An introduction to trauma

Stabilisation Pack
What is trauma?

Introduction to trauma

If we want to understand the reasons for mental health problems, it often makes more sense to ask ‘What has happened to you?’ than ‘What is wrong with you?’

It is very common for people who use mental health services to have been through very difficult life events. Some of the experiences that have the most devastating effects are referred to as traumas.

It may not have always been recognised or acknowledged, even by you, that this kind of life event might have contributed to your mental health difficulties. You may or may not wish to think of these events as ‘traumas’. However, we hope that at least some of the sections and ideas in this manual will be of help to you.

What will I learn?

We now know a great deal about how to help people recover from trauma. It is useful to think of recovery in 3 stages:

**Stage 1:** education about trauma and its effects. Learning to cope with the effects and keep yourself safe.

**Stage 2:** talking about and coming to terms with what happened.

**Stage 3:** taking up your life again and moving beyond the trauma.

These stages are not completely separate from each other. Learning how to cope with the effects of trauma is likely to involve talking a bit about what happened. Talking about upsetting events may mean re-visiting some ways of coping. However, it is very important that you are able to keep yourself safe and develop some ways of managing your feelings and reactions before you start to talk and think about the traumas in more depth.

It is important to note that some people do not want to talk about traumatic events at all. They may be able to use some of the ideas and coping methods in the manual to feel better, and not want to go any further. This is fine. It is your decision. You may wish to stop after you feel you have done some Stage One work and feel a bit more in control of your life and feelings. Alternatively, you may wish to have a break and perhaps come back to Stage Two in the future.
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This manual is mainly about Stage One. After you are reasonably confident with these skills, your mental health worker will discuss with you whether you want to do any Stage Two work, and what the options are.

Will it work for me?

Learning to cope with the effects of trauma is not easy and will require time and support from others. Not all the resources in the manual will be right for you, and it may take some time before the strategies seem to help you. Recovery often happens in small steps, and if you experience no immediate benefit this does not mean you have failed or that you won’t benefit in the future. Most people will find it helpful to discuss these ideas with a family member or their key worker to see which ones might be most useful, and to get some support with putting them into practice. Even if you do not identify any events or experiences which you think were traumatic, the manual may give you some useful ideas for coping with feelings of distress and keeping yourself safe.

What do we mean by trauma?

Trauma refers to an event or series of events that are highly threatening, and that lead to feelings of fear, helplessness and horror

The events in our lives, especially in our childhood, have a big impact on our mental health and wellbeing. Some of the most difficult experiences are called traumas. The more distressing and threatening the trauma is, the more likely it is that someone will experience some mental health difficulties, at the time and perhaps later on as well. Below are some examples of traumatic experiences:

- Childhood abuse (emotional, physical, sexual or neglect)
- Domestic violence (being abused or witnessing abuse)
- Bullying
- Physical assault such as stabbing or mugging
- Rape or sexual assault
- Torture
- Natural disasters such as earthquakes
- War and combat
- Road traffic accident or work accident
What is trauma?

How do I know if I have experienced trauma?

Many people have never named the difficult experiences they have faced as ‘trauma’, and this may not be the term you prefer to use. However, any experience that leaves you feeling overwhelmed, scared and alone can be traumatic, even if it doesn’t involve physical harm. If your survival, well-being, sense of yourself and of the future were threatened, then you experienced a trauma.

A trauma can be a one-off event such as an assault or a road traffic accident. It can also involve many events that have occurred over a long period of time. This is often called ‘complex trauma’. Not everyone realises the full impact on them at the time, and in fact sometimes people believe these experiences are normal, because they don’t know any different. For example, it is common for children who have been abused to believe this happens to everyone. However, we know that these traumatic events can have very severe consequences.

It has been estimated that overall:

- 1 in 3 women report childhood sexual abuse
- 1 in 7 men report childhood sexual abuse
- 1 in 5 women report physical abuse in childhood
- 1 in 4.5 men report physical abuse in childhood

Research has also shown that people who have been sexually and physically abused are:-

- 15 times more likely to have 3 or more mental health diagnoses
- 15 times more likely to attempt suicide
- 12 times more likely to be admitted to a psychiatric inpatient unit
- 4 times more likely to experience auditory and visual hallucinations (hearing voices or seeing things that others do not hear or see.)

How does trauma affect people?

Trauma is a very personal thing. What traumatises one person can be of less significance to others. This may be because of someone’s individual personality, beliefs, values, and previous experiences. It also depends on how others reacted and what kind of support, if any, you had at the time.

Trauma doesn’t have to have lasting effects. Any of the events described above is bound to be upsetting when it actually happens. For example, it is normal to be
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Shaky, tearful and frightened for days or weeks after a sexual assault or a car crash, but if you can talk to friends and family and be believed and supported, you are much more likely to be able to put the event behind you and get on with your life.

However, recent research has shown that trauma often has serious and lasting effects on people’s mental health. It is more likely to affect us badly when it is long term and complex, and when we had no one to believe, protect and support us. If you felt that the trauma was a shameful secret, or an abuser told you not to tell anyone, or you believed that the trauma was your fault, or you were trapped for years in an abusive relationship, you are much more likely to suffer mental health problems.

Trauma can affect how we feel, think, and relate to others in various ways. This can range from more obvious difficulties such as feeling anxious about going out, or being upset by bad memories, to the kinds of experience that are sometimes called ‘psychosis’, ‘schizophrenia’, ‘bipolar disorder’, ‘personality disorder’ and so on.

This is a list of some common effects of trauma:

<table>
<thead>
<tr>
<th>The way you feel</th>
<th>The way you think</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experiencing intense emotions of distress, sadness, shame, anger, bitterness, guilt and low mood.</td>
<td>Having a very low opinion of yourself.</td>
</tr>
<tr>
<td>Feeling anxious, fearful and panicky</td>
<td>Believing that the trauma was your fault or that you should have been able to stop it happening, and blaming yourself.</td>
</tr>
<tr>
<td>Feeling tense, irritable and ‘on edge’</td>
<td>Images and memories of the trauma which come into your mind without warning, or ‘flashbacks’.</td>
</tr>
<tr>
<td>Finding it very hard to cope with these overwhelming feelings or calm yourself down</td>
<td>Poor concentration, racing thoughts, memory difficulties.</td>
</tr>
<tr>
<td>Feeling unmotivated, helpless and powerless.</td>
<td>Nightmares about the trauma</td>
</tr>
<tr>
<td>Feeling numb or unreal and cut off from your emotions</td>
<td>Being unable to make sense of what happened to you.</td>
</tr>
<tr>
<td><strong>The way you behave</strong></td>
<td><strong>The impact on your body</strong></td>
</tr>
<tr>
<td>Avoiding anything that reminds you of the trauma e.g. going to certain places, watching the news.</td>
<td>Feeling on the alert all the time, so that you are easily startled.</td>
</tr>
</tbody>
</table>
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| Isolating yourself from other people, including family and partners. | Heart racing, stiff muscles |
| Being unable to unwind and relax | Not being able to sleep |
| Giving up your usual hobbies and activities | Exhaustion because of being constantly on edge and not sleeping. |
| Turning to drugs, cigarettes or alcohol to cope | In the longer term, increasing the risk of some physical health problems and chronic fatigue or chronic pain |
| Self-harming to relieve your feelings | |

More effects of trauma

Difficulties trusting others
It is not surprising that people who have been hurt by others, sometimes by the people who were supposed to look after them, have difficulties with trust. People describe swinging between hope (thinking that at last someone understands them and can help them) and distrust (suddenly becoming terrified that they are going to be betrayed again). It may feel safer to cut yourself off from other people and not to confide in anyone.

Overwhelming feelings
People who have experienced multiple, complex traumas may find it difficult to cope with their feelings. They may find their emotions overwhelming and hard to control, and they may feel full of anger, guilt, shame and fear. Some people describe finding it very hard to calm themselves when they are upset, and may turn to drink, drugs or self harm to relieve their feelings.

Sometimes the only way to cope is to cut off or ‘dissociate’ from these feelings. This is a very common experience. It can happen without trying, as it is our brain’s way of keeping us safe and happens automatically. As a result, memories may be fragmented, and people may feel out of contact with their feelings and their bodies. This is explored in more detail in the section on ‘Dissociation.’

Some people who have experienced complex trauma describe strong feelings of hopelessness and despair. They may feel that life is meaningless, and that they are completely different from others.
Voices and visions

Some people have voices and visions, which simply means that they are hearing, seeing or sensing something that others around them are not. This can occur in all five senses, hearing, sight, smell, taste and touch, sometimes in combination.

Research suggests that people who hear voices that others do not hear are very much more likely to have experienced traumas of various kinds. It is now thought that hearing voices, especially if they are critical and hostile, can be understood as a kind of memory of the abuse. This makes sense given that voices often sound like the abuser, or say the things the abuser said, or express the same feelings of shame and guilt that the person has about themselves as a result of the abuse. This is discussed in the section on ‘Hearing voices.’

If you have very strong beliefs about people pursuing you or spying on you or being out to get you, or plotting against you, this may also be a reaction to trauma. It is not surprising that the world may seem a very dangerous place after what you have been through. Sometimes these realistic fears seem to get exaggerated, and it is hard to work out what is true and what is not. This is discussed in the section on ‘Unusual beliefs.’

Here are some examples of what people who have faced traumatic events in their life have told us:
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Complex trauma
Some people experience multiple traumatic events over a long period of time, often dating back to early childhood. This is called ‘complex trauma’. Not surprisingly, this is likely to affect the person much more severely than a single event. People who use mental health services have often experienced complex trauma including sexual, physical and/or emotional abuse and neglect. For example, they may have been brought up in a family where there was little affection. In addition, they may have been abused or hurt by a relative, neighbour or a person in authority, perhaps for several years. They may then have been bullied in school or ended up in a violent relationship. In these situations, they may have felt helpless, powerless and unable to escape.

People who have been through these multiple traumas may have all the reactions that are commonly referred to as “post traumatic stress disorder” or PTSD, such as flashbacks and nightmares.

What is Post Traumatic Stress Disorder (PTSD)?
If your reaction to trauma is particularly severe or long-lasting, you may be diagnosed as having PTSD. This is simply a shorthand way of saying that you have experienced trauma and are still affected in one or more of these ways:

- having upsetting thoughts, images and memories of the traumatic event come into your mind, even though you might be trying hard not to think about it. This can also include smells or sounds related to what happened.
- dreaming about the trauma
- having vivid unwanted images or memories of the trauma in your mind. This is sometimes called having flashbacks, which feel as if you are re-living the trauma.
- getting very upset if anything happens that reminds you of the trauma
- your body reacting to reminders of the trauma – for example, heart racing
- avoiding anything that reminds you of the trauma
- numbness and losing interest in your everyday life
- feeling very on edge and unable to ‘turn off’ or relax. This is called being “hyper alert”.

It is easy to see how one of these reactions can lead to others. Flashbacks are very upsetting and frightening and so people naturally try to avoid all possible reminders of the traumatic event. It is also easy to see how our minds might want to cut off, or go ‘numb’, rather than have these feelings. Being hyperalert, as if another trauma might happen at any time, is bound to be exhausting.
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In the case of complex trauma, people may have a range of different flashbacks from different traumas.

**Domestic violence**
The impact of violent and controlling relationships is sometimes overlooked, both by the adults who are trapped in this way and by professionals. Domestic abuse is the misuse of power and control by one adult over another adult person within the context of a close personal relationship. Abuse can be **physical, emotional, psychological, sexual or financial**.

Victims of domestic abuse are most commonly women in heterosexual relationships, but it can also occur in homosexual relationships. Men can also be victims of this type of abuse. If your partner hits you, constantly criticises and undermines you, or is controlling, you could be in a domestically abusive relationship.

When people are treated badly in their early relationships, they may expect that all partners will act in an abusive or controlling way and accept that this is normal and ok. They may believe that they have to put up with this type of treatment and may feel helpless to do anything about it.

Some people may think about leaving an abusive partner but feel too scared to do so. Others may worry that they couldn’t cope on their own or that they need to stay for their children. Leaving an abusive relationship is a difficult decision to make but can have a life-changing effect on a person’s mental health. Abuse in relationships is never acceptable.

**A different understanding of distress**
Any of the upsetting experiences described in this leaflet can lead people to wonder if they are going mad. This is not true. People who have been traumatised are having a normal reaction to an abnormal situation. Our minds and bodies are made to protect us from harm by, for example, avoiding situations that might be dangerous, or keeping us very alert so we can avoid future risk. Sometimes these reactions get stuck so that we carry on reacting as though the danger is still happening. We need to learn to undo these reactions, which is difficult but not impossible.

Some professionals give these experiences a diagnosis like psychosis or personality disorder. Recently, some professionals have argued that people are often reacting to traumatic events, rather than suffering mental illness, and a diagnosis may not be the most helpful way forward. This is a controversial subject, and people have different views about diagnosis. See the reading list at the end for resources that will help you to think about whether or not your diagnosis, if you have one, makes sense to you, or whether it makes more sense to think of your difficulties as a reaction to trauma.
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Recovery from the effects of trauma
It is very important to remember that you can recover. You will not forget what happened to you, but you can learn to manage the distress so that it no longer controls your life as it may do now. Even if you have more unusual experiences such as hearing voices or having beliefs that are not shared by others, you can still learn to cope with these reactions so that they do not dominate your life. With the help of the sections in this manual and your mental health worker, support worker, friends or family, you can start to overcome the effects of the trauma so that you can look towards the future.

People who have gradually been able to talk about and come to terms with what has happened to them, and develop ways of managing their feelings and keeping themselves safe, can overcome their difficulties and find new hope and meaning in their lives. Very often this needs to happen through finding healing relationships with others. This might be through friends or partners, or it might be through individual therapy or joining a therapy group of others who have been through similar experiences.

Similarly, people who hear voices or have unusual beliefs often find that these become manageable once they have come to terms with the underlying traumas.

REMEMBER YOU HAVE ALREADY DONE VERY WELL TO HAVE SURVIVED. AT THE MOMENT, YOUR MIND AND BODY MAY BE LIVING IN WHAT IS SOMETIMES CALLED ‘TRAUMA TIME’ – AS IF THE TRAUMA WAS STILL HAPPENING, OR ABOUT TO HAPPEN AGAIN. RECOVERY IS ACHIEVED WHEN YOUR MIND AND BODY BOTH LEARN THAT THE TRAUMA IS OVER, YOU HAVE SURVIVED IT, AND YOU ARE SAFE NOW.
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Reading and Resources

If you would like more information about domestic abuse then please do talk to your key worker or another professional person such as a GP, nurse, psychologist or social worker.

**Safer Wales** can provide help and advice on safety, information on possible court options, advice on benefits and housing, and support services, such as counselling or refuge provision. They can be contacted by calling 029 2022 2022 and are there Monday to Friday between 9 and 5pm.

There is also the 24/7 **All Wales Domestic Abuse and Sexual Violence Helpline** available on 0808 80 10 800. In any emergency don’t delay, dial 999.

NAPAC (National Association for People Abused in Childhood) – provide a national free phone support line for adults who have experienced any type of abuse in childhood. Telephone support available on 08000 853 330. [www.napac.org.uk](http://www.napac.org.uk)

NSPCC Adults who were victims of child abuse or neglect can contact the helpline for advice and support 0808 800 5000. [www.nspcc.org.uk](http://www.nspcc.org.uk)

MOSAC (Mothers of Sexually Abused Children) – support all non-abusing parents and carers whose children have been sexually abused 0800 980 1958.

Survivors UK – National helpline for adult male survivors of rape or sexual abuse 0845 122 1201. Helpline available Monday & Tuesday 19:00 – 21:30 or Thursday 12:00 – 14:30. [www.survivorsuk.org](http://www.survivorsuk.org)

1 in 6 – Website with help lines and resources for men who have experienced childhood sexual abuse. [https://1in6.org/](https://1in6.org/)

The *Book Prescription* scheme allows you to borrow copies of self-help books from any library. Ask your mental health worker for details. We recommend:


A book that many have found helpful in thinking about trauma in society as a whole is *Trauma and Recovery*, Judith Herman, (1997), Basic Books.

A *straight talking introduction to psychiatric diagnosis* by Lucy Johnstone, (2014), PCCS Books. This will help you to think about the pros and cons of a psychiatric diagnosis.
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Reading and Resources

Apps

Below are some apps that can be downloaded from the Google Play store and the iPhone App store that might be helpful too.

‘Breaking Free – The Journey Begins’ is an app for people who have experienced childhood sexual abuse, and consists of information and various coping strategies and is free to download.

‘Breaking Free – Keeping Safe’ is an app that provides strategies to help people stay safe while working through their difficulties, including managing harmful coping strategies, recognising triggers, coping with intense feelings and taking control of panic attacks.

‘Breaking Free – Feeling Guilty’ is an app that is designed for people with a history of abuse to help the user to overcome any thoughts or feelings of blame for being abused.

‘Breaking Free – Safety Zone’ is an app that contains over 15 techniques to help the user to gain more control over their emotions, thoughts and behaviour.