



Australian Centre for  
**Posttraumatic  
Mental Health**

Promoting recovery after trauma



# Recovery after Trauma

**A Guide** for People with  
Posttraumatic Stress Disorder

Posttraumatic stress disorder (PTSD) can occur after someone has been through a traumatic event. Traumatic events are situations that are either life threatening or have the potential for serious injury, such as physical or sexual assault, natural disaster, war, or an accident.

# 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.

It is not unusual for people with PTSD to experience other mental health problems like depression or anxiety. Some people may develop a habit of using alcohol or drugs as a way of coping. PTSD can affect people's ability to work, perform everyday activities or relate to their family and friends.

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

A woman in a yellow tank top is shown from the chest up, with her hands covering her face in a gesture of distress or grief. She is standing in front of a large pile of rubble, which appears to be the remains of a destroyed building. The background is blurred, showing other people and debris. The overall scene is one of devastation and emotional pain.

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*We were lucky in the fires really, we all survived and didn't lose the house. Plenty of people we know were much worse off. But still, every time the wind picks up, I lose it. My heart feels like it's going to beat out of my chest and I feel like I can't breathe properly. Sometimes I even think I can smell the smoke of the fires like I did that day. **I feel like I'm on edge a lot of the time these days.** On hot days, I want to be prepared, so I spend most of my time listening to the radio for warnings of another fire. It does make it hard to get much sleep or just relax with friends, and I've been almost useless at work. **My family have been really understanding, but I know it's hard for them to see me like this.**”*

# 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 the traumatic event rather than pushing it to the back of your mind. This is the main aim of trauma-focussed CBT or EMDR.

Because the memory of a traumatic event 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 the traumatic event. 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 event so that you don't 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 that you never become overwhelmed by your feelings.

You will be encouraged to examine how your thoughts about the event 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.





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*I was in a car accident about a year ago, when some idiot blinded me with his high beam and I ran into a tree on the side of the road. Afterwards, I noticed that **driving at night made me unbelievably anxious**, to the point where I felt physically sick. It seemed like I would feel much better as a passenger, so I started asking my friends to drive if we were out at night, and I took a lot of taxis. That kept the anxiety manageable for a while, but it soon got worse again, and **it wasn't long before I was panicking any time I was in a car**, even during the daytime. **Now I find myself making excuses about why I can't go out**, or I make sure if I'm catching up with friends that we go somewhere within walking distance of my house.”*



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*I was incredibly nervous the first time I went to counselling. I was really doing it for my family. I couldn't see how it would help. It took me a while to get used to the whole thing. My counsellor explained to me how my PTSD was keeping me feeling angry and scared. It was a relief to hear that. Through counselling, I was able to start making sense of what had happened. It's been a hard journey, but I know how to deal with my demons now.”*



# 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 medication**, you should be given information about possible side effects. 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 of medication is not working for you, your doctor may ask you to try another type, increase the dose, or suggest that 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?
- 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 a traumatic event. 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 part of the person's 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 small steps that 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 a traumatic event 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 that can help.



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*I was raped by a guy I'd been dating for a few months. Afterwards, I just didn't want to speak to anyone; I didn't see my friends for months and I barely even left the house. Eventually my sister convinced me to go see a counsellor, and she even came with me to the first appointment, which was a big help. To be honest, I probably wouldn't have gone otherwise. I was afraid they'd just stick me on drugs for the rest of my life. Or worse, make me talk about the rape. I was surprised though, we didn't even talk that much about what happened to start with. My counsellor spent the first couple of sessions teaching me ways to cope with the anxiety I'd been having, to sleep a bit better... all sorts of things.*



*When it came time to talk about the rape, it was definitely hard work, but it got easier each time. Before I started counselling you couldn't have paid me to talk about what happened. I felt like I would totally lose the plot if I even thought about it. Of course I still don't like thinking about it, but it doesn't affect me the same way as it used to. And my counsellor was really good at helping me see things in a different way. I'd felt really ashamed about the fact that someone I knew and had flirted with over dinner had attacked me. I thought I'd asked for it, and that played on my mind a lot. After talking it through with her, **I started to accept the fact that it really wasn't my fault.**"*

# 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 the 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.

## **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?**

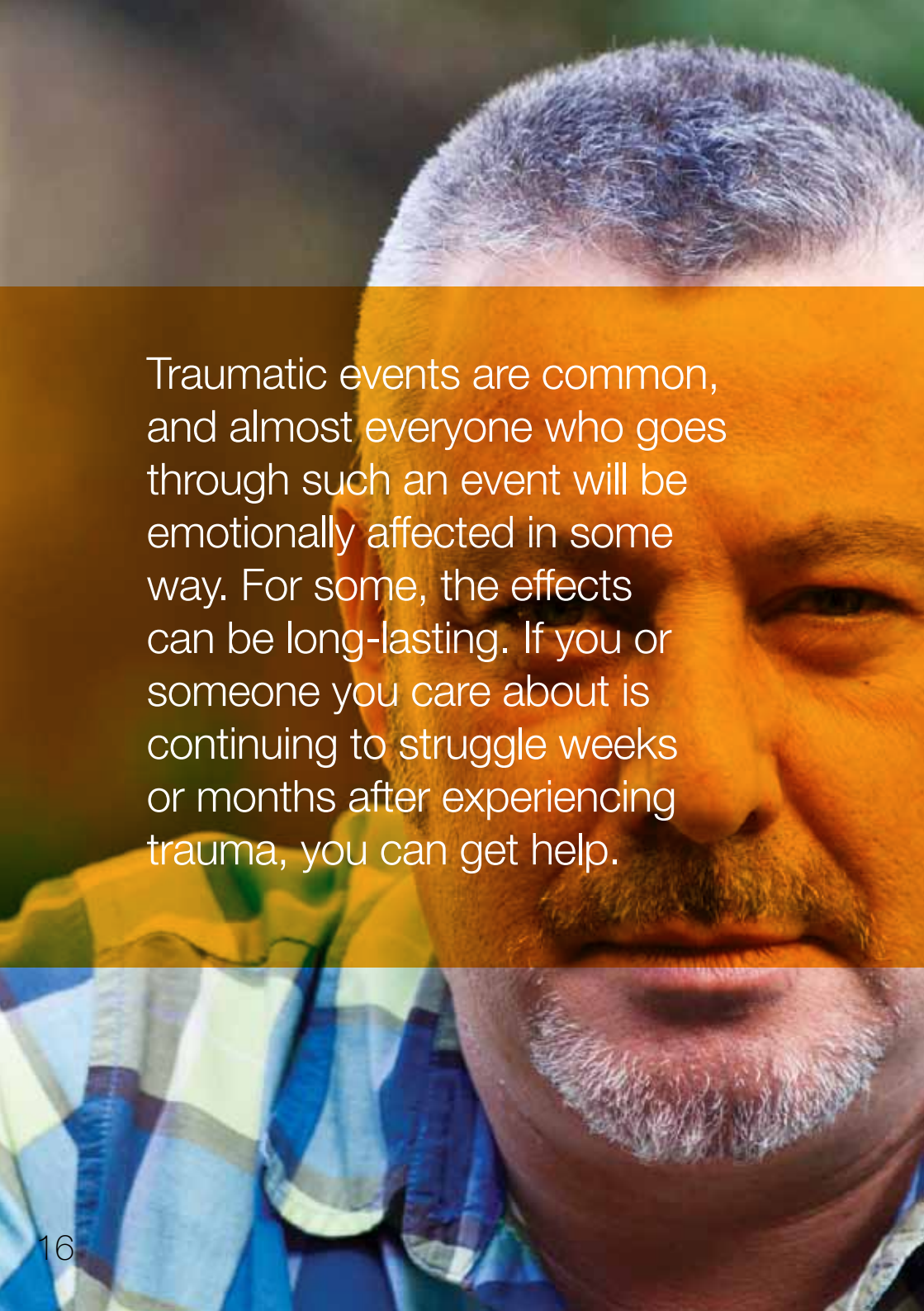
Some people with PTSD improve quickly, while others take more time to get better. PTSD can also feel more manageable for a while, but worsen at times of stress or when a particularly strong reminder of the trauma triggers a reaction.

### **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 give yourself permission to 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 to 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 traumatic event as well as associated thoughts and beliefs. Medication is not the first choice of treatment but can be useful in many cases.

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

Remember, it's your treatment; 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 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 can be 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.

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

#### **Trauma and posttraumatic mental health**

The Australian Centre for Posttraumatic Mental Health (ACPMH) provides information and useful resources about posttraumatic mental health, for practitioners and people directly affected, at [www.acpmh.unimelb.edu.au](http://www.acpmh.unimelb.edu.au).

#### **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](http://www.adin.com.au). The Alcohol and other Drugs Council of Australia (ADCA) can provide you with the number of an information service in your state or territory at [www.adca.org.au](http://www.adca.org.au).

#### **Asylum seekers, refugees and migrants who have experienced torture and trauma**

The Forum of Australian Services for Survivors of Torture and Trauma (FASSTT) has a list of agencies that provide support, advocacy and treatment at [www.fasstt.org.au](http://www.fasstt.org.au).

#### **Carers**

Carers Australia offers information, resources and access to support groups at [www.carersaustralia.com.au](http://www.carersaustralia.com.au) or call 1800 242 636.

#### **Children and young people**

Kids Helpline offers web-based, email, or telephone counselling for children and young people aged 5 to 25 years. Call 1800 55 1800 or visit [www.kidshelp.com.au](http://www.kidshelp.com.au).

Information on a range of mental health and related issues that affect teenagers and young adults is available from ReachOut at [au.reachout.com](http://au.reachout.com).

Information on trauma and mental health, where to get help, and online support is available from headspace, the National Youth Mental Health Foundation. Visit [www.headspace.org.au](http://www.headspace.org.au).



### **Children of parents with a mental illness**

The COPMI resource centre provides information, resources and access to services at [www.copmi.net.au](http://www.copmi.net.au).

### **Depression and anxiety**

Several organisations offer access to information, resources and services, including beyondblue at [www.beyondblue.org](http://www.beyondblue.org) and the Clinical Research Unit for Anxiety and Depression at [www.crufad.org](http://www.crufad.org).

### **Disasters**

The Red Cross has information, advice, and resources for kids, teenagers, teachers, and parents. Visit [aftertheemergency.redcross.org.au](http://aftertheemergency.redcross.org.au).

### **Domestic violence and sexual abuse**

The Domestic Violence & Incest Resource Centre 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](http://www.dvrcv.org.au).

### **Immigrant women's domestic violence services**

There are several services in each state and territory. See [www.iwdvs.org.au](http://www.iwdvs.org.au) or [www.speakout.org.au](http://www.speakout.org.au) for a list of services throughout Australia.

### **Parents**

Parentline provides telephone counselling to parents and carers of children aged 0 to 18 years. Visit [www.parentline.com.au](http://www.parentline.com.au) or call 13 22 89.

Information on how to talk to children and teenagers about their problems and where to find help, as well as online and telephone support, is available through headspace at [www.headspace.org.au/parents-and-carers](http://www.headspace.org.au/parents-and-carers).

### **Psychologists**

The Australian Psychological Society has a register of psychologists and lists their speciality at [www.psychology.org.au](http://www.psychology.org.au) or call 1800 333 497.

### **Sexual assault**

The Australian Centre for the Study of Sexual Assault has a list of the main sexual assault services in Australia at [www.aifs.gov.au/acssa/crisis](http://www.aifs.gov.au/acssa/crisis). 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](http://www.dva.gov.au) or on 1800 555 254. The Department can provide the phone number of the Veterans and Veterans Families Counselling Service in your state and territory.

### **Victims of crime**

A list of victim support hotlines in each state and territory, as well as information about other relevant services throughout Australia, is available at [www.victimsupport.org.au](http://www.victimsupport.org.au).

### **Vocational rehabilitation**

[www.crsaaustralia.gov.au](http://www.crsaaustralia.gov.au)



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.acpmh.unimelb.edu.au](http://www.acpmh.unimelb.edu.au)

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