

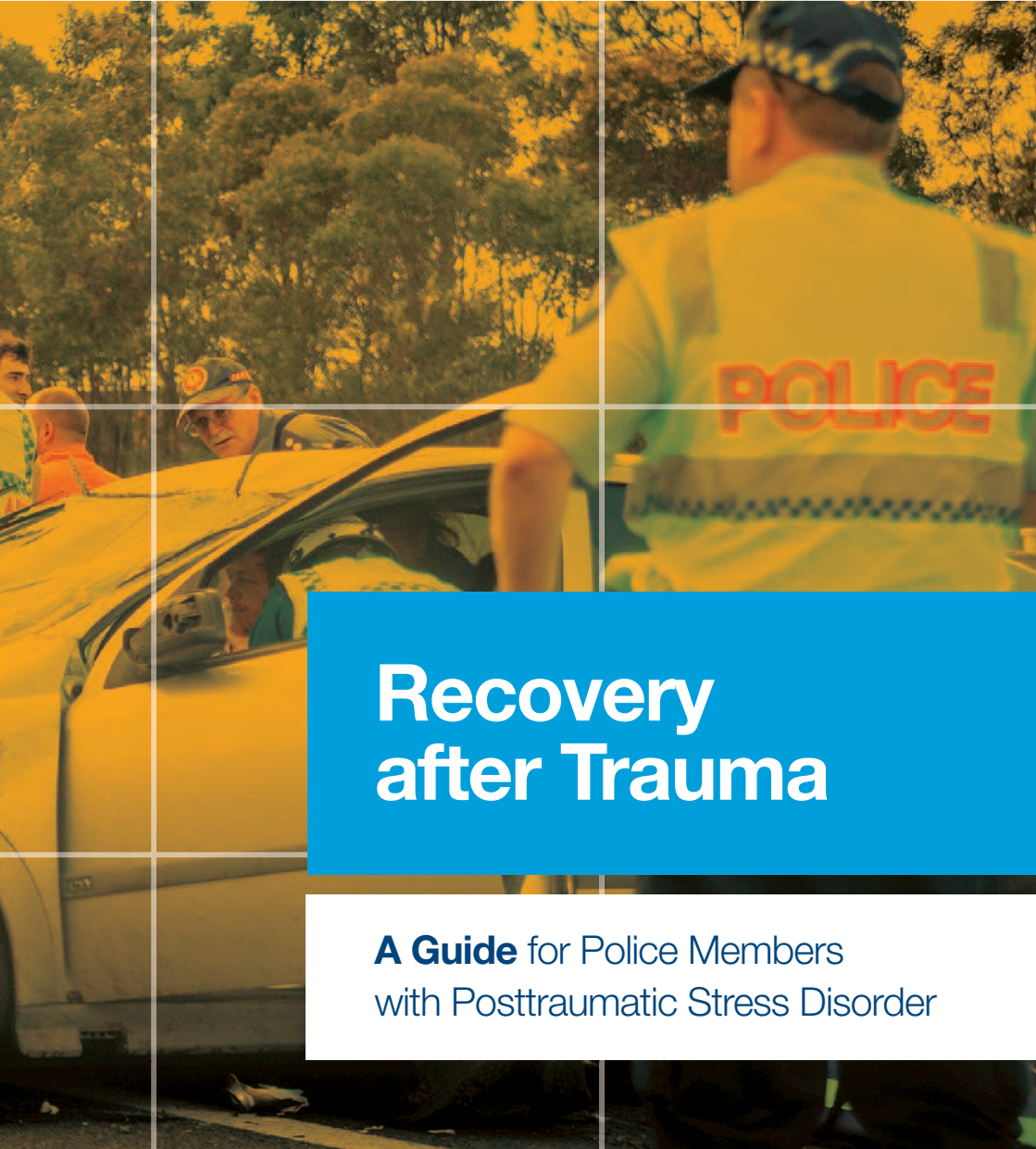


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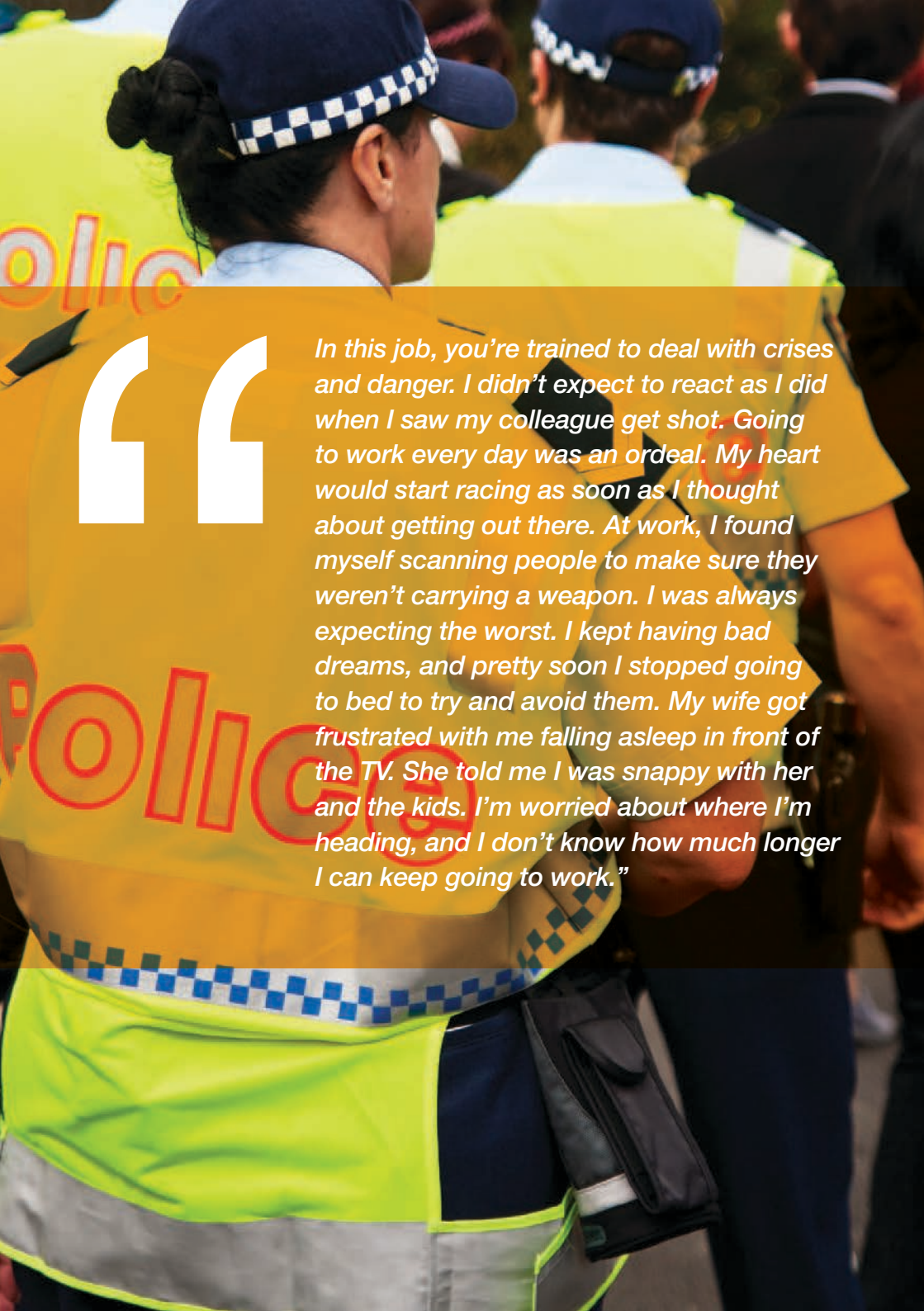
Promoting recovery after trauma



Recovery after Trauma

A Guide for Police Members
with Posttraumatic Stress Disorder

Posttraumatic stress disorder (PTSD) can occur after someone has been through, or witnessed, a traumatic event. Traumatic events are situations that are either life threatening or have the potential for serious injury, such as physical assault, motor vehicle or workplace accidents, natural disaster and war. Police members may be exposed to repeated trauma or the aftermath of traumatic events.



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In this job, you're trained to deal with crises and danger. I didn't expect to react as I did when I saw my colleague get shot. Going to work every day was an ordeal. My heart would start racing as soon as I thought about getting out there. At work, I found myself scanning people to make sure they weren't carrying a weapon. I was always expecting the worst. I kept having bad dreams, and pretty soon I stopped going to bed to try and avoid them. My wife got frustrated with me falling asleep in front of the TV. She told me I was snappy with her and the kids. I'm worried about where I'm heading, and I don't know how much longer I can keep going to work.”

Do I have posttraumatic stress disorder?

A person with PTSD can experience a range of problems:

Re-living the traumatic event through unwanted memories, vivid nightmares, flashbacks, or intense reactions such as heart palpitations or panic when reminded of the event.

Feeling wound up, for example, having trouble sleeping or concentrating, feeling angry or irritable, taking risks, being easily startled or constantly on the lookout for danger.

Avoiding reminders of the event such as activities, places, people, thoughts or feelings that bring back memories of the trauma.

Negative thoughts and feelings such as fear, anger, guilt, or feeling flat or numb a lot of the time; or loss of interest in day-to-day activities and feeling cut off from friends and family.

If you are struggling to cope after one or more traumatic events, talk to your GP. You don't need to keep feeling like this. Effective treatments for PTSD are available and you can get better.

Other mental health problems

PTSD is not the only mental health problem that can develop after trauma. Depression, anxiety and misuse of alcohol or drugs are also common problems.

What is depression?

Everyone feels sad from time to time but if these feelings persist for two weeks or more, and get in the way of your day-to-day life, you may be suffering with depression.

These are the signs of depression:

- Feeling sad, empty, hopeless or worthless
- Not being interested in usual activities
- Loss of energy
- Sleeping too much or too little
- Having trouble concentrating or making decisions
- Having thoughts of suicide

What is anxiety?

It's normal to feel anxious when you're stressed or facing a particular threat, but if the anxiety doesn't go away when the stress passes or becomes so severe that it interferes with normal life, you may be suffering with an anxiety disorder.

These are the signs of problematic anxiety:

- Excessive fear or worry
- Physical symptoms such as racing heartbeat, sweating, trembling
- Breathlessness, dizziness or nausea
- Feeling of loss of control or impending doom
- Avoidance of feared objects, places or situations

When does alcohol become a problem?

A lot of us have a drink when we catch up with friends or after a particularly tough day at work. Where do you draw the line and decide that drinking has become a problem?

These are the signs of problematic alcohol use:

- Binge drinking to get drunk
- Feeling the need for a drink (or 2 or 3) every day
- Drinking to cope with difficulties or unpleasant feelings
- Drinking is causing problems in your life, e.g., conflict in relationships, not fulfilling responsibilities at home or work

If you're using drugs rather than alcohol, similar principles apply.

If you've been experiencing any of these problems see your GP for help.

Helping yourself after a traumatic event

After a traumatic event, you might experience strong feelings of fear, sadness, guilt, anger, or grief. Generally these feelings will resolve on their own, and with the support of family and friends you will recover.

Even if you don't feel like it, try to do some of the things suggested below. They might help you to come to terms with the traumatic event you experienced and reduce some of the distress associated with it.

Recognise that you have been through an extremely stressful event and having an emotional reaction to it is normal. Some people are affected by many traumatic experiences over time. Even if you coped well with similar events in the past, this does not mean that you won't be affected by the trauma you are experiencing now. Give yourself permission to feel rotten, but also remember your strengths - even though it's tough, you can deal with it.

Look after yourself by getting plenty of rest (even if you can't sleep), regular exercise, and by eating regular, well-balanced meals. Physical and mental health are closely linked, so taking care of one will help the other.

Cut back on tea, coffee, sugar, soft drink, and cigarettes. Your body is already "hyped up" enough, and these substances will only add to this. Try to avoid using drugs or alcohol to cope, as they can lead to more problems in the long term.

Make time for relaxation - whether it's listening to music, going for a walk - whatever works for you. It might be helpful to learn a relaxation technique like meditation, yoga, progressive muscle relaxation, or breathing exercises.

Structure your days and try to schedule at least one enjoyable activity each day. Try making a timetable for each day, including some exercise, some work, and some relaxation.

Resume your normal routine as soon as possible, but take it easy. Don't throw yourself into activities or work in an attempt to avoid painful thoughts or memories about the trauma. Tackle the things that need to be done a bit at a time and count each success.

Try not to bottle up your feelings or block them out. Recurring thoughts, dreams, and flashbacks are unpleasant, but they will decrease with time.

Avoid making major life decisions like moving house or changing jobs in the days and weeks after the event. On the other hand, make as many smaller, daily decisions as possible, such as what you will eat or what film you'd like to see. This can help you to feel more in control of your life.

Spend time with people you care about, even if you don't want to talk about your experience. Sometimes you will want to be alone, and that's OK too, but try not to become too isolated.

Talk about your feelings to other people who will understand, if you feel able to do so. Talking things through is part of the natural healing process and will help you to accept what has happened.

Write about your feelings if you feel unable to talk to others about them.

Keep informed of the facts through media and other information sources, but don't overdo it. Try to avoid repeated viewing of disaster or trauma scenes.

Give yourself time to re-evaluate. A traumatic event can affect the way you see the world, your life, your goals, and your relationships.

Know when to ask for help. If you feel you are not coping or your symptoms are getting worse, ask for help. It is not a sign of weakness and it's best to get help early. More advice about when and how to ask for help is provided later in this booklet.



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It took me a long time to get help. I was pretending to myself that I was fine. I knew mates that had reached out and got help and I thought, “Good on them but it’s not for me”. Then one day I caught myself shouting at my son and I nearly hit him. I knew right there and then something needed to change and I picked up the phone. I am so glad I did. I learned how to control my temper and how to deal with the memories of the assault. I know I will never forget what happened, but I don’t get as upset when I think about it anymore. I can sleep knowing the nightmares won’t be back.”

Getting help

Effective treatments for PTSD involve counselling, medication, or a combination of both.

Recommended counselling approaches include trauma-focussed cognitive behavioural therapy (CBT) and eye movement desensitisation and reprocessing (EMDR).

When you seek help, consider one of these counselling approaches, as they are most likely to help you recover. The medications usually used to treat PTSD are a type of antidepressant, known as selective serotonin reuptake inhibitors (SSRIs).

You can talk to your GP or a mental health professional such as a psychologist, social worker or psychiatrist to find out about the best treatment for you.

What will happen during counselling?

The most important thing when getting help for PTSD is to face, and deal with, the memory of traumatic events rather than pushing them to the back of your mind.

Because the memory of traumatic events can cause intense fear, anxiety and distress, people often want to escape or avoid anything associated with the trauma. Although avoiding reminders of the trauma provides temporary relief, it is one of the main reasons why some people don't recover. When people rely on avoidance to cope, they don't have the opportunity to come to terms with what happened to them or to develop skills that will help them feel safe when thinking about traumatic events. The anxiety and avoidance can then affect other areas of their lives.

During treatment for PTSD you will learn ways to face traumatic memories and confront situations that you have avoided since the trauma so you no longer feel so distressed by them. Your counsellor will take things slowly, help you gain control of your fears step by step, and teach you skills to manage any distress you might experience so you do not become overwhelmed by your feelings.

You will be encouraged to examine how your thoughts about the trauma may be making the memory of it more painful. Many people blame themselves for what happened, or start seeing the world as a dangerous place after a traumatic event, and need help to deal with these thoughts.

What can I ask my counsellor?

Here are some questions that you can ask to help you get the information you need about your treatment:

- Is trauma-focussed therapy the best treatment for me?
Why/Why not?
- Can you tell me how this type of treatment works?
- Does this treatment have any negative effects?
- Can you tell me what training and experience you have in this type of treatment?
- How long will treatment last?
- What can I expect to happen during treatment?
- Can you tell me what I will need to do during treatment or in my day-to-day life to help me get better?
- What kind of improvements can I expect?
- What support will I need while I am having treatment?

What about medication?

The medications usually used to treat PTSD are antidepressants. Even if you don't have depression, antidepressants can help make feelings associated with trauma more manageable. There are different kinds of antidepressants, but research has shown that selective serotonin reuptake inhibitors (SSRIs) are most likely to help.

Before you start taking antidepressant medication, you should be given information about possible side effects. As these are prescription medications this information should be provided by the prescribing doctor or the dispensing pharmacist. It is also important to understand what you might experience if you stop taking medication suddenly, forget to take a tablet, or reduce the amount you are taking.

Remember that antidepressants take a few weeks to reach their full effect, so do not expect immediate results.

If antidepressants are working, it is recommended that you take them for at least 12 months. After this period of time, you can stop by gradually reducing the dose, generally over a four-week period. This should only be done after discussion with your doctor and should be carefully monitored.

Remember, not all medication works in the same way for everybody. If a particular type or dose of medication is not working for you, your doctor may ask you to try another type, increase the dose, or suggest you try counselling.



What can I ask my doctor about medication?

- How does this medication work?
- What can I expect to feel like if it works?
- Does it have any side effects and how long will they last for?
- If there are side effects, will they impact on my ability to work as a police member?
- How long will it take before I start to feel better?
- How long will I have to take it?
- What do I do if I forget to take my tablets?
- When it's time, how do I go about stopping the medication?
- What will happen when I stop taking it?

What can I do as a family member or carer?

As a family member or carer, you should be involved wherever possible in the assessment and treatment of your loved one.

PTSD often affects the whole family and it is important that your needs and perspective are taken into account throughout treatment. If you are finding the situation distressing, you may also need to seek help for yourself.

PTSD and relationships

It can be difficult to watch someone you care about struggle with the distress caused by trauma. You may find yourself constantly worrying about their wellbeing and feel helpless when confronted by their emotional reactions.

People with PTSD can often seem disinterested or distant, and you may feel shut out. This is usually because the person is trying not to think or feel in order to block out painful memories. They may stop participating in family life, ignore your offers of help, or become irritable.

It is important to remember that these behaviours are symptoms of PTSD; they are not about you. Your loved one probably needs your support but doesn't know what they need or how to ask for help.

There are many ways you can help...

Listen and show that you care

You can encourage your loved one to share their thoughts and feelings about what is happening to them. Remember that you are not their therapist and don't have to find solutions for them. If you feel you cannot bear to hear all the details of the trauma, you need to let the person know, while at the same time reassuring them that you care.

Remember that providing support doesn't have to be complicated. It often involves small things like spending time together, having a cup of tea, or giving them a hug. Some people find it helpful to have time to themselves after a traumatic experience. If this is the case for your loved one, try to give them some space and time alone when they ask for it. Encourage a balance between time spent alone and time spent with others.

Encourage your loved one to seek help and stay focussed on getting better

Your loved one may not realise that they need help, or may find it hard to admit that they do. They might feel vulnerable and worried about having to talk about what happened. Getting professional help can be difficult as it often means facing painful memories. Also, getting better is rarely a straightforward path. Your loved one may experience ups and downs as they work through their memories and may become discouraged at times. You can provide support by acknowledging that getting better can be difficult, and by commenting on positive changes and the small steps they are making, to help them remain hopeful.

Look after yourself

This may be the most important thing you can do to help your loved one. Supporting someone who has been through trauma can take a toll on you, sometimes so much so that your own health can be affected and you can no longer help them effectively. It is crucial that you take time out and reach out to friends and other supportive people in your community. You can also enlist the help of a counsellor or a support group. Your GP or a mental health professional can provide you with information and the names of people and organisations who can help.

Frequently asked questions

What if the event I experienced is so distressing that I can't bear to think about it?

Treatment will help you to come to terms with the traumatic experience at your own pace. Your counsellor will teach you skills so that you won't feel overwhelmed when recalling the traumatic event.

At what point should I start treatment and how long will it last?

If you are still experiencing problems two weeks after a traumatic event, it might be worth talking to your GP or a mental health professional about starting treatment. Trauma-focussed counselling treatment usually involves 8 to 12 sessions, although in some cases it might take longer.

I have experienced more than one trauma during my career. How do I know what's impacting on me?

Your counsellor will help you understand which experiences have had the most impact on you and which ones are important to talk about in order to get better.

What if I've been having problems for a long time?

Even if your traumatic experience was a long time ago, treatment can still work. Trauma-focussed therapies and antidepressants have been shown to help recovery for long-term sufferers of PTSD.

What about other counselling approaches?

Other treatments that focus on traumatic memories have not been mentioned in this booklet, either because they have not yet been properly tested, or because they have been found to be less effective than trauma-focussed CBT or EMDR. Treatments that do not focus on traumatic memories, such as learning to manage anxiety, are very useful when provided alongside treatments recommended in this booklet, but are less effective when offered on their own.

What if I don't feel better when I expect to?

Some people with PTSD improve quickly, while others take more time to get better. PTSD can also feel more manageable for a while, but worsen at times of stress or when a particularly strong reminder of the trauma triggers a reaction.

Can I continue working if treatment includes medication?

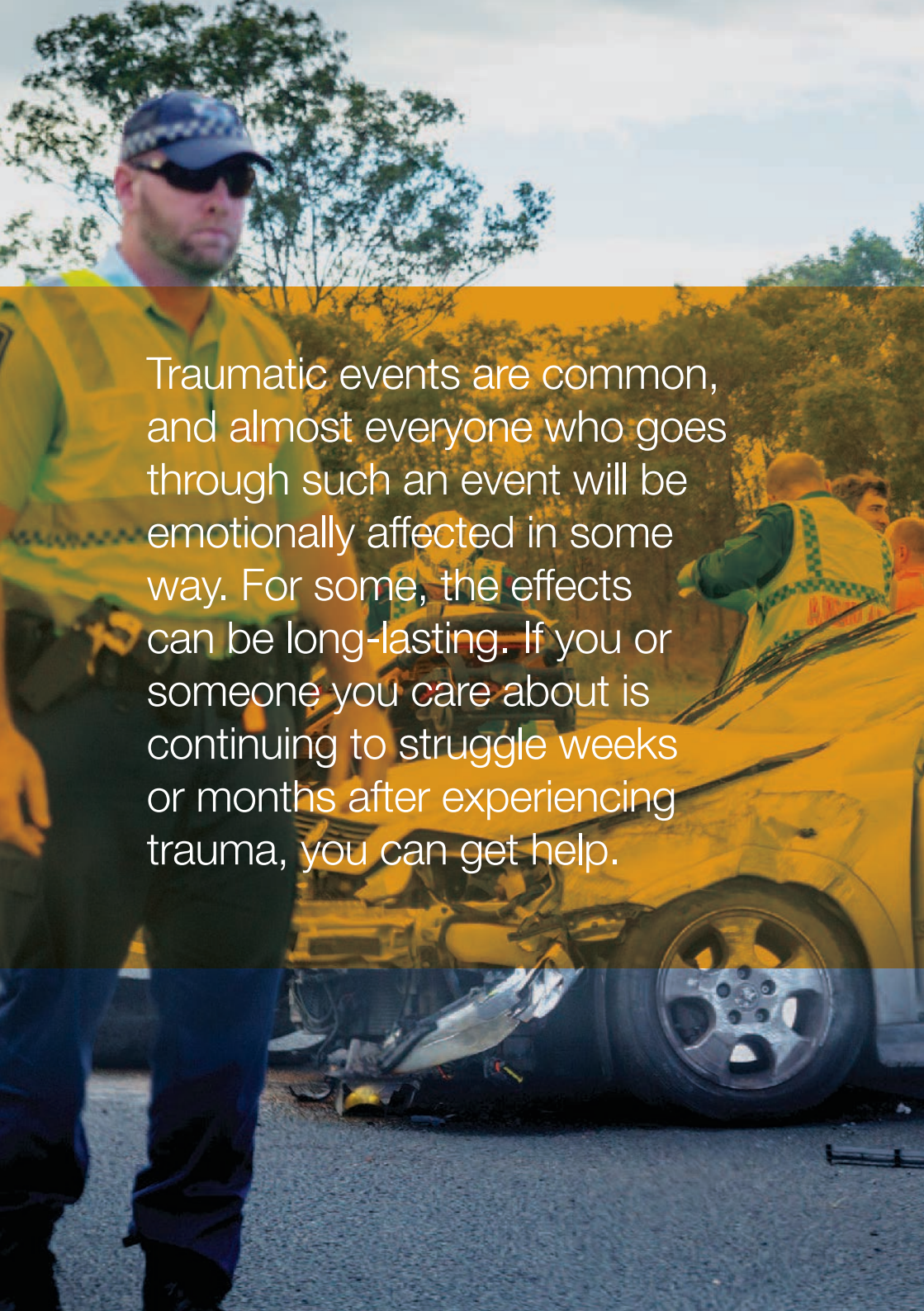
In most cases, yes. Many of the commonly prescribed medications for PTSD don't cause side effects that will affect your work. With some medications it might be good to take some time to understand how they affect you and get used to taking the medication before undertaking certain activities such as driving and completing particularly complicated tasks. This is something you should discuss with your doctor or pharmacist before your return to work.

Sometimes things that happen during treatment can get in the way of your recovery, such as:

- Not receiving enough information about what to expect.
- Not feeling comfortable with your GP or counsellor. It takes time to develop trust in someone, but if you continue to feel uncomfortable, discuss it with the person you are seeing or look for the right person to provide you with help.
- Feeling overwhelmed by emotions during treatment sessions. Let the person treating you know how you feel and talk with them about slowing down the process.

If you're not sure treatment is helping you, ask your practitioner some of the following questions:

- My sleep, nightmares, mood, ... aren't improving. What else can we do?
- I had expected to feel better. Can we talk about my progress?
- Can we talk about other treatments? What else is available?
- Can you give me strategies to help me better manage my sleep, panic attacks...



Traumatic events are common, and almost everyone who goes through such an event will be emotionally affected in some way. For some, the effects can be long-lasting. If you or someone you care about is continuing to struggle weeks or months after experiencing trauma, you can get help.

Main things to remember

The experience of a traumatic event is common.

Most people will recover with the support of family and friends.

Strong feelings of fear, sadness, guilt, anger, or grief are common soon after a traumatic event.

If these feelings last for more than a couple of weeks, speak to your GP.

Posttraumatic stress disorder (PTSD) involves four main types of problems:

- Re-living the traumatic event
- Feeling wound up
- Avoiding reminders of the event
- Having a lot of negative thoughts or feelings

People with PTSD often have other mental health problems like depression or anxiety, or use drugs or alcohol to try and cope.

Effective treatment for PTSD involves confronting the memory of the trauma as well as associated thoughts and beliefs. Medication is not the first choice of treatment but can be useful in many cases. Medication will not necessarily prevent you from working as a police member. This should be discussed with your doctor.

It's never too late to get help for PTSD.

It's your treatment, and it's OK to ask questions.

If something is not working, tell your GP or counsellor and, if necessary, ask them to make some changes.

Your local GP or staff support service is a good place to start if you need help.

Where can I find more information?

Where can I find more information and start getting help?

Your doctor is a good starting point when seeking help.

He or she can help confirm what is going wrong and refer you to the right organisations and practitioners.

For immediate assistance call Lifeline on 13 11 14

for confidential 24-hour counselling and referrals.

Your staff support service or employee assistance program (EAP) can also provide support.

Local Resources

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Useful information and resources are also available through the following organisations.

Trauma and posttraumatic mental health

Phoenix Australia - Centre for Posttraumatic Mental Health provides information and useful resources about posttraumatic mental health, for practitioners and people directly affected, at www.phoenixaustralia.org.

Depression and anxiety

Several organisations offer access to information, resources and services, including:

- Beyondblue www.beyondblue.org.au
- SANE Australia www.sane.org
- Black Dog Institute www.blackdoginstitute.org.au
- Clinical Research Unit for Anxiety and Depression www.crufad.org

Alcohol and other drugs

The Australian Drug Information Network (ADIN) gives comprehensive information and a list of resources available across Australia at www.adin.com.au.

Psychologists

The Australian Psychological Society has a register of psychologists and lists their speciality at www.psychology.org.au or call 1800 333 497.

Workplace bullying and harassment

If you have experienced workplace bullying, sexual harassment or assault, contact your staff support service, EAP or GP for help. For a definition of workplace bullying and harassment you can access factsheets produced by the Australian Human Rights Commission www.humanrights.gov.au/workplace-bullying-violence-harassment-and-bullying-fact-sheet

My plan for recovery and managing trauma

BEWARE

- Are there signs that I need help?**
- Have the people who care about me told me that they are worried about me?

PREPARE

Things I need to do to help myself.

Things I need to do more of (e.g. go for walks, talk to my friends)

.....

Things I need to do less of (e.g. drink, staying away from people)

.....

REPAIR

Who do I need to ask help from?

Family & friends:

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Work:

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Health professionals:

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Crisis contacts

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This guide is a companion document to the *Australian Guidelines for the Treatment of Acute Stress Disorder and Posttraumatic Stress Disorder*. The Guidelines were approved by the National Health and Medical Research Council, July 2013.

The complete Guidelines, a brief summary booklet, and resources for people affected by acute stress disorder or posttraumatic stress disorder, are available online: www.phoenixaustralia.org

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As a workers compensation claims manager, EML group companies manage workplace personal injury claims nationally across a range of industries, including those with increased exposure to psychological stress and trauma such as the Emergency and Health Services. This booklet forms part of our National Psychological Injury Service Offering which aims to better support those psychologically injured as a result of their work.

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