

Traumatic Events and Grief

Remember changing after a traumatic event is normal, most people who experience or witness a traumatic event face difficulty in the immediate aftermath. For most within three months, they feel much better and return to normal functioning.

Each person reacts different to experiencing trauma, some may have no stressful reaction to the event and others may have a longer-lasting impact. These are some of the most common reactions people face after a traumatic event.

Re-experiencing the Trauma: People may relive the traumatic event over and over. This may occur in the form of recurrent unwanted thoughts, nightmares, or flashbacks. These may occur because the event is outside the “normal” course of events and is shocking to the brain; being a traumatic event the brain attempts to make sense of an event through the use of memories.

Anxiety and Fear: In the aftermath of a traumatic fear it is common for people to experience anxiety and fear even in the absence of a continued threat. This can occur during times that you are re-experiencing the event or can be a more overwhelming or even ever-present feeling. This, like flashbacks, can occur while doing seemingly unrelated activities, but this is your mind connecting those two events. Tracking and understanding the times which seem unrelated that cause anxiety or fear can help you process through that symptom.

Anger: Another natural emotional response to trauma is anger. This may be directed anger, at those involved, those around you; the anger felt may also be less directed and general feelings of anger which may overwhelm the person and come out at others due to the amount of anger felt.

Guilt or Shame: Guilt and shame can connect with anger or exist separately. Many who are present when a traumatic event occurs may feel guilt that they were not harmed, guilt or shame feeling they should have been able to prevent or stop the event, or change the outcome of the event. This is a mental and emotional attempt to take control of the event; by owning the event you can control the outcomes in the future, but this is not true in most cases as the event often occurs as an unexpected event that could never have been prepared for.

Increased Vigilance or Hypervigilance: Increased or hypervigilance is another common reaction to trauma. As traumatic events are unexpected events, often in commonplace settings or during everyday activities, this can cause lead to responding by the brain attempting to be more aware or vigilant in a “safe” situation. This hypervigilance can, at times, lead to emotions connected to the event occurring due to your mind being so overly vigilance that it is assessing threats that are not actually present.

THE 5 STAGES OF GRIEF AND LOSS

Denial: Individuals may refuse to accept that a loss has happened by either minimizing or denying the situation.

Anger: Individuals may become very angry at themselves, others, even the person or persons who were lost.

Bargaining: Individuals may bargain with God or others for more time to delay the loss.

Depression: Individuals at this stage have come to realize the loss occurred and begin grieving that loss.

Acceptance: Individuals gain a logical understanding of the situation and come to terms emotionally with the loss.

This is not an absolute or step by step process, individuals usually move back and forth through the stages rather than experiencing one and moving on to the next.

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Change of Self-Image and Worldview: How a person views him or herself and how they view the world can be shifted as a result of a traumatic event. A person who once was confident may begin to feel less sure of him or herself, a person may feel they are unworthy or weak. A person's worldview may also drastically shift after a traumatic event, things which were once believed to be good may be seen as wrong or evil, people who once trusted may be viewed as unworthy of that trust, the world may be seen as an unhealthy, unsafe, or dangerous place.

Avoidance: Due to the impact of trauma individuals may avoid people, places, and things, most commonly those which are connected to or remind the person of the traumatic event. Some individuals may withdraw less related events such as a location or avoiding going out at a time of day because it is when the event occurred. Also, with avoiding the physical many individuals attempt to avoid the emotional as well, pushing away thoughts or feelings connected to the trauma or those connected to the event.

Grief and Depression: Most people who experience a loss will feel some level of depression and go through the 5 Stages of Grief in one form or another. What this may look like for each person is different, some may go through all the stages of grief, others may only go through some. Depression is one stage that merits specific discussion; depression after a loss may mean crying, isolation, a loss of energy or interest in things the person once enjoyed. While depression is a normal reaction to trauma it is important to note that if individuals have thoughts such as wishing they were dead or desires to hurt or kill themselves it is important to talk with a therapist, medical provider, or friend and seek more help.

Sexual Relations and Intimacy: After a traumatic event many have difficulties in intimate and sexual relationships. Because of many contributing factors a change in intimacy (closeness not sexual) may occur, some may find it difficult to feel close to anyone or may feel a need to have their spouse or friends near constantly. Sexual relationships may change drastically as well after a traumatic event, some individuals may lose interest in sex or be unable to perform or climax, others may be more aggressive or feel the need to be dominant during sexual encounters. If any of these items occur the best thing to do is talk with your partner about the issue.

Increased Alcohol or Drug Use: Many who experience a traumatic event will increase the amount of alcohol or drugs they are currently using, or may start drinking or using drugs in an attempt to "self-medicate" themselves and block out painful memories, emotions, or thoughts connected to the traumatic event. Those who have trouble falling asleep or have nightmares may seek to use alcohol or drugs to assist with sleep, this can be more damaging as this is not restful sleep which rejuvenates the person the way sleep is designed and in many cases is more damaging than a lack of sleep for the person.

The items listed above are just some of the most common reactions to traumatic events and in no way a complete list of all possible reactions. Not every person will face all of the reactions listed above, but it is common to have more than one after a trauma, and one reaction may trigger another or a chain of reactions; hypervigilance may lead to fear, fear may lead to shame, shame to a change of self-image and the use of increased alcohol use.

While most people work through these reactions within three months, early therapeutic interventions can assist with processing the trauma and reaction to the event. If these reactions are intrusive and preventing you from involvement or enjoyment of daily life seeking assistance is advisable. If these reactions persist for longer than three months, treatment is also highly suggested as you may be experienced the beginning stages of PTSD or another longer-lasting reaction.