

Surviving Trauma and Disaster

A traumatic event may be a major, public disaster that affects many people and involves loss of life, such as war, earthquake or Tsunami, or it may be an event that affects an individual and has particular meaning for that person, such as a car accident or rape.

This guide offers some information about common responses to trauma and ways of helping yourself. It also suggests when further help may be useful and where to get help.

The information may also be useful if you are supporting a friend or a colleague who has experienced trauma or if you have responsibility for students or staff in your role as line manager or personal tutor, for example.

It won't happen to me

A traumatic experience lies outside the normal range of life experiences. It may be sudden, overwhelming and unexpected. In these situations, our normal coping strategies are not sufficient and an emergency system kicks in to help us process what has happened. Nightmares, flashbacks and thinking about the event are attempts to construct a coherent "story", so that eventually we can put the event to one side. Over time these reactions will start to fade.

The sense of being in control of our lives and our sense of personal security can be badly shaken by such an event. Anxiety and hyper-vigilance are mechanisms to protect ourselves until the danger, whether real or perceived, has passed or until we start to feel more in control. A public or personal disaster may challenge our basic assumptions, i.e. that the world is a relatively benign and meaningful place or that we are able to cope with anything.

While most people involved in a traumatic incident will be shaken by what has happened, some adjust to their experiences with little or no apparent distress. Sometimes people may even feel satisfied by the way they have acted when faced by the traumatic event, for example if they have been able to help others who have been involved. Other people may be shocked and stunned by the traumatic event and have confused, distressing emotions and reactions. These reactions may happen immediately or there may be a delay of days, weeks or longer. Sometimes reactions may be triggered or re-activated by a subsequent event months, or even years, later.

Common reactions to trauma

You may feel:

- Numbness, shock
- Increased anxiety, agitation, arousal
- Fear that something else will happen, feeling unsafe, helpless, vulnerable, loss of control
- Anger at what has happened and at the reactions of others, increased irritability
- Guilt at surviving, wanting to help others
- Loss and sadness, regret
- Depression.

You may experience:

- Flashbacks - a vivid sensation that you are re-experiencing the event
- Vivid nightmares and sleep disturbance
- Going over and over the event in your mind
- You may feel that you are going mad.

Physical reactions include:

- Tiredness
- Agitation, jumpiness
- Sweating
- Nausea, upset stomach
- Muscle tension, aches and pain
- Loss of concentration, memory problems, inability to think clearly or make decisions
- Increased heart rate, palpitations
- Over breathing, hyperventilation, breathlessness.

You may try to cope with your reactions by:

- Drinking, smoking or drug use to escape or dull your feelings
- Avoiding thinking or talking about what has happened
- Going to great lengths to avoid a similar situation happening again
- Throwing yourself into work or helping others, to avoid your own feelings

These strategies may help you to survive the immediate aftermath, but in the longer term they may delay your recovery.

How can you help yourself?

Here are some ways of coping that people have found helpful:

- Reminding yourself that these reactions are a normal response to an extraordinary experience. They do not indicate that you are going crazy. On the contrary, these reactions signal that your mind is engaged in processing what has happened and starting the mental process of understanding and making sense of the event
- Finding someone to talk to about what has happened and your feelings about it. You may need to do this over and over again in the first few weeks
- Allowing yourself to express your feelings in a safe and supportive situation
- Spending time with family, friends or people who are important to you. Allowing them to support you and telling them what support you need. Keeping in touch once you return to your normal routine
- Doing the things you enjoy – listening to music, being with friends, dancing, films, walking
- Allowing yourself to think about the event and your feelings when something prompts this
- Writing down what happened, your thoughts and feelings. Asking yourself whether your anxieties and concerns are reasonable or accurate
- Keeping up your normal routine as far as possible and returning to regular work or study when you are able to. It may be possible to negotiate with your department to extend deadlines or defer exams. It is usually beneficial to maintain your usual activities and routines, even if these have unpleasant memories
- Taking extra care. Accidents are more likely to happen whilst you are distracted
- Looking after yourself with regular rest, relaxation, good food and gentle exercise

How long will these reactions last?

This depends on the nature of the trauma and the consequences for the individual. It also depends on the person's individual circumstances and the meaning of the event for him or her. It is impossible to predict or to generalise.

A person may initially feel overwhelmed by thoughts, feelings and physical symptoms. The impact of these effects will usually start to subside over the next few weeks or months, but there may be frequent occasions when strong feelings wash over the person again. Milder reactions may persist for many months or even years.

In the longer term, most people will recover and resume their lives much as before. But for others, especially those who have lost someone close, their lives may be permanently changed. For some people, a life threatening or traumatic event will challenge deeply held beliefs about themselves, the world and other people. Others may re-examine their spiritual beliefs. This may be experienced as disturbing or as a profoundly positive experience.

How can you help someone else?

- Simply listening can be a great help, when and if the person wishes to talk. He or she may need to talk about their experience over and over again. It can be helpful to acknowledge how he or she is feeling and avoiding forced cheerfulness. You do not have to provide answers or solutions
- Ask the person what he or she finds helpful and respect his or her wishes, if this is possible
- It may be uncomfortable for you to hear the person's story or to witness his or her distress. You may wish to access support or advice yourself from the resources listed at the end of this guide
- The person may not want or need help beyond the support of family and friends, but if he or she appears to be stuck in a state of distress or depression, or if you have other concerns, you may want to encourage him or her to seek help
- If the person is talking about suicide, either directly or in vague terms, take it seriously. Encourage him or her to see a GP. If this is not possible, speak to someone who can intervene, such as a member of staff in your hall or your department. Cripps Health Centre will provide advice or a visit if necessary. You may consider accompanying him or her to the Emergency Department at the Queen's Medical Centre
- Encouraging him or her to resume or maintain their usual routine and activities and talking about everyday things can be helpful
- After a personal or public disaster, the initial rush of help may fade away, leaving the person feeling abandoned. Small acts of support sustained over a longer period may be helpful
- A common response to disaster is a feeling of responsibility and a desire to help others. It is easy to become overwhelmed, so if you are involved in helping others or supporting a friend, take care of yourself first. Spending time with other friends and keeping up your own interests and activities will help to maintain a balance.

When is specialist help appropriate?

Your first line of support is likely to be your family, friends, partner, religious community, or perhaps, other people involved in the event.

There are many people in the University to whom you can turn for support. These may include your personal tutor, senior tutor, hall tutor, hall warden or any other member of staff. Other members of the University community who will offer support include the Chaplains, the Student Union Welfare Officer and the welfare reps in halls of residence. Members of staff may consider asking for support from line managers, work colleagues or the Occupational Health Unit.

There is also a wide range of services available in the University and in the community if you need further help or support. These are listed at the end of this guide.

Do not hesitate to seek help if you experience any of the following:

- You have suicidal thoughts or feelings
- You are self-harming
- The normal reactions to trauma continue beyond the following weeks or months, or the symptoms worsen
- You are having difficulty coping with intense feelings or physical symptoms
- You feel frightened or overwhelmed by emotional, psychological or physical symptoms
- You experience a numbness or an absence of feelings beyond the first few weeks
- You feel you have no-one that you can talk to
- Relationships and friendships are suffering
- You are drinking, smoking or using drugs more than usual, to escape how you are feeling.

Where can you find help?

At the University of Nottingham

- The **International Office** offers advice and support to international students and co-ordinates financial and practical support for students affected by events, such as the Tsunami disaster or earthquakes. Telephone (0115) 951 5247
- Your **GP** can offer advice, information, support, treatment or referral to more specialist services. Students registered with **Cripps Health Centre** can make an appointment by phoning (0115) 846 8888 (internal extension 68888)
- The **Occupational Health Service** is available to employees of the University for advice and support on health issues as they affect you in the workplace. Telephone (0115) 951 4329 ext: 14329 / 14330 or e-mail linda.allen@nottingham.ac.uk
- The **University Counselling Service** offers free, confidential individual counselling to students and staff. The service also offers support and consultation to students and staff who are concerned for a friend or colleague and to staff with pastoral or welfare responsibilities.

Individual counselling is available at University Park, Jubilee Campus, Sutton Bonington and the School of Nursing and Midwifery sites. To make an

appointment, telephone (0115) 951 3695 e-mail counselling.service@nottingham.ac.uk or call in to the office on the ground floor of Trent Building. For further information and links to other resources: www.nottingham.ac.uk/counselling

- The **Chaplains** offer spiritual and emotional support and guidance, to students of all faiths, or of none. The Chaplains' office is in Portland Building. Telephone (0115) 951 3930 or e-mail: chaplains@nottingham.ac.uk or visit the web site www.nottingham.ac.uk/chaplains
- The **Students' Union Welfare Officer** and the **welfare reps** in halls of residence offer advice and support. The Students' Union office is in the Portland Building. Telephone (0115) 846 8800 or visit their web site at www.su.nottingham.ac.uk
There is an **Intersite Support Worker** for students of the **Schools of Nursing and Midwifery**. Telephone (0115) 846 8735
- **Nightline** offers a confidential telephone listening service, run by students for students, available from 7pm-8am every night in term time. Telephone (0115) 951 4985

Local and National Resources

- The **Emergency Department** at Queen's Medical Centre is available 24 hours a day, for medical assessment and treatment
- **Nottingham Counselling Service** offers confidential, subsidised counselling to persons over 20 years. Telephone (0115) 950 1743
- The **Samaritans** offer a telephone listening service by trained volunteers, 24 hours a day. Telephone 08457 90 90 90 (calls charged at local rate)
- **NHS Direct** offer telephone advice and information about health issues. Telephone 0845 4647 or visit www.nhsdirect.nhs.uk
- Nottingham **Cruse** offers bereavement and loss counselling and support by trained volunteers. Telephone 0115 924 4404
- **Victim Supportline** is available to anyone who has been affected by a crime. Telephone 0845 30 30 900
- **MIND (National Association for Mental Health)**. For details of local services, contact *Mindinfo*line, telephone 0845 766 0163 or visit the web site at www.mind.org.uk
- **Women's Aid** offer advice and support to women at risk of domestic violence, National Domestic Violence Helpline 0808 2000 247 (and 24-hour access to refuge)
- **Rape Crisis**. Telephone (0115) 941 0440 or visit www.rapecrisis.org.uk