TRAUMA FAQS

1. What is trauma?

The word *trauma* is Greek for “a wound.” Trauma is a wound to a person’s health and well-being. When a person shows signs of trauma, his or her brain is having trouble integrating or “working through” the traumatic event. The person is having a normal reaction to an abnormal situation.

2. What events are traumatic?

**One-time events.** Events that are intense, sudden, unpredictable, extremely negative or dangerous, and cause feelings of severe helplessness and loss of control can cause trauma. This includes natural disasters—“acts of God”—such as earthquakes and tsunamis. It also includes human violence, such as witnessing or experiencing firsthand a beating or rape. Human threats or violence are often more traumatic than natural disasters because the violence is intentional and causes loss of trust.

**Repeated or ongoing situations.** Long-term, repeated negative events, such as child abuse, spouse abuse, child neglect, or fighting in a war, cause the most serious, long-lasting trauma. This is both because of the long duration of the event and because other people have inflicted intentional hurt.
3. WHO EXPERIENCES TRAUMA?

Anyone can be traumatized by an event: those directly affected, friends and family of victims, first responders, and even people learning about the event from the news. On the other hand, an event may be traumatic for one person and not for another. Trauma is a personal reaction to an event. The meaning that a person gives to the event will greatly determine whether that person becomes traumatized.

For instance, the trauma experienced by someone in a car crash will depend on how badly she or others were physically injured, who (if anyone) was at fault, whether she had ever been in a previous crash, and how mentally and emotionally strong and healthy she was before the crash.

People most at risk of being traumatized are those who have very little family or social support in their lives or a history of child abuse or neglect.

4. WHAT ARE SYMPTOMS OF TRAUMA?

**Re-living the event.** This can include flashbacks, nightmares, and extreme emotional and physical reactions to reminders of the event. Emotional reactions can include feeling guilty, extreme fear of harm, panic attacks, and numbed emotions. Physical reactions can include uncontrollable shaking, chills, heart palpitations, tension headaches, depression, and suicidal thoughts and feelings.

**Avoidance.** This includes staying away from activities, places, thoughts, or feelings related to the trauma. A person who was abused on a playground may begin to avoid all playgrounds. Avoidance also includes feeling detached or estranged from others, as well as drug and alcohol abuse.

**Increased arousal.** This includes being overly alert or easily startled: think of the soldier instinctively dropping to the ground when he hears a car backfire. Increased arousal can also bring about sleeping problems, irritability, outbursts of anger, and lack of concentration.

Symptoms of trauma may appear immediately after the event or may take days, weeks, months, or years to appear.
5. HOW CAN I HELP SOMEONE WHO MAY BE EXPERIENCING TRAUMA?

LISTEN. Be kind, understanding, and forgiving.

ENCOURAGE the person to talk about the trauma. Finding professional help is important, but the most important thing is that the person talk about the trauma with someone. Often, the trauma victim will have kept it a secret for a long time. That secret is toxic to them.

REASSURE that the symptoms may be normal but that help is available if the symptoms are interfering with personal or work life.

ENCOURAGE maintenance of daily routines, including healthy leisure and recreational activities.

DISCOURAGE avoidance of situations, people, and places that remind the person of the trauma. Avoidance of one painful situation, person, or place can eventually lead to avoidance of all situations, people, and places. This cuts off critical social and family relationships and makes it difficult to heal from the trauma.

ENCOURAGE the resolution of small day-to-day conflicts so that they don’t add to the overall stress level. Getting that dripping faucet fixed or resolving a small issue with a coworker may lower the internal “pressure” and help avoid a crisis.

ENCOURAGE the person to be kind and forgiving to himself or herself.
6. WHERE CAN PEOPLE FIND IMMEDIATE HELP?

Domestic Violence Crisis Center, Inc. (Minot):  
24-hour Crisis Hotline (701) 857-2200  
Toll-free 24-hour Crisis Hotline (800) 398-1098  
Rape Crisis Hotline (701) 857-2500  
http://www.minot.com/~dvcc/

Rape and Abuse Crisis Center of Fargo-Moorhead:  
Hotline (701) 293-7273  
Toll-free Hotline (800) 344-7273  
http://www.raccfm.com/

The Village Family Service Center  
(Bismarck, Devils Lake, Fargo, Grand Forks, Jamestown, and Minot):  
Hotline (800) 627-8220  
http://www.thevillagefamily.org/

YWCA Cass Clay (Fargo and Moorhead):  
Emergency Shelter Hotline (701) 232-3449  
http://www.ywcacassclay.org/programs/shelter.html

ND Department of Human Services:  
Report abuse and neglect of vulnerable adults (855) 462-5465  
http://www.nd.gov/humanservices/services/
7. WHERE CAN PEOPLE FIND MORE INFORMATION?

American Red Cross
http://www.redcross.org/services/disaster
Focuses on meeting people’s immediate emergency needs—including mental health services—after a disaster.

Anxiety Disorders Association of America (ADAA)
http://www.adaa.org/
Informs the public, healthcare professionals, and legislators that anxiety disorders are real, serious and treatable. Works to improve the lives of people with anxiety disorders.

National Center for Post-Traumatic Stress Disorder (NCPTSD)
http://www.ptsd.va.gov/
Part of the U.S. Department of Veterans Affairs. Works to improve the clinical care and social welfare of America’s veterans through research, education, and training in the science, diagnosis, and treatment of PTSD and stress-related disorders.

National Institute on Mental Health (NIMH)
http://www.nimh.nih.gov/
Part of the National Institutes of Health. Responsible for research on mental health and mental disorders, including research on the mental health consequences of and interventions after disasters and acts of mass violence.

Posttraumatic Stress Disorder (PTSD) Alliance
http://www.ptsdalliance.org
An alliance of professional and advocacy organizations that provides educational resources to people with PTSD and their loved ones; people at risk for developing PTSD; and medical, healthcare and other professionals.

Substance Abuse and Mental Health Services Agency (SAMHSA)
http://www.samhsa.gov/
The lead mental health services agency of the U.S. Department of Health and Human Services. Helps assess mental health needs and training for disaster workers and mental health outreach workers.

SOURCES
• International Society for the Study of Trauma and Dissociation: http://www.isst-d.org
• Centers for Disease Control and Prevention: http://www.cdc.gov