

# WHEN TERRIBLE THINGS HAPPEN - WHAT YOU MAY EXPERIENCE

## IMMEDIATE REACTIONS

There are a wide variety of positive and negative reactions that survivors can experience during and immediately after a trauma. These include:

DOMAIN	NEGATIVE REACTIONS	POSITIVE REACTIONS
<b>Cognitive</b>	Confusion, disorientation, worry, intrusive thoughts and images, self-blame	Determination and resolve, sharper perception, courage, optimism, faith
<b>Emotional</b>	Shock, sorry, grief, sadness, fear, anger, numb, irritability, guilt and shame	Social connectedness, altruistic helping behaviors
<b>Social</b>	Extreme withdrawal, interpersonal conflict	Social connectedness, altruistic helping behaviors
<b>Physiological</b>	Fatigue, headache, muscle tension, stomachache, increased heart rate, exaggerated startle response, difficulties sleeping	Alertness, readiness to respond, increased energy

## COMMON NEGATIVE REACTIONS THAT MAY CONTINUE INCLUDE:

### INTRUSIVE REACTIONS

- Distressing thoughts or images of the event while awake or dreaming
- Upsetting emotional or physical reactions to reminders of the experience
- Feeling like the experience is happening all over again (*flashback*)

### AVOIDANCE AND WITHDRAWAL REACTIONS

- Avoid talking, thinking and having feelings about the traumatic event
- Avoid reminders of the event (*places and people connected to what happened*)
- Restricted emotions; feeling numb
- Feelings of detachment and estrangement from others; social withdrawal
- Loss of interest in usually pleasurable activities

### PHYSICAL AROUSAL REACTION

- Constantly being "on the lookout" for danger, startling easily, or being jumpy
- Irritability or outburst of anger, feeling "on edge"
- Difficulty falling or staying asleep, problems concentrating or paying attention

### REACTIONS TO TRAUMA AND LOSS REMINDERS

- Reactions to places, people, sights, sounds, smells and feelings that are reminders of the disaster
- Reminders can bring on distressing mental images, thoughts and emotional/physical reactions
- Common examples include sudden loud noises, sirens, locations where the disaster occurred, seeing people with disabilities, funerals, anniversaries of the disaster and television/radio news about the disaster

### POSITIVE CHANGES IN PRIORITIES, WORLDVIEW AND EXPECTATIONS

- Enhanced appreciation that family and friends are precious and important
- Meeting the challenge of addressing difficulties (*by taking positive action steps changing the focus of thoughts, using humor, acceptance*)
- Shifting expectations about what to expect from day to day and about what is considered a "good day"
- Shifting priorities to focus more on quality time with family or friends
- Increased commitment to self, family friends and spiritual/religious faith

## WHEN A LOVED ONE DIES, COMMON REACTIONS INCLUDE:

- Feeling confused, numb, disbelief, bewildered, or lost
- Feeling angry at the person who died or at people considered responsible for the death
- Strong physical reactions such as nausea, fatigue, shakiness and muscle weakness
- Feeling guilty for still being alive
- Intense emotions such as extreme sadness, anger, or fear
- Increased risk for physical illness and injury
- Decreased productivity or difficulty making decisions
- Having thoughts about the person who died, even when you don't want to
- Longing, missing and wanting to search for the person who died
- Children are particularly likely to worry that they or a parent might die
- Children may become anxious when separated from caregivers or other loved ones

## WHAT HELPS

- Talking to another person for support or spending time with others
- Engaging in positive distracting activities (*sports, hobbies, reading*)
- Getting adequate rest and eating healthy meals
- Trying to maintain a normal schedule
- Scheduling pleasant activities
- Taking breaks
- Reminiscing about a loved one who has died
- Focusing on something practical that you can do right now to manage the situation better
- Using relaxation methods (*breathing exercises, meditation, calming, self-talk, soothing music*)
- Participating in a support group
- Exercising in moderation
- Keeping a journal
- Seeking counseling

## WHAT DOESN'T HELP

- Using alcohol or drugs to cope
- Extreme avoidance of thinking or talking about the event or a death of a loved one
- Violence of conflict
- Overeating or failing to eat
- Excessive TV or computer games
- Blaming others
- Working too much
- Extreme withdrawal from family or friends
- Not taking care of yourself
- Doing risky things (*driving recklessly, substance abuse, not taking adequate precautions*)
- Withdrawing from pleasant activities

*\*Adapted from Psychological First Aid - Field Operation Guide by the National Child Traumatic Stress Network, National Center for PTSD*

## CRISIS RESOURCES

- For life-threatening emergencies, please call **911**
- Campus police at **(515) 294-4428**
- National Suicide Prevention Lifeline  
**(800) 273-8255**
- Text the 24 hours Crisis Text line  
**Text ISU to 741741**

## STUDENT HEALTH AND WELLNESS

STUDENT COUNSELING SERVICES  
515-294-5056

THIELEN STUDENT HEALTH CENTER  
515-294-5801

STUDENT WELLNESS  
515-294-1099

RECREATION SERVICES  
515-294-4980

