

It's O.K. to Respond That Way

Understanding Normal Stress Responses

You've just had a terrible experience. Now you will probably experience some difficult physical and/or emotional responses. This may be happening now. Many people are fearful that their reactions are unique. Please don't be alarmed. These are normal responses of normal people to a highly abnormal event. It's O.K. to feel that way...

"What are common Stress Responses?"

- Physical changes may include fatigue, headaches, heartburn, difficulty sleeping, nightmares, and a loss or increase in appetite.
- Emotional and mental responses include confusion, anxiety, fear, numbness, despair, depression, guilt, anger, grief, withdrawal, and helplessness.
- Poor concentration, flashbacks, and intrusive thoughts are all common normal responses.

"When will I feel these things?"

- There is a good chance that you are experiencing some of the physical and emotional responses now, even though the event is over.
- Sometimes these responses appear immediately, but with other people, days, weeks, or even months may pass before the stress reactions appear.

"How long will these reactions last?"

- The time it takes for emotional wounds to heal varies from person to person. Some events are just too powerful to manage quickly. Much like the flu, grief and anxiety reactions must run their course. No one can deny that this is a difficult experience, but it is important to know that things will improve.

"What if I begin to feel worse?"

- Sometimes the intensity of your response may increase, or the reaction may be very prolonged. Professional assistance from a counselor can help. This does not imply weakness or craziness. It simply means that the particular event was so powerful that it pushed you beyond your normal coping capabilities.

"What can I do to feel better?"

- The passage of time will help, and talking things out with professionals, peers, or loved ones will help a lot. In fact, it is crucial that you "talk out" your experience. Withdrawal and "sealing over" can make recovery more difficult.
- You should avoid alcohol and drug consumption. Alcohol is actually a depressant, and like drugs, can prolong the pain of the traumatic event.
- Take good care of yourself by eating healthy foods, exercising within your limits, getting plenty of rest, and staying in touch with people who care.

And when it's tough, remember, it's O.K. to feel that way...

HELPFUL HINTS FOR RECOVERY

Trying some of the following hints may help to alleviate the emotional pain associated with a traumatic event.

FOR YOURSELF

- Try to rest a bit more
- Contact friends
- Have someone stay with you for at least a few hours or periods for a day or so
- Reoccurring thoughts, dreams, or flashbacks are normal – don't try to fight them – they will decrease over time and become less painful
- Maintain as normal a schedule as possible
- Eat well-balanced and regular meals (even if you don't feel like it)
- Try to keep a reasonable level of activity
- Fight against boredom
- Physical activity is often helpful
- Reestablish a normal schedule as soon as possible
- Express your feelings as they arise
- Talk to people who love you
- Find a good counselor if the feelings become prolonged or too intense

FOR FAMILY MEMBERS AND FRIENDS

- Listen carefully
- Spend time with the traumatized person
- Offer your assistance and a listening ear, even if they have not asked for help
- Reassure them that they are safe
- Help them with every day task like cleaning, cooking, caring for family, and minding children
- Give them some private time
- Don't take their anger or other feelings personally
- Don't tell them that they are "lucky it wasn't worse" (traumatized people are not consoled by those statements); Instead, tell them that you are sorry that such an event has occurred and you want to understand and assist them

***If the symptoms described above are severe, or if they last longer than three weeks, the traumatized person may need professional counseling. The person or family members are advised to contact a mental healthcare professional.**

The information on this sheet has been provided by Jeffrey T. Mitchell, Ph.D. of the University of Maryland's Emergency Health Services Program - International Critical Incident Stress Foundation

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TYPICAL REACTIONS TO A TRAUMATIC EVENT

PHYSICAL	COGNITIVE	EMOTIONAL	BEHAVIORAL	SPIRITUAL
Fatigue	Blaming	Anxiety	Change in activity	Anger at God
Nausea	Confusion	Guilt	Change in speech	Feeling distant from God
Muscle tremors	Poor attention	Grief	Withdrawal	Withdraw from place of worship
Twitches	Poor decisions	Denial	Emotional outbursts	Uncharacteristic religious involvement
*Chest pain	Poor concentration	Emotional shock	Suspiciousness	Sudden turn from God
*Difficulty breathing	Raised or lowered alertness	Fear	Change in usual communication	Belief that God is powerless
*Elevated BP	Memory problems	Uncertainty	Restlessness	Loss of meaning and purpose
Thirst	Hypervigilance <or>	Emotional control problems	Increased alcohol use	Sense of isolation from God
Headaches	awareness of surroundings	Depression	Loss/increase in appetite	Questioning basic beliefs
Visual problems	Poor problem solving ability	Inappropriate emotions	Acting out	Anger toward clergy
Vomiting	Poor abstract thinking	Apprehension	Nonspecific body complaints	Believing that God doesn't care
Grinding teeth	Loss of orientation	Feeling overwhelmed	Hyper-alert to environment	Belief that we have failed God
Weakness	Impaired thinking	Intense anger	Intensified startle or reflex response	
*Dizziness	Nightmares	Irritability	Pacing	
Profuse sweating	Flashbacks	Agitation	Erratic movements	
Chills		*Severe panic	Increase/decrease in sexual activity	
		<i>*Seek help from a professional mental healthcare provider</i>		
<i>*Seek medical help</i>				

5 T's – Time, Talk, Tears, Touch, & Tolerance (of yourself and others)

The 5 T's promote resiliency

North/West Lower Michigan Synod – Bishop's Response Team

