts (NATs)

The way that we think about things can impact on our mood. As mentioned earlier, our thoughts can feed into our behaviours, our feelings and how we feel physically, and so it is important to remember that they are just thoughts, and not facts. If thoughts are not facts, then they can be challenged. Negative Automatic Thoughts (NATs) are common in PTSD and recognizing them is the first step in learning to change them. By becoming aware of

these thoughts and the effect that they are having on us, we are working towards breaking the cycle of PTSD. Below are some common NATs:

- o **Predicting the Future:** When people are worried about something it is common for them to spend a lot of time ruminating. People end up spending a lot of time thinking about the future and predicting what could go wrong, rather than just letting things be. In the end most of our predictions don't happen and we have wasted time and energy being worried and upset about them. e.g. Assuming that you will crash if you drive a car.
- Mind Reading: This means that you make assumptions about others' beliefs without having any real evidence to support them. e.g. They must be about to attack me.
- Taking Things Personally: When people are feeling emotionally vulnerable they often take things to heart when they were not meant to be taken that way. e.g. You walk past a group of people laughing and presume that they are laughing at you.
- Focusing on the Negatives: Often people can ignore the positive aspects of their life and the situations that they find themselves in. e.g. this event has ruined my life.
- Over Generalising: Based on one isolated incident you assume that all others will follow a similar pattern in the future. e.g. You believe that because one dog barked at you, all dogs are vicious.

- What If Statements: Have you ever wondered "what if" something bad happens? This type of thought can often make us avoid going places or doing the things that we would like. e.g. What if it happens again?
- All or nothing thinking: Some people only see things as black or white. Having this type of polarised view can lead some people into setting themselves impossibly high standards. e.g. there is no guarantee that I will be safe outside, so I am not going out.

If some of these thought processes resonate with how you think about things, it might be useful to try to challenge your NATs. Below is a helpful template to track your challenging thoughts:

Where were	Emotion or	Negative	Evidence	Evidence	Alternative	Emotion or
you?	feeling	automatic	that	that does	thought	feeling
you.	leening	thought	supports	not support	thought	following
		thought	that thought	that thought		alternative
			that thought	that thought		thought
						thought

• Relaxation techniques.

It is important to make time to relax in order to improve your mood and your symptoms of anxiety. Anxiety is more than just a feeling. It's the body's physical "fight or flight" reaction to a perceived social threat. Your heart pounds, you breathe faster, your muscles tense up, and you feel light-headed. When you're relaxed, the complete opposite happens. Since it's impossible to be anxious and relaxed at the same time, strengthening your body's relaxation response is a powerful anxiety-relieving tactic. Progressive muscle relaxation, deep breathing, and meditation can help you to relax. These are skills that might take some practice initially.

The following are a set of links to further information about these relaxation techniques.

Progressive muscle relaxation can help you release muscle tension and take a "time out" from your worries. The technique involves systematically tensing and then releasing different muscle groups in your body. As your body relaxes, your mind will follow.

http://www.cci.health.wa.gov.au/docs/ACF3C67.pdf

http://www.anxietybc.com/sites/default/files/MuscleRelaxation.pdf

Deep breathing. When you're anxious, you breathe faster. This hyperventilation causes symptoms such as dizziness, breathlessness, lightheadedness, and tingly hands and feet. These physical symptoms are frightening, leading to further anxiety and panic. But by breathing deeply from the diaphragm, you can reverse these symptoms and calm yourself down.

http://www.anxietybc.com/sites/default/files/CalmBreathing.pd f

http://www.cci.health.wa.gov.au/docs/ACF3C8B.pdf

Meditation. Research shows that mindfulness meditation can actually change your brain. With regular practice, meditation boosts activity on the left side of the prefrontal cortex, the area of the brain responsible for feelings of serenity and joy.

http://www.cci.health.wa.gov.au/resources/minipax.cfm?mini_ID
=21

http://cdn.franticworld.com/wpcontent/uploads/2012/02/Mindfulness-Of-Body-And-Breathfrom-book-Mindfulness-Finding-Peace-in-a-Frantic-World-128k.mp3

Removing avoidance and safety behaviours

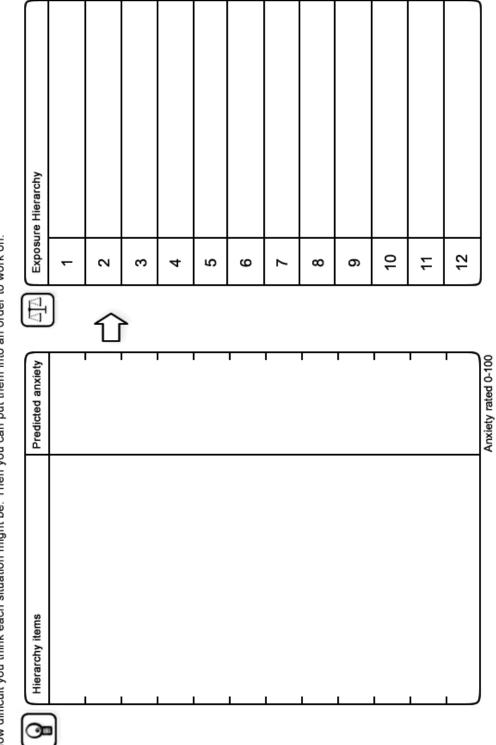
As already highlighted, avoidance and safety behaviours are common ways of dealing with PTSD, but do not fix the problem and often prolong the disorder. This is because the longer we avoid something, the more intimidating it becomes. By avoiding situations we also stop ourselves from proving that we can cope in them.

It might be helpful to consider confronting anxiety provoking situations in order to decrease the impact that they have on you and ultimately work towards eliminating your symptoms of PTSD. Of course, confronting distressing situations or thoughts can be daunting, especially given that our anxiety levels often rise when we do so. However research shows that if we can stay in a situation that we feel anxious in for long enough (without using our safety behaviours), gradually our anxiety will reduce. It is almost as though our body and mind become 'used to' the situation and our anxiety begins to fall. This may take around 30 minutes or more but often happens more quickly. More importantly, if we subsequently confront a similar situation again, the amount of anxiety we experience is likely to be less and less on each occasion. Not only this, but it is likely to pass more quickly each time too, until the point that the situation causes us little or no anxiety This process is often done as part of EDMR treatment but you could consider developing your own exposure hierarchy to work off of by following these steps:

- 1. Generate ideas
- 2. Put them in order of easiest to most difficult
- 3. Start to confront items in order of easiest to hardest. Remember to challenge yourself but be careful not to be overly ambitious. Also remember that is ok to take a step back on you hierarchy if you feel that you need to. Use breathing and relaxing techniques if you need to.
- 4. Repeat the exposure exercise as necessary.

Below is a template to create your own exposure plan.

Make a list of all the things that you avoid or make you anxious. Use a scale from 'not anxious' (0) to 'extremely anxious' (100) to describe now difficult you think each situation might be. Then you can put them into an order to work on. Exposure Plan



This document contains information and strategies that are meant to be helpful to persons experiencing symptoms of PTSD, it is not a substitute for the advice of a qualified mental health practitioner. If you or someone that you know is experiencing symptoms of PTSD, please contact your family doctor or if in a crisis please call the Crisis Line Association of BC (250-753-2495), 310 Mental Health Support Line (310-6789) or the Crisis Intervention & Suicide Prevention Centre of BC (604-872-3311).

Lifespan Development Group Inc. Psycho-Educational Materials ©

If you or someone that you know are experiencing symptoms of PTSD, it is advisable that you speak to someone who you trust and seek professional help.

• If you have suicidal thoughts:

If you or someone you know is having suicidal thoughts, get help right away through one or more of these resources:

- Reach out to a close friend or loved one.
- Call a suicide hotline number in BC, call the Crisis
 Intervention & Suicide Prevention Centre of BC at 604-872
 3311 to reach a trained counselor.
- Make an appointment with your doctor, mental health provider or other health care professional.

Some helpful links:

PTSD Association of Canada

http://www.ptsdassociation.com/

Veterans Transition Program

https://vtncanada.org/?gclid=CjwKEAjwh8exBRDyyqqH9pvf1nc SJAAu40E3SjMj8BmqAB3wKzNIr8oMYqjSQ1Vq6a 1XvCvB0XzBx oCggjw wcB

Ms. Niamh Allen, M.A. B.Sc.