

Post-Traumatic Stress Disorder (PTSD)



FACT SHEET 31

THIS FACT SHEET WAS PRODUCED IN ASSOCIATION WITH



WHAT IS PTSD?

Post-Traumatic Stress Disorder (PTSD) is a particular set of reactions that can develop in people who have been through a traumatic event. That is, they have experienced or witnessed an event which threatened their life or safety, or that of others around them, and led to feelings of intense fear, helplessness or horror. This can be a car or other serious accident, physical or sexual assault, war or torture, or natural disasters such as bushfires or floods. Other life-changing situations such as being retrenched, getting divorced or the expected death of an ill family member are very distressing and may cause serious mental health problems, but are not events that can cause PTSD.

SIGNS AND SYMPTOMS

People with PTSD often experience feelings of panic or extreme fear, which may resemble those sensations that were felt during the traumatic event. A person with PTSD has four main types of difficulties.

1. Re-living the traumatic event – through unwanted and recurring memories, often in the form of vivid images and nightmares. There may be intense emotional or physical reactions, such as sweating, heart palpitations or panic when reminded of the event.
2. Being overly alert or wound up – sleeping difficulties, irritability, lack of concentration, becoming easily startled and constantly being on the look out for signs of danger.
3. Avoiding reminders of the event – deliberately avoiding activities, places, people, thoughts or feelings associated with the event because they bring back painful memories.
4. Feeling emotionally numb – losing interest in day-to-day activities, feeling cut off and detached from friends and family, or feeling emotionally flat and numb.

A health practitioner may diagnose PTSD if a person has a number of symptoms in each of these areas for a month or more. The symptoms usually lead to significant distress and interfere with the person's ability to work and study, as well as his/her social relationships.



It's not unusual for people with PTSD to experience other mental health problems at the same time. These may have developed directly in response to the traumatic event or have followed the PTSD. These additional problems, most commonly depression, anxiety and alcohol or drug use, are more likely to occur if PTSD has persisted for a long time.

Talk to your doctor or other health professional at any time if you feel very distressed or your reactions are interfering with your work and relationships.

HOW COMMON IS PTSD AND WHO EXPERIENCES IT?

Anyone can develop PTSD following a traumatic event, but people are at greater risk if the event involved deliberate harm such as physical or sexual assault or they have had repeated traumatic experiences such as childhood sexual abuse or living in a war zone. Apart from the event itself, risk factors for developing PTSD include a past history of trauma or previous mental health problems, as well as ongoing stressful life events after the trauma and an absence of social supports.

Around half a million Australians are likely to experience PTSD in any one year, and it is estimated that around five per cent of Australians have had PTSD at some point in their lives.¹ Serious accidents are one of the leading causes of PTSD in Australia.

¹ Creamer, M., Burgess, P. & McFarlane, A. C. (2001). 'Post-traumatic stress disorder: findings from the Australian National Survey of Mental Health and Well-being', *Psychol Med*, 31 (7), 1237-1247.

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WHAT TREATMENTS ARE AVAILABLE FOR PTSD?

Many people experience some of the symptoms of PTSD in the first couple of weeks after a traumatic event, but most recover on their own or with the help of family and friends. For this reason, treatment does not usually start until about two weeks after a traumatic experience. Even though formal treatment may not commence, it is important during those first few days and weeks to get whatever help is needed. This might include simple information and advice on self care. Support from family and friends is very important for most people. Trying, as far as possible, to minimise other stressful life experiences allows the person to focus more on his/her recovery.

If a person feels very distressed at any time after a traumatic event, he/she should talk to a doctor or other health professional. If a person experiences symptoms of PTSD that persist beyond two weeks, a doctor or a mental health professional may recommend starting treatment for PTSD. Effective treatments are available. Most involve psychological treatment, but medication can also be prescribed. Generally, it's best to start with psychological treatment rather than use medication as the first and only solution to the problem.

The cornerstone of treatment for PTSD involves confronting the traumatic memory and working through thoughts and beliefs associated with the experience. Trauma-focused psychological treatments can reduce PTSD symptoms, lessen anxiety and depression, and improve a person's quality of life. They are also effective for people who have experienced prolonged or repeated traumatic events, but more time may be needed in these circumstances.

Drug treatments should not be used within four weeks of symptoms appearing unless the severity of the person's distress cannot be managed by psychological means alone.

HELPING YOURSELF TO RECOVER FROM PTSD

There are also many ways in which the person can assist in his/her recovery. It's important to remember that recovery is not something that happens all at once, nor is it straightforward. Symptoms of PTSD can be manageable for a while, then return at times of stress. Anniversary dates, news coverage of similar events or going through a major change like a new job or divorce can lead to problems coming back or getting worse for a time. For most people, however, the following "DOs and DON'Ts" will help:

DO

- ✓ Spend time with people who care
- ✓ Give yourself time
- ✓ Find out about the impact of trauma and what to expect
- ✓ Try to keep a routine going – e.g. work, study
- ✓ Return to normal activities
- ✓ Talk about how you feel or what happened when ready
- ✓ Do things that help you relax
- ✓ Do things that you enjoy

Other tips to promote recovery:

- ✓ Set realistic goals – don't take on too much, but try to find goals that keep you motivated.
- ✓ Review and reward progress – notice even the small steps.
- ✓ Talk about the ups and downs of recovery with friends, family and the health professionals involved in your care.
- ✓ Have a plan to maintain positive changes and plans to deal with times of stress or reminders of the trauma.

DON'T

- ✗ Use alcohol or drugs to try to cope
- ✗ Keep yourself busy and work too much
- ✗ Engage in stressful family or work situations
- ✗ Withdraw from family and friends
- ✗ Stop yourself from doing things that you enjoy
- ✗ Avoid talking about what happened
- ✗ Take risks

ANNIVERSARIES AND OTHER STRESSFUL TIMES

Anniversaries of traumatic events like the September 11 terrorist attacks in America, a battle in the Vietnam War, major bushfires, and tragedies such as the Port Arthur shooting may trigger some unpleasant emotions in people, even if they were not directly affected or involved. Seeing images in the media again on the anniversary, or recalling your reaction at the time, may be upsetting. You may also find other times difficult, especially when you are experiencing other stress in your life such as financial, work, health, or relationship problems. At those times, it is especially important that you look after yourself in the ways discussed in this fact sheet.

Tips to help you cope with anniversaries and other difficult times

- Recognise that an anniversary can be a difficult period. Give yourself permission to feel some distress; it is perfectly normal and understandable.
- Try to limit your exposure to media coverage about the anniversary, as well as your conversations about it with other people.
- Keep your normal routine going, but allow yourself some time out if you need it.
- Plan your days and build in plenty of relaxing and enjoyable activities.
- Spend time with other people – especially those you care about – and don't be afraid to ask for support if you need it.
- Look after yourself: get plenty of rest and exercise and eat sensibly; cut back on stimulants such as tea, coffee, chocolate, cola and cigarettes.
- If you drink alcohol, keep an eye on how much you drink.
- Try to relax. Listen to soothing music, go for a walk, take a hot bath, or do whatever works for you.

HOW TO HELP SOMEONE RECOVER FROM PTSD

As a family member or carer, you should be involved, wherever possible, in the assessment and treatment of the person with PTSD. PTSD often impacts on the whole family and it is important that your needs and perspective are taken into

account throughout treatment. This can only be done if you think it is appropriate and with the approval of the person who has experienced the traumatic event.

If you are finding the situation very distressing, you may seek treatment for these issues in your own right. It can be very difficult to watch someone you care about struggle with the distress caused by a traumatic event. You may find yourself worrying constantly about the person's well-being and feel helpless when confronted with his/her emotions.

People with PTSD can often seem disinterested or distant as they try not to think or feel in order to block out painful memories, so you may feel shut out. They may stop participating in family life, ignore your offers of help or become irritable. It is important to remember that this behaviour is part of the problem; it's not about you. The person with PTSD probably needs your support, but doesn't know what he/she needs or how to ask for help. There are many ways you can help:

- **Listen** and show that you care. Sometimes, people say things that are meant to be helpful, but instead just leave the person feeling more isolated and misunderstood. Examples of such unhelpful statements are "You just need to get on with your life" and "I know how you feel".
- You can **encourage your family member to share their thoughts and feelings** about what is happening to them. Remember that you are not the person's therapist and don't have to find solutions. You also do not have to hear all the details of the trauma – in many cases, it is best not to. If necessary, let the person know that you do not feel strong enough to hear all the details, while at the same time reassuring the person about your support and understanding.
- **Remember that providing support doesn't have to be complicated.** It often involves small things like spending time together, having a cup of tea, chatting about day-to-day life or giving the person a hug.
- Some people find it helpful to have time to themselves after a traumatic experience. If this is the case for the person, try to **give him/her some space and time** alone when requested. Encourage a balance between time spent alone and time spent with others.



- **Encourage your family member to seek help and stay focused on recovery.** The person may not realise that he/she needs help or may find it hard to admit that help is needed. The person may be worried about being vulnerable or having to talk about what happened. Getting professional help can sometimes be difficult, as it often means facing painful memories. Commenting on positive changes or small steps taken by the person can also help him/her to remain hopeful about recovery.
- **Look after yourself.** This may be the most important thing you can do to help your family member. Supporting someone who has been through a traumatic event can take a toll on you, sometimes so much that your own health can be affected and you can no longer help the person effectively. It is crucial that you take time out and reach out to friends and other supportive people in your community. For more information see *beyondblue's* free booklet **A Guide for Carers** available from the website or call 1300 22 4636 (local call cost).

WHERE TO FIND HELP

A General Practitioner (GP) is a good person with whom to discuss your concerns in the first instance. Your GP will be able to conduct or arrange for any necessary medical tests, as well as a referral to a mental health professional. It is recommended that you go to your regular local GP or another GP in the same clinic as they will have access to your medical file. However, if you don't have a regular GP or clinic, a list of GPs with expertise in treating common mental health problems is available at www.beyondblue.org.au by clicking on **Find a Doctor or Other Mental Health Practitioner**, or call the *beyondblue* info line on 1300 22 4636 (local call cost).

Psychiatrists are doctors who specialise in mental health. They can make medical and psychological assessments, conduct medical tests and prescribe medication. Some psychiatrists use psychological treatments such as Cognitive Behaviour Therapy (CBT) and Interpersonal Therapy (IPT). CBT helps to correct negative thought patterns and is a structured program which recognises that the way people think affects the way they feel. IPT is a structured program with a specific focus on improving relationships.

Psychologists, as well as **social workers and occupational therapists with mental health training**, specialise in providing non-medical (psychological) treatment for depression, anxiety and related disorders.

When seeking psychological therapy, mental health practitioners trained in trauma-focused psychological therapy should be the first choice. Most commonly, mental health practitioners with this kind of training are psychologists, although psychiatrists and clinical social workers may also have received such training.

A rebate can be claimed through Medicare for psychological treatments if the person has a mental health problem and is referred by a GP, psychiatrist or paediatrician to a psychiatrist, registered psychologist, social worker or occupational therapist in mental health. This rebate can be claimed for part of the cost of up to 12 individual consultations and 12 group sessions in a calendar year. **To find a list of health professionals who provide psychological treatment for which a Medicare rebate can be claimed, go to www.beyondblue.org.au and click on **Find a Doctor or other Mental Health Practitioner**.**

MORE INFORMATION

beyondblue: the national depression initiative

To find out more about depression, anxiety and related disorders call the ***beyondblue* info line 1300 22 4636 (local call cost)** or visit the website www.beyondblue.org.au

Youthbeyondblue

www.youthbeyondblue.com

beyondblue's website for young people – information about depression and anxiety and how to help a friend

Australian Centre for Posttraumatic Mental Health (ACPMH)

ACPMH's website provides information on post-traumatic mental health problems and general advice about treatment. The ACPMH is not a treatment service, but can provide information on post-traumatic mental health problems and directions for treatment. Visit the website www.acpmh.unimelb.edu.au

ACPMH has published the *Australian Guidelines for the Treatment of Adults with Acute Stress Disorder and Post Traumatic Stress Disorder*. A copy of the guidelines can be downloaded from www.acpmh.unimelb.edu.au

Lifeline

13 11 14

24-hour counselling, information and referral (local call cost)

MensLine Australia

1300 78 99 78

Support for men with family and relationship problems

Suicide Call Back Service

1300 659 467

24-hour telephone counselling for people at risk of suicide, their carers and those bereaved by suicide

Relationships Australia

1300 364 277

www.relationships.com.au

Support for people experiencing relationship problems

Domestic violence and sexual abuse

National Domestic Violence and Sexual Assault Hotline

1800 200 526

Domestic/family violence services provide crisis support including accomodation options, counselling and support services for women and children affected by family violence.

The Domestic Violence Resource Centre Victoria is a statewide Victorian service that can provide the name and contact details of agencies and support groups throughout Australia at www.dvrcv.org.au

Immigrant women's domestic violence services

There are several services in each state and territory. See www.iwdvs.org.au or www.speakout.org.au for a list of services throughout Australia.

Sexual assault

The Australian Centre for the Study of Sexual Assault has a list of the main sexual assault services for victim/survivors and non-offending family, friends and support people in Australia at www.aifs.gov.au/acssa/crisis.html All states and territories have crisis lines listed in the front page of the White Pages.

Veterans and their families

The Department of Veterans' Affairs can provide information and referral advice at www.dva.gov.au or on **1800 555 254**. The Department can provide the number of the Veterans and Veterans Families Counselling Service in your state and territory.

Victims of Crime

The Victims of Crime website provides information about services throughout Australia at www.lawlink.nsw.gov.au. All states and territories have victim support hotlines listed in the front page of the white pages.

Alcohol and other drugs

The Australian Drug Information Network (ADIN) gives comprehensive information and a list of resources across Australia at www.adin.com.au and the Alcohol and other Drugs Council of Australia (ADCA) can provide numbers of information services in all state and territories – call **(02) 6281 0686** or go to www.adca.org.au

Asylum seekers and migrants who have experienced torture and trauma

www.fasstt.org.au

The Forum of Australian Services for Survivors of Torture and Trauma (FASST) has a list of agencies that provide support, advocacy and treatment

Multicultural Mental Health Australia

(02) 9840 3333

www.mmha.org.au

Mental health support for Australians from culturally-diverse backgrounds

Anxiety Online

www.anxietyonline.org.au

Information and 'virtual' treatment clinic for people with anxiety disorders

Anxiety Network Australia

www.anxietynetwork.com.au

Information on anxiety disorders, related programs, workshops, courses and stories from people living with these disorders

Anxiety Recovery Centre Victoria

www.arcvic.com.au

Information about anxiety disorders, their management and links to other services

CRUFAD Clinical Research Unit for Anxiety and Depression

www.crufad.org

Information about anxiety and its management

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Virtual Clinic

www.virtualclinic.org.au

Internet-based education and treatment programs for people with anxiety and depression

E-Couch

www.ecouch.anu.edu.au

Evidence-based information about emotional problems (including anxiety) and strategies to help you prevent problems and understand yourself better

headspace: National Youth Mental Health Foundation

www.headspace.org.au

Mental health information for young people

MoodGYM

www.moodgym.anu.edu.au

Online psychological therapy

Reconnexion

www.reconnexion.org.au

1300 273 266

Psychology services for people experiencing anxiety and depression and tranquilliser dependency

STATE-SPECIFIC SERVICES

ACT

Mental Health Foundation

(02) 6282 6658

www.mhf.org.au

Information about anxiety, depression, schizophrenia and bipolar disorder in the Australian Capital Territory

New South Wales

Mental Health Association (NSW)

1300 794 992

www.mentalhealth.asn.au

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T: (03) 9810 6100

beyondblue info line 1300 22 4636

F: (03) 9810 6111

E: bb@beyondblue.org.au

W: www.beyondblue.org.au

Northern Territory

Top End Association for Mental Health

1300 780 081

www.teamhealth.asn.au

Queensland

Panic Anxiety Disorder Association QLD

(07) 3353 4851

www.anxiety.websyte.com.au

South Australia

ACEDA – panic and Anxiety, obsessive Compulsive and Eating Disorders Associations

(08) 8297 4011

www.aceda.org.au

Tasmania

Mental Health Council of Tasmania

1800 808 890

www.mhct.org

Victoria

ADAVIC (Anxiety Disorders Association of Victoria)

www.adavic.org.au

Information about panic disorder, social phobia, agoraphobia, generalised anxiety and depression, and support services

Western Australia

Anxiety Self Help Association

(08) 9346 7262

www.cnswa.com/asha

Other beyondblue anxiety information material available:

beyondblue Fact sheet 21 – Anxiety Disorders

beyondblue Fact sheet 35 – Generalised Anxiety Disorder

beyondblue Fact sheet 36 – Panic Disorder

beyondblue Fact sheet 37 – Obsessive Compulsive Disorder

beyondblue Fact sheet 38 – Specific Phobias

beyondblue Fact sheet 39 – Social Phobia

beyondblue wallet-size information card – Anxiety Disorders

beyondblue envelope-size information card – Anxiety Disorders

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