

Fact Sheet:

Post-Traumatic Stress Disorder (PTSD)

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If you have lived through a terrible experience, it is normal to feel lots of emotions, such as distress, fear, helplessness, guilt, shame or anger. You may start to feel better after a few days or weeks, but sometimes, these feelings don't go away. If they last a long time or disrupt your life, you may have post-traumatic stress disorder (PTSD). PTSD is a real problem and can happen at any age, affecting children and nearly eight million American adults.

Who can be affected by PTSD?

- Anyone who was a victim of a life-threatening situation or has been exposed to one.
- Combat veterans or civilians exposed to war.
- Children who are neglected and/or abused (physically, emotionally, sexually or verbally).
- Survivors of violent acts, such as domestic violence, rape, bullying, sexual, physical and/or verbal abuse or physical attacks.
- Survivors of unexpected dangerous events, such as a car accident, natural disaster, or terrorist attack.
- People who have learned of or experienced an unexpected and sudden death of a friend or relative.
- Emergency responders who help victims during traumatic events.

What are the symptoms of PTSD?

For many people, symptoms begin almost right away after the trauma happens. For others, the symptoms may not begin or may not become a problem until years later. Three groups of symptoms define PTSD:

- Reliving the trauma. Thoughts about the trauma come to mind even when you don't want them to. You might also have nightmares or flashbacks about the trauma or may become upset when something reminds you of the event.
- **Being constantly on guard or hyper-aroused.** You may be easily startled or angered, irritable or anxious and pre-occupied with staying safe. You may also find it hard to concentrate or sleep or have physical problems.
- Avoiding reminders of the trauma. You may not want to talk about the event or be around people or places that
 remind you of the event. You also may feel emotionally numb, detached from friends and family, and lose interest
 in activities.

There are also other symptoms:

- Panic attacks: a feeling of intense fear, with shortness of breath, dizziness, sweating, nausea and racing heart.
- **Physical symptoms:** chronic pain, headaches, stomach pain, diarrhea, tightness or burning in the chest, muscle cramps or low back pain.
- Feelings of mistrust: losing trust in others and thinking the world is a dangerous place.
- **Problems in daily living:** having difficulty functioning in your job, at school, or in social situations.
- Substance abuse: using drugs or alcohol to cope with the emotional pain.
- Relationship problems: having problems with intimacy, or feeling detached from family and friends.
- **Depression:** persistently sad, anxious or empty mood; loss of interest in once-enjoyed activities; feelings of guilt and shame; or hopelessness about the future. Other symptoms of depression may also develop.
- Suicidal thoughts: thoughts about taking one's own life. If you or someone you know is thinking about suicide, call 911 or 1-800-273-TALK (8255).

How can I feel better?

PTSD can be treated successfully. Treatment, support and self-care are critical to your recovery. Although your memories won't go away, you can learn to manage your response to them and the feelings they bring up. You can also reduce the frequency and intensity of your reactions. Get evaluated by a mental health professional. If you are diagnosed with PTSD, you can recover with the help of:

Psychotherapy. Although it may seem painful to face the trauma you went through, doing so with the help of a mental health professional can help you get better. Several types of therapy are helpful, including cognitive processing therapy, exposure therapy and cognitive behavioral therapy. Couples counseling and family therapy will help others to understand and support you.

Medicine. such as selective serotonin reuptake inhibitors or SSRIs, is used to treat the symptoms of PTSD. It lowers anxiety and depression and helps with other symptoms. Sedatives can help with sleep problems. Anti-anxiety medicine may also help.

Support groups. Talking to other survivors of trauma similar to yours can be a helpful step in your recovery. You can share your thoughts to help resolve your feelings, gain confidence in coping with your memories and symptoms and find comfort in knowing you're not alone. Contact your local Mental Health America affiliate or go to www.mentalhealthamerica.net/go/go/find_support_group.

Self-care. Recovering from PTSD is an ongoing process. But there are healthy steps you can take to help you recover and stay well. Discover which ones help you feel better and add them to your life.

Helping a Family Member with PTSD

If PTSD is affecting your family, consider contacting a mental health professional for individual, couples or family counseling. Through counseling, you can get the help you and your family needs to cope and support each other. For a referral to local services, contact your local Mental Health America organization or Mental Health America at 800-969-6642. You can also visit www.mentalhealthamerica.net.

More on PTSD

Mental Health America www.mentalhealthamerica.net/go/ptsd

National Center for Post-Traumatic Stress Disorder (802) 296-5132 www.ncptsd.org

Veterans

MHA's Operation Healthy Reunions Military PTSD Information www.mentalhealthamerica.net/reunions/resources.cfm

Make the Connection: Shared Experiences and Support http://maketheconnection.net

Trauma Survivors

Sidran Institute 888-825-8249 www.sidran.org Gift from Within (207) 236-8858 www.giftfromwithin.org

Witness Justice 800-4WJ-HELP www.witnessjustice.org/index.cfm

National Center for Victims of Crime (NCVC) (202) 467-8700 www.ncvc.org

National Center for Trauma-Informed Care http://mentalhealth.samhsa.gov/nctic/trauma.asp

National Suicide Prevention Lifeline 1-800-273-TALK (1-800-273-8255)





Fact Sheet: Trauma by the Numbers

Childhood abuse, interpersonal violence, bullying, disaster, war and other traumatic events leave many people with psychological trauma that does not go away. It can have profound effects on emotional and mental well-being, how we relate to others, how we act, and even overall health. We are just beginning to grasp how many people are affected by trauma and the toll that it takes. These facts call attention to the extent of trauma and its human cost:

Childhood Trauma

- Severe trauma in early childhood affects all areas of development, including cognitive, social, emotional, physical, psychological and moral. The pervasive negative effects of early trauma result in significantly higher levels of behavioral and emotional problems among abused children than non-abused children.
- Children exposed to early trauma due to abuse or neglect lag behind in school readiness and school performance, they have diminished cognitive abilities, and many go on to develop substance abuse problems, health problems and serious mental health disorders.
- The Department of Justice estimated that between 1 and 1.5 million children were assaulted, robbed, or raped in 1992. The Centers for Disease Control and Prevention reported that 8.7 million children under the age of 15 were seen in hospital emergency rooms for injuries in 1992.
- The U.S. Administration for Children and Families reported that 896,000 children confirmed victims of child abuse and neglect in 2002. Many of these children/youth suffered multiple forms of severe abuse and neglect but were only reported under one category.
- Between 75 and 93 percent of youth in the juvenile justice system have experienced some degree of trauma. The U.S. Advisory Board reported that in 1995 near-fatal abuse and neglect each year leave 18,000 permanently disabled children, tens of thousands of victims overwhelmed by lifelong psychological trauma, thousands of traumatized siblings and family members, and thousands of near-death survivors who, as adults, continue to bear the physical and psychological scars. Some may turn to crime or domestic violence or become abusers themselves.
- The 2010 Adverse Childhood Experiences (ACE) Study, an observational study of the relationship between trauma in early childhood and morbidity, disability, and mortality in the United States, demonstrated that trauma and other adverse experiences in are associated with lifelong problems in behavioral health and general health.

Crime, Violence and Sexual Abuse

- In 2006, according to the FBI, a robbery occurred every 1 second, forcible rape every 6 seconds, violent crime occurred every 22 seconds, murder every 31 seconds, and aggravated assault every 37 seconds. The estimated number of violent crime offenses was more than 1.4 million.
- Crime victims have a much higher lifetime incidence of posttraumatic stress disorder (PSTD) than people who have not been victimized (25% vs. 9.4%). Of crime victims diagnosed with PTSD, 37% also suffer from depression.
- Predicted cost to the health care system from interpersonal violence and abuse ranges between \$333 billion and \$750 billion annually, or nearly 17% to 37.5% of total health care expenditures.
- More than 6 in 10 U.S. youth have been exposed to violence within the past year, including witnessing violence, assault with a weapon, sexual victimization, child maltreatment, and dating violence. Nearly 1 in 10 was injured.
- A survey in 2000 of American youth between the ages of 12 and 17 estimated that 1.9 million adolescents had been victims of sexual assault, 3.9 million had been victims of physical assault, and 8.8 million had witnessed violence. **



- A lifetime history of sexual abuse among women in childhood and adulthood ranges from 15 to 25 percent.* An estimated 5 percent of males under the age of 18 experienced sexual victimization in the past year.
- One in every four women will experience domestic violence in her lifetime. Most cases of domestic violence are never reported to the police. An estimated 1.3 million women are victims of physical assault by an intimate partner each year.
- One in 6 women and 1 in 33 men have experienced an attempted or completed rape.
- Racially motivated violence and discrimination can be traumatic and have been linked to PTSD symptoms among people of color.xi
- LGBT people experience violence and PTSD at higher rates than the general population.xii
- For those who access the public mental health, substance abuse and social services, as well as people who are justice-involved or homeless, trauma is an almost universal theme.xiii
- Trauma victims are routinely re-traumatized by coercive practices used by schools, juvenile institutions, jails and prisons, police and psychiatric hospitals.

Wounded Warriors

- Since October 2001, approximately 1.6 million U.S. troops have been deployed in Afghanistan and Iraq. Early evidence suggests that many returning service members may be suffering from post-traumatic stress disorder and depression. Traumatic brain injury is also a major concern. In 2008 a RAND study found 18.5 percent of returning veterans reported symptoms consistent with PTSD or depression. xiv
- Of the troops that have served in Iraq and Afghanistan, 299,600 have gone to the VA for care. Of these, 120,000 were treated for mental disorders, including nearly 60,000 for PTSD. Substance abuse disorders remain one of the top three diagnoses in the VA health system.**
- Returning veterans with mental health and substance abuse problems may run into problems in other areas of their lives such as homelessness and unemployment, or worse, crime or suicide. One-third of the nation's homeless individuals are veterans.^{xvi}
- The National Vietnam Veterans Readjustment Study found differences among Hispanic, African American, and White Vietnam theater Veterans in terms of readjustment after military service. Both Hispanic and African American male Vietnam theater Veterans had higher rates of PTSD than Whites. Rates of current PTSD in the 1990 study were 28% among Hispanics, 21% among African Americans, and 14% among Whites.

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ihttp://mentalhealth.vermont.gov/sites/dmh/files/report/cafu/DMH-CAFU_Psychological_Trauma_Moroz.pdf

iii Adams, E.J. (2010) Healing invisible wounds: Why investing in trauma-informed care for children makes sense. *Justice Policy Institute Policy Brief*. iv U.S. Advisory Board on Child Abuse and Neglect, 1995 report, "A National's Shame."

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vi Dean Kilpatrick and Ron Acierno, Journal of Traumatic Stress, 2003.

vii Dolezl, T., McCollum, D., and Callahan, M. (2009) Hidden costs in health care: The economic impact of violence and abuse. Eden Prairie, MN: Academy on Violence and Abuse.

viii Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice. National Survey of Children's Exposure to Violence, October 2009. https://www.ncjrs.gov/pdffiles1/ojjdp/227744.pdf

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^{*}Substance Abuse and Mental Health Services Administration. (2009). Substance abuse treatment: Addressing the specific needs of women. Retrieved March 25, 2011, from http://www.ncbi.nlm.nih.gov/bookshelf/picrender.fcgi?book=hssamhsatip&part=tip51&blobtype=pdf *Bryant-Davis, T., & Ocampo, C. (2005). Racist-incident based trauma. The Counseling Psychologist, 33, 479–500.

^{**}Harvard School of Public Health and Children's Hospital Boston. "Pervasive Trauma Exposure Among US Sexual Orientation Minority Adults and Risk of Posttraumatic Stress Disorder," Andrea L. Roberts, S. Bryn Austin, Heather L. Corliss, Ashley K. Vandermorris, Karestan C. Koenen, *American Journal of Public Health*, online April 15, 2010.

xiiii Jennings, A. (2004). The damaging consequences of violence and trauma: Facts, discussion points, and recommendations for the behavioral health system. Retrieved from http://www.theannainstitute.org/Damaging%20Consequences.pdf

^{**} RAND Corporation. Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery, April 2008. http://veterans.rand.org/

^{**} Florida Statewide Office for Suicide Preventions, Veteran Statistics. http://www.helppromotehope.com/documents/Veteran_Statistics.pdf



Fact Sheet: Understanding Trauma

A traumatic event is one that threatens our life, our safety or our personal integrity. Traumatic events can affect us profoundly, causing psychological trauma. Exposure to trauma over time, like serving in a war zone or growing up with abuse or being bullied, can intensify psychological trauma.

Traumatic events affect us all initially. We can feel shocked and overwhelmed, and may feel a loss of control. Emotions can range from anger and horror to grief and numbness. Some people recover from trauma with the passage of time. But others, especially after repeated exposure, are left with invisible wounds to their emotional and mental well-being, and even their physical health.

As a society, we are just beginning to deal with trauma—bringing it out of the shadows, finding new ways of healing its wounds, and casting off the shame that prevents trauma survivors from seeking help.

Sources of Trauma

Many kinds of experiences can be traumatizing. They can happen to one person or to an entire community, and at any age. We can be traumatized by:

- Living under threat
- Childhood sexual, physical or emotional abuse or emotional neglect
- Experiencing violence, whether from violent crime, rape or a serious accident
- Living through natural disaster, war or upheaval
- Serving in combat
- Witnessing terrible things happening to others

How Trauma Hurts

Experiencing traumatic events can make us feel afraid, powerless and hopeless. We can be paralyzed by feelings of shame, guilt, rage, isolation and disconnection. Trauma triggers our defenses, which include a high state of vigilance, being prepared to fight or flee and numbness and disassociation. For people exposed to repeated trauma, these feelings and defenses can be long-lasting or permanent.

Trauma affects the developing brain and body and alters the body's stress response mechanisms. Emerging research shows that traumatic event can affect the way our brain works and impair the immune system.

Unresolved trauma can show up in many ways, including anxiety disorders, panic attacks, intrusive memories (flash-backs), obsessive-compulsive behaviors, post-traumatic stress disorder, addictions, self-injury and a variety of physical symptoms. Trauma increases risky behaviors such as overeating, smoking, drinking and unprotected sex. Trauma survivors can become perpetrators themselves.

Unaddressed trauma can significantly increase the risk of mental and substance use disorders, suicide, chronic physical ailments, as well as premature death.

Getting Help

The first step for all trauma survivors is getting to safety. Children who are being harmed need protection, as do adults in abusive relationships. The next step is understanding the role that trauma has played in your life, past and present challenges, and beginning to heal. Seek a therapist or counselor who has helped people who have experienced a trauma like yours. Mutual support from other trauma survivors can be powerful.

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