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Post Traumatic Stress Disorder in Rape Survivors

Many of the words and ideas in this article are quoted from the first issue of the Post-Traumatic Gazette, written in 1995 by Patience H. C. Mason, whose website Patience Press contains other helpful articles.

Dealing with the after effects of rape is a nightmare. The physical hurts can often soon be mended, but it's the inner pain that people can't see that takes longest. It's also the hardest to deal with because it's not like healing after surgery, there is no set time limit. The emotional scars can stay with us a lifetime.

What is PTSD?

PTSD is a reaction to being exposed to an event which is outside the range of normal human experience. Sometimes it is referred to as post traumatic rape syndrome too. It is a normal human emotional reaction to an abnormal situation. Everyone reacts differently to different situations and it doesn't have to be a life threatening experience for someone to respond in this way. It just has to be perceived by the victim as a traumatic event. It is a psychological phenomenon. It is an emotional condition, from which it is possible to make a full and complete recovery.

PTSD affects hundreds of thousands of people who have been exposed to violent events such as rape, domestic violence, child abuse, war, accidents, natural disasters and political torture. It is normal to be affected by trauma. There is help, and it is ok to ask for help. PTSD is not rare. It is not unusual. It is not weak to have PTSD.

Traumatic experiences bring to the fore survival skills which are valuable and useful at the time of the trauma, but which usually become less valuable, less useful and less effective with time. Sometimes survivors become stuck in problem behaviors when their pain is not acknowledged, heard, respected, or understood. Denial plays a great part here (it didn't happen, or it shouldn't affect you). Put-downs, dismissal of the pain, mis-diagnosis and other forms of secondary wounding keep survivors stuck.

Symptoms may come on soon after the trauma or fifty years later. That is what is meant by the post in PTSD. It is normal too for symptoms to come up again when faced by further trauma and in very stressful times. It is normal to be affected by trauma.

Society has it's own way of dealing with trauma which can both be belittling or denying. For a survivor to be told that what happened to them wasn't that bad, or was no big deal or continually being told it was time that they were over it, or just try and forget it ever happened cause secondary wounding in trauma survivors. It reinforce the mistrust of everyone and everything that trauma evokes in all survivors who no longer can believe that the universe is fair or just.

This ability to do whatever it takes to survive is instinctive. We all have it, and in traumatic enough situations, it will come out or we die. Extreme situations which trigger this reaction again and again may cause survivors to do things in order to survive which can be hard to look back on later.

Similarly shutting down feelings in order to do whatever it takes to survive, or do your job and help others survive, is a reality based survival skill. Numbness is the answer. It is effective. It will help you live.

Unfortunately when survivors numb their fear, despair and anger, all their feelings, even good ones, are numbed. Numbness is comfortable. Thinking about what they have been through is so painful survivors wind up avoiding thinking about, feeling, or doing anything that reminds them of the trauma. For example, if they feel the trauma was their fault they may spend the rest of their life having to be right so they won't ever be at fault again. If they were happy when the trauma hit, they may avoid happiness forever.

Criteria for diagnosis of PTSD

These are simple guidelines that may help you to work out if you are suffering from post traumatic stress disorder. I will go into more detail later

 The survivor must have experienced or confronted with an event that involved actual or threatened injury, or a threat to their physical integrity. ie rape.

• The survivor must show symptoms of intense fear, helplessness or horror.

• The survivor must experience distressing recollections of the event. ie flashbacks.

• The survivor persistantly avoids things that remind them of the event. ie triggers

- The survivor must be show significant distress or impairment by the event, either in their social occupational or other important areas of functioning.
- Persistent symptoms of increased arousal (not present before the trauma) as indicated by at least two of the following: difficulty falling or staying asleep; irritability or outbursts of anger; difficulty concentrating; hypervigilance; exaggerated startle response.

Symptoms must last at least one month.

Symptoms often present in Rape Trauma

Intense fear, helplessness, or horror.

- Repeated and distressing recollections of the event, including images, thoughts, or perceptions. Unable to distinguish between past events and reality. Such incidents are often called "flashbacks"
- Distressing and or frightening dreams about the event.
- Associating various words, happenings, or "triggers" to the actual event which then causes a "flashback"
- Avoidance of anything that may "trigger" a flashback including not talking about the attack itself.
- Pretending it never happened, and an inability to recall anything about the attack, "denial".
- A feeling of numness, detachment or "unrealness" about everything.
 A lack of emotion or inability to feel love or care about anything.
- A feeling of depression and isolation.
- A change in sleep patterns. More often or not the ability to sleep or stay asleep for any length of time.
- A lack of concentration.
- Avoidance of being touched, and shying away from loved ones. Sudden movements may startle.
- A lack of trust in anyone, even close family or partners.
- More irritable than usual. Outbursts of anger and crying. Mood swwings.
- A feeling of low self esteem and confidence.
- A feeling of being dirty, or disgusting.
- Deep embarasement or shame. Sometimes self blame for events.
- Bitterness and morbid hatred of the perpetrator, with a preoccupation of how to harm or humiliate them.
- Loss of appetite or a change in eating patterns.

Intrusive Symptoms: Flashbacks

Intrusive symptoms can be described as those where the traumatic event "intrudes" into everyday life, and is re-experienced. These symptoms are often referred to as Flashbacks. The event is so real and so vivid it feels like the person is actually experiencing the trauma all over again. It is happening right in front of their eyes, and they can't tell what is reality and what is memory.

These flashbacks can range in severity from mild and brief to long and strong. They can involve both sensory perceptions and motor re-enactment too. During a flashback you may experience vivid images, strong smells, or noises. Some may even involve actually acting out a traumatic experience. Many times trauma survivors don't recognize that they are having a flashback nor remember afterwards what happened. It is not unusual for someone to faint or dissociate during a flashback and be unable to recall any part of the experience, even when a witness describes their behavior to them.

Sometimes after a flashback trauma survivors are aware of what triggered especially if someone else observes the behavior and recounts it to them, or if it is a recurring situation.

Sometimes these flashbacks occur as nightmares or bad dreams too. There is some evidence to suggest that traumatic nightmares occur in the earlier, lighter stage of sleep than other dreams, and are more easily recalled upon waking. Traumatic dreams may however contain both accurate and inaccurate, literal and symbolic, information and should always be interpreted with caution.

Sometimes there is no actual reliving of the trauma itself, but instead survivors expereince a sudden painful emotional breakdown. These can involve crying, anger or fear for no apparant reason, and can occur repeatedly like flashbacks. Sometimes a flashback can involve just having feelings that are far more intense than a situation calls for but would have been appropriate in the original traumatic situation.

The important thing to remember about flashback experiences, especially those related to abuse and rape survivors, is that they can make you feel as afraid, as helpless, and as out of control as you were during the actual trauma, even if you don't consciously remember it. Others have the experience of losing their sense of where the flashback stops and reality begins.

Avoidance Symptoms:triggers

Symptoms of avoidance can be described as an emotional numbness or coldness towards people who are close to us. Survivors shut people out, or push them away. This in turn affects their relationships with those who are often the ones who are trying hardest to help. When survivors are coping with flashbacks it takes a lot of energy to try and supress the flood of emotions that threaten to overwhelm them. They find that they have no real emotion left for anyone else, and often feel emotionless or numb towards everyone else. Inability to recall important aspects of the trauma, is another of the ways avoidance and numbing may work. This means the person cannot remember exactly what happened. Many trauma survivors forget in order to survive.

Survivors may also have learned to dissociate, to literally not be there, to survive. They automatically "switch off" during a stressful situation becuase it is too painful to deal with.

Numbness makes it hard for survivors to take care of themselves. Feelings are there to tell us how to do that. If you can't tell what you feel, you can't choose healthy behaviors for yourself.

Another symptom is avoidance of situations or activities that may trigger reminders of the traumatic event. These are commonly referred to as "triggers" Other symptoms may worsen when a situation or activity occurs that reminds them of the original trauma. Often the survivor is unable to identity a trigger without help from someone who knows about their traumatic experience.

Triggers can be people, places, sounds, images, feelings, smells, tastes, films, animals, the tone of someone's voice, body positions or sensations, weatherconditions, time factors, or any combination of things that even remotely resemble traumatic experiences. They can be as subtle, complex and obscure as clues in a good detective novel.

Survivors can become so scared of particular situations that their daily lives are ruled by their attempts to avoid them. PTSD sufferers' inability to work out grief and anger during the traumatic event mean that the trauma will continue to control their behavior without their being aware of it. Depression is a common product of this inability to resolve painful feelings.

Hyperarousal Symptoms

The survivor part of us is not able to listen to "reason". It is going to be constantly looking for danger from now on whether or not others think it is reasonable. Real physiological changes occur in the brains of survivors which make them quick to react. In order to live through the trauma, survivors may develop the capacity to go from being completely fine into a killing rage in seconds. That defensive mechanism helps them live.

Some survivors may stop sleeping soundly. Sleep can get you killed, so they won't take the risk. Survivors may be uncannily able to read the moods of those around them because the moods of their abusers defined their lives. Sometimes they also become hypervigilant, searching for physical danger everywhere they are and all of the time.

Due to hypervigilance and lack of sleep, it is hard for survivors to concentrate on everyday things. They may do poorly in school and in their everyday lives that leads them to believe they are stupid or inept when actually they have a symptom of PTSD.

Survivors often react faster and more completely to sudden noises or movements. These are lifesaving skills that the survivor feels they need while they are still at risk. These are reality based, effective survival skills. They keep you alive. They don't go away by themselves.

Recovery

Recovery is a slow process which doesn't come easily or without pain. The survivor must be heard, feel they are understood, believed and find the ability to reconnect to a community. Recovery takes time. The survivor sets the pace. Recovery is not a race, and can't be given a set time limit. Recovery doesn't erase the trauma as if it had never happened, it just makes it easier to deal with.

Further trauma will always affect survivors. PTSD symptoms may come back during times of further stress, but the negative effects can be minimized as the survivor learns what they are and feels able to take care of themselves.. True healing is knowing it is okay to ask for help again.

Recovery is about learning better ways of coping with trauma and letting go of fear, even fear of change. Slow growth is good growth.

You can't rush survivors and we must not dismiss their pain. Instead of comparing pain, survivors and survivor groups are encouraged to respect each other's pain and to focus on what they have in common and to share recovery. Each person's unique experience and pain is respected.

PTSD symptoms, numbing, hypervigilance and flashbacks, are strong hints that you needto get help! They helped you survive, but they do not go away by themselves. People have to alter their lives to control them. They can become both ineffective and a source of constant pain.

It takes time to get better. Getting better is the reward for taking the time to recover. Getting better, however, is a slow process. The state of almost constant physiological arousal which many trauma survivors live in makes it difficult for them to take in the kind of information needed to heal. This is part of the brain chemistry of survivors. It is not resistance or stubborness on their part. People can talk about changing but all survivors may see is their lips moving. The words and concepts make no sense. They are incapable of taking what is being said on board because they are too busy taking in information for their survival. Things like who is in the room, where are they sitting, where is the door, which is the quickest way out, do they look hostile or friendly, how are they reacting to me?

Until they start to feel safe a survivor won't be able to react to anything or anyone. They have to feel safe and feel as though there is an element of trust there. When they have been treated

with respect, not discounted, not pushed to hurry up and recover, which are secondary wounding experiences and make PTSD worse, they will feel safe and know it because they will be able to hear and understand what the therapist or group is saying in a new way.

When they can hear, survivors can begin to work on safety issues. They can begin to understand and protect themselves from triggers. They can learn to handle emotions such as anger and fear. Survivors can develop the capacity to respond rather than react, like having a pause button instead of an on-off switch.

Searching for the right help is important. You need to be comfortable enough with the therapist or group. On the other hand searching for the perfect group or a therapist who will never make a mistake can put off recovery for life. The therapist or group is not going to fix you. They will however provide you with information and a variety of coping skills, but it is you who does the work and heals.

There are many forms of therapy available to survivors. Two of the most common used are cognitive/behaviour therapy and psychodynamic psychotherapy. Cognative/behaviour therapy involves focusing on ways of correcting the survivors painful and often intrusive patterns of behaviour and thoughts. This is achieved through teaching them relaxation techniques and examining their mental process. This can involve exposing the survivor to certain triggers in a controlled enviroment until they are "desensitised" to the trigger and is no longer afraid of the situation.

Psychodynamic psychotherapy tends to focus on helping the survivor to look closely at the way behaviour and experience during their traumatic expereince violated them. Often the way a survivor differentiated between thier individual personal values and the reality of what they expereinced during the traumatic event can result in PTSD. This therapy aims to resolve the consious and unconscious conflicts that evolved from the trauma. They also work on building self confidence and esteem, self control and an all round renewed pride in themselves and their abilities.

Each person heals in their own way, there are no hard and fast rules, just as there is no pill that can cure PTSD. Yes drugs can be used to help with the side effects of PTSD, like helping sleeplessness or hyperarousal. Unfortunately there is no simple clear cut solution for such a complex phenomonan. I firmly believe that survivors have to confront what has happened to them, and by repeating this confrontation, learn to accept the trauma as part of their past. There is no magic wand. However counselling and therapy can help to find an easier path through the trauma and set you on the path to healing.

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