

# ***Post-Traumatic Stress Disorder PTSD***

PTSD is an emotional and behavioral disturbance that may occur after exposure to an exceptionally stressful, threatening, or catastrophic event. Even though **90%** of adults have at least one intense traumatic event in their lifetime, not everyone develops PTSD. The diagnosis emerges in **5%** of men and **10%** of women, but rates are higher in specific populations, depending on the type and intensity of the trauma. Listed below is a list of stressful or traumatic events that one may face and can increase these rates: ([Printable Version link at the bottom of this article](#))

- Disaster Victims
- Sexual abuse
- Violent crimes/Rape
- Military personnel due to war or conflict
- Witnessing violent death/crime
- Life threatening accidents
- Treat of serious injury or death
- Terrorism
- Firefighters/policemen

Not everyone ends up with PTSD. Why? There are two obvious factors: The intensity, duration, and number of traumatic experiences and the person's mental interpretation (meaning) of the experience.

## ***SYMPTOMS ASSOCIATED WITH PTSD***

***Arousal Symptom:*** restless, sleepless, hyper-alert, unable to relax, jumpiness, difficulties concentrating. Arousal symptoms suggest a heightened physiological and psychological activation.

***Intrusive Symptoms:*** mental "replays" and dreams in which the person sees, hears, feels, smells, tastes aspects of the event and has repeated bad dreams or nightmares. Sometimes replays feel real, vivid, and frightening.

**Avoidance Symptoms:** “shutting off one’s emotions”, avoiding reminders such as places, people, conversations, and stimuli, shutting oneself off from the world.

PTSD symptoms last beyond a month and can appear long after the original trauma. It can cause significant disruption and impairment to one’s normal life pursuits, such as social, school, work, and home.

## ***INTENSITY OF PTSD***

**Low intensity:** Some distressing symptoms, memories, and disturbing dreams. They are distracted from home and work duties, but functions are maintained. The condition often resolves spontaneously.

**Moderate intensity:** This displays greater quantity and intensity of symptoms, impulsive intrusive images, greater effort in avoiding trauma stimuli, heightened arousal, restless, sleep difficulties, depression, loss of faith, and work production. There is a disruption in normal life activities, diminishing family life, parenting, and sexual activity. Professional help is usually required.

**Severe intensity:** This is a very serious stage. They usually have the inability to work or participate in almost anything. They will have nightmares, panic attacks, rage reactions, intense feelings of guilt, anxiety, depression, and powerful disturbing intrusive images. They are usually in spiritual despair with suicidal thoughts that may overwhelm that person. Many cognitive, physical, emotional, and spiritual symptoms may appear. Suicidal actions may increase. Professional help is required!

## ***SPIRITUAL SYMPTOMS***

- World is unjust or unfair
- Loss of belief in God, feeling abandoned by God, no value in Scripture, finding it very hard to pray, not feeling spiritual
- World is unpredictable and unsafe
- Hopeless, lack of order and congruence in life, shattered self-esteem and self-efficacy

- No spirit of thankfulness

### ***HELPFUL HINTS FOR PTSD***

- Help individuals to remember that unwanted thoughts and memories are just mental images and memories. Having these thoughts are normal. Have them talk to people they trust, and encourage them by saying that traumatic thoughts, memories and images usually lessen with time.
- Help individuals with feelings of anxiety and panic to know that these feelings are not dangerous. The same reactions can occur if one exercises strenuously not thinking negatively (“I am having a heart attack; I am going to die; I am losing control”). Use slow breathing techniques, stay calm, rest for a few minutes, and resume activities when sensations subside. Encourage them that practice makes coping easier.
- Help individuals feeling like trauma is happen again and having flashbacks to keep their eyes open and notice where they are. Use self talk to remind them where they are and that they are safe, the traumatic event happened in the past and they are in the present. Encourage them to get up and move around, get a drink of water, wash their face and hands, call someone they trust to tell them what is happening, and help them to remember that this is a common traumatic reaction. Have them talk to a counselor if memories become intense.
- Help individuals with trauma-related dreams and nightmares to understand the nature of brain activity when sleeping. Help them to understand that the brain does not distinguish between memories and reality. It may cause them to react as if they are in danger, and that having anxiety and panic does not mean that they are in real danger. Have them get up to orient themselves, listen to music or read, do light paperwork or light physical activity, talk to someone or have them talk to their doctor if nightmares persist.
- Help individuals with sleep difficulties to maintain a regular bedtime schedule. Exercise earlier in the day, not a few hours before bedtime. Encourage them not to use tobacco, alcohol, or caffeine before bedtime. If unable to sleep, have them get up and read, listen to music, perform a relaxing hobby, write in a journal or some other light activity until they become sleepy.
- Encourage individuals who are irritable, angry, and displaying rage to stop, take a time out, using breathing exercises, and to think things over. Help them to know it is okay to walk away from a situation. Only engage in meaningful arguments if need be, and help them to

just let things go. Encourage them to exercise daily and take walks to reduce the tension in the body. If they are unable to control their anger, encourage them to speak to a counselor.

- Help individuals with concentration problems to slow down, get better focused on their objectives or task, write down notes to themselves as reminders, break big projects into smaller segments, and make reasonable plans each day.
- Help those who are emotionally dumb by understanding that this is a normal reaction to trauma. It is not deliberate, it is not controlled. It just happens. Encourage them to spend time with people they care about and do things they enjoy to encourage rekindled feelings. Encourage them to say positive things to people they care about or write it down. Surround them with people who care.

## ***NEEDED SUPPORT FROM OTHERS***

Most spouses don't fully understand PTSD. They usually just want the symptoms to go away and for their spouse to get over what they are experiencing. It is imperative that a spouse is supportive, tries to understand, do not be in a quick hurry to "fix" things, support counseling efforts, and learn better communication skills. There are a number of different communication techniques, such as the speaker-listener technique and the awareness wheel that will get the spouse to communicate properly, as well for the other spouse to actually know and understand how their spouse is feeling and what they are going through. Regular communication fails to validate one's experience. This is a journey for this individual. Some will recover quickly, while others may take a little longer.

Listed below are a few suggestions for spouses to consider in helping their spouse through this process of recovery:

- Be familiar with traumatic stress so you can become helpful
- Provide companionship, sense of belonging that prevents isolation and feelings that no one cares or understands
- Support any professional services given and participated when needed
- Traumatic stress reactions may interfere with your loved one's ability to trust others or to be emotionally close
- Communication with a stressed victim may be difficult and discover safe ways to speak and listen.

- Some may “spare” the family distress by not talking about the trauma your spouse has endured. Ignoring these significant feelings may make your spouse feel “cut off”
- Understand that your spouse may experience a wide range of negative thoughts
- Your spouse may express little interest in social contact
- Understand this is a journey, just like taking a road trip. There are many twists and turns but they will eventually get to their destination of recovery. Be patient and supporting during this time. Healing will come.
- Understand that once your spouse has recovered, these symptoms will rarely come back. It is a step in their life that they have to face, overcome with strategies and coping skills, and using these from time to time to ward off intrusive thoughts.
- Your children, in accordance to ages, should be informed of the changes that a parent has undergone and advise them how to help the distressed parent.

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