



# Tips for Survivors of a Disaster or Other Traumatic Event: COPING WITH RETRAUMATIZATION

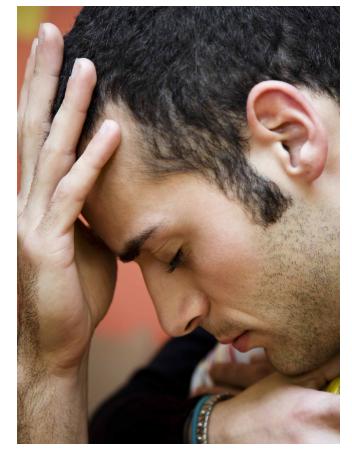
## Introduction

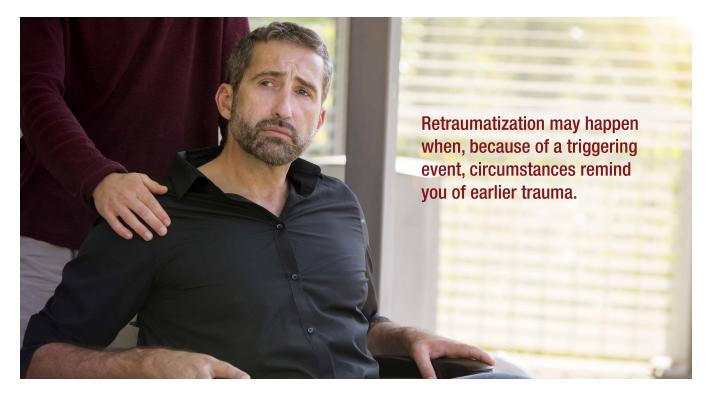
According to National Comorbidity Survey data, more than half of men and women had experienced one or more traumas over the course of their lives, with experience of a natural disaster the second most common trauma type (Kessler et al., 1999). For some, traumatic stress reactions to a new event can feel as intense as they were when the original event occurred. This is known as retraumatization. Retraumatization is reliving stress reactions experienced as a result of a traumatic event when faced with a new, similar incident. However, as the result of the passing of time many people do not realize the stress they are experiencing is related to an earlier trauma in their lives. A current experience is subconsciously associated with the original trauma, reawakening memories and reactions, which can be distressing. This type of reaction is common and survivors should realize there are steps that can

be taken to manage or relieve symptoms.

This tip sheet covers signs and symptoms of retraumatization, as well as how to know if you may benefit from more help and guidance on how to manage it. The tip sheet also lists resources for support and identifies ways you can build resilience, which is your ability to tap into your skills and access the resources around you when you are going through stressful experiences.

Most survivors of a disaster or other traumatic event are able to work through their traumatic experiences, return to their regular activities, and enjoy their lives. Some people, however, experience retraumatization and could benefit from recognizing trauma symptoms, learning how to manage them, and seeking additional help as needed. If you are experiencing retraumatization and need additional help, try using some of the recommendations noted in this tip sheet, or see the Helpful Resources section of this tip sheet for information about locating a trauma-informed professional.





## **Triggering Events**

A triggering event is something that immediately reminds you, your family, or your community of a fear that was experienced during a previous traumatic event, such as a disaster. Retraumatization may happen when, because of a triggering event, circumstances remind you of earlier trauma.

Here are some examples of triggering events that may contribute to retraumatization:

- Anniversary dates or news stories of similar traumatic incidents
- Similar disasters, such as a tornado, hurricane, earthquake, flood, wildfire, or the threat of these disasters
- Events such as an oil spill, mass shooting, or terrorist attack
- Distressing events reported by the media, such as car accidents, physical, sexual, and emotional abuse
- Witnessing a traumatic event or hearing about one that happens to someone else

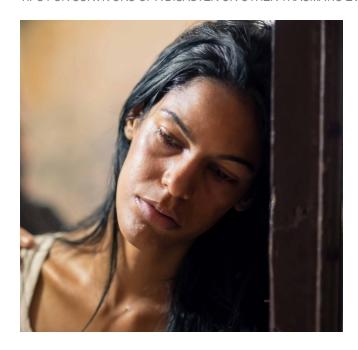
If you repeatedly experience stress reactions to these events, you may benefit from trauma-informed care to help you overcome retraumatization.



## **Risk Factors for Retraumatization**

There are risk factors that can help you determine the likelihood of experiencing retraumatization. Knowing them can help you determine your risk for retraumatization as well as help you prepare to address potential signs and symptoms of distress. The following are risk factors:

- Having a high frequency of life trauma, such as abuse or neglect
- Being emotionally disconnected from or not feeling love and support from others, such as family members, peers, colleagues, friends, or other loved ones
- Living or working in unsafe situations, such as combat zones or other dangerous environments



- Using unhealthy coping styles, such as practicing avoidance or being in denial of past traumatic events, mismanaging stress (e.g., misusing alcohol, prescription medication, or illegal substances)
- Having a lack of economic and social supports or a lack of access to health and mental health care services

## **Retraumatization Signs and Symptoms**

If you have survived a traumatic experience, you can relive it in any of the following ways:

## **Thoughts**

- Negative thoughts that are associated with fear or other emotions experienced during the trauma
- Flashbacks and nightmares
- Trouble concentrating
- Dissociation (separation of normally related parts of awareness, such as thoughts, perceptions, memories, and identity)

## Physical Signs and Symptoms

- Feeling "on edge," very anxious and tense, or easily startled
- Trouble falling or staying asleep

- Significant changes in appetite and/or weight
- Fatigue and lack of energy
- Experiencing strong reactions to triggers (e.g., fast breathing and heartbeat, sweating)

### **Behaviors**

- Social withdrawal and isolation
- Increasing intake of alcohol and other substances following an incident
- Avoidance of people, places, and situations related to the traumatic event

#### **Emotions**

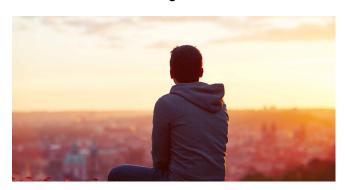
- Intense feelings of guilt, anger, fear, anxiety, horror, sadness, shame, or despair
- Intense distress in reaction to triggers, or circumstances you link to present or past trauma
- Feeling distant from other people
- Feeling unable to control your emotions, such as not being able to calm yourself down, a decreased sense of security and inability to feel love

## Tips for Managing and Developing Resilience for Retraumatization

Retraumatization can feel like reopening a wound that has not quite healed. Once you recognize that you are experiencing retraumatization, you may wish to consider dedicating time and effort to your recovery from the traumatic event. The following suggestions can help you manage retraumatization:

- Appreciate the impact of the original trauma.
   Do not underestimate what you have been through, but also recognize that you are strong and able to recover.
- Understand how and why the event happened.
- Connect with people who understand and help you through trigger events.
- Ensure that you have a support system that is easily accessible and consists of people who know, accept, and care for you.

- Develop effective coping skills (e.g., stress management, self-care, and social support, especially peer support).
- Have a self-care plan that includes strategies for building resilience (e.g., get regular exercise, set aside quiet time for meditation or relaxation).
- Practice your spiritual beliefs or reach out to a faith leader for support.
- Seek care from a trained, traumainformed provider who can recognize your retraumatization symptoms and offer evidencebased treatment and guidance.



## **Hope for Your Future**

If you experience retraumatization, you may feel discouraged, but remember you can take steps toward feeling better and returning to a full and satisfying life. The past will always be with you, but you can learn new ways to manage triggers, trauma, and stress.

Most importantly, understand that your perceptions can affect your reactions. Be patient with yourself, and keep in mind that people recover from all kinds of setbacks. Take the opportunity to take control of your reactions and your life by determining the best ways to recover.

## References

Kessler, R. C., Sonnega, A., Bromet, E., Hughes, M., Nelson, C. B., & Breslau, N. N. (1999). Epidemiological risk factors for trauma and PTSD. In R. Yehuda (Ed.), *Risk factors for PTSD*. (pp. 23–59). Washington, DC: American Psychiatric Press.





## **Helpful Resources**

#### **Hotlines**

#### **SAMHSA's Disaster Distress Helpline**

Toll-Free: 1-800-985-5990 (English and español)

SMS: Text **TalkWithUs** to **66746** SMS (español): "Hablanos" al **66746** 

TTY: 1-800-846-8517

Website (English): <a href="https://www.samhsa.gov/find-help/disaster-distress-helpline">https://www.samhsa.gov/find-help/disaster-distress-helpline</a>

Website (español): <a href="https://www.samhsa.gov/find-help/disaster-distress-helpline/espanol">https://www.samhsa.gov/find-help/disaster-distress-helpline/espanol</a>

#### **SAMHSA's National Helpline**

Toll-Free: 1-800-662-HELP (24/7/365 Treatment Referral

Information Service in English and español)

Website: <a href="https://www.samhsa.gov/find-help/national-helpline">https://www.samhsa.gov/find-help/national-helpline</a>

#### **National Suicide Prevention Lifeline**

Toll-Free (English): 1-800-273-TALK (8255)

Toll-Free (español): 1-888-628-9454

TTY: 1-800-799-4TTY (4889)

Website (English): <a href="https://www.suicidepreventionlifeline.org/help-yourself/en-espanol/">https://www.suicidepreventionlifeline.org/help-yourself/en-espanol/</a>

#### **Treatment Locator**

Behavioral Health Treatment Facility Locator

Website: <a href="https://www.findtreatment.samhsa.gov">https://www.findtreatment.samhsa.gov</a>

#### **Trauma-Related Resources**

Center for the Study of Traumatic Stress, Uniformed Services University

Phone: 301-295-2470 Email: cstsinfo@usuhs.mil

Website: <a href="https://www.cstsonline.org">https://www.cstsonline.org</a>

## **National Center for Child Traumatic Stress**

Phone: **310-235-2633** Phone: **919-682-1552** Website: http://www.nctsn.org

National Center for Trauma-Informed Care and Alternatives to Seclusion and Restraint (NCTIC)

to Seclusion and Restraint (NCTIC)
Toll-Free: 1-866-254-4819

Email: <a href="MCTIC@NASMHPD.org">MCTIC@NASMHPD.org</a>
Website: <a href="https://www.samhsa.gov/nctic">https://www.samhsa.gov/nctic</a>

**SAMHSA Disaster Technical Assistance Center** 

Toll-Free: **1-800-308-3515**Email: <u>DTAC@samhsa.hhs.gov</u>
Website: <u>https://www.samhsa.gov/dtac</u>

\*Note: The views, opinions, and content expressed in this publication do not necessarily reflect the views, opinions, or policies of the Center for Mental Health Services (CMHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or the U.S. Department of Health and Human Services (HHS).