

Basically, Post Traumatic Stress is unconscious, automatic physical, emotional reaction(s) brought on by a delayed reaction to severe physical and psychological experiences that are outside the normal human range of emotions. Veterans of combat are the most publicized group of sufferers. But law enforcement officers; emergency medical personnel; firefighters; survivors of life threatening accidents, fire, flood or natural disasters; victims of violent crime; and victims of domestic, child or sexual abuse can and do suffer from PTS(D). ANYBODY can be affected by PTS(D). Even family members and friends of those who have PTS(D) can suffer from what is called Secondary Traumatic Stress Disorder (STSD). It is believed that 7-8% of the population have PTS(D) at some point in their lives.

The following behavior/reactions are contributed to the affects of PTS(D) (not a complete list, each person reacts differently and a person's reaction is different due to the source of the trauma):

- Flashbacks, or reliving the traumatic event(s) for minutes or even hours
- Feelings of shame or guilt
- Having upsetting dreams about the event(s)
- Trying to avoid thinking or talking about the event(s)
- Feeling emotionally numb
- Irritability or anger
- Poor relationships
- Self destructive behavior - use of drugs or drinking too much
- Feeling hopeless about the future
- Having trouble sleeping
- Memory problems
- Trouble concentrating
- Being easily startled or frightened
- Not enjoying activities that once were enjoyed
- Hearing or seeing things that aren't there

Signs and symptoms of PTS(D) usually show up within 3 months of a traumatic event. However, for some, PTS(D) signs may not occur until years afterwards. Symptoms come and go.

Usually more symptoms become apparent during times of higher stress or when experiencing symbolic reminders of the event(s). These reminders might be something remembered, something seen, something heard or even something smelled.

There is no one cause of PTS(D) Research is ongoing in this area. As with any mental health issue, the individual's biology and genetics, life experiences, temperament and changes in the natural chemicals of their brains all play a part.

To help those with PTS(D) everyone is encouraged to do the following - general:

- Become aware of what PTS(D) is
- Offer understanding and support to those (along with their family members and friends) who are living with this condition

Following is information that may be helpful when dealing with someone with combat related PTS(D) These recommendations come directly from combat veterans.

When in contact with someone who has combat related PTS(D) or you think has it:

- Be calm
- Keep the number of people involved to a minimum
- Do away with unnecessary noise, bright lights
- Do not move quickly toward them
- Be patient
- Speak slowly with frequent pauses
- Avoid interruptions when they are speaking, as they may forget what they are trying to say

Crowds, loud noise, bright lights, fast movement, yelling are all things reminiscent of combat and can trigger a flashback or intensify the situation if the individual is currently experiencing a flashback.

Anything that can be done to keep the conditions affecting the person with PTS(D) as non-threatening as possible will go a long way in defusing a potential confrontation.

PLEASE SEEK
PROFESSIONAL HELP

www.ncptsd.va.gov
www.silverstarfamilies.org/SSFOA-PTSD.html
www.silverstarfamilies.org/Education-Wounded-Support.html
DoD National Suicide Prevention Lifeline

1-800-273-TALK (8255)

PLEASE SEEK HELP

We are not mental health professionals.
Our brochure is for informational purposes only. See your doctor or professional help.

Some find help thru professional counseling others find solace and peace with the help of a Chaplain.



*Silver Star Shining for Sacrifice
And Honoring Our Wounded*

PTS(D)*

PTS(D) is nothing to be ashamed of, embarrassed by, feel guilty about or laughed at.

* **PTS(D) -- Post Traumatic Stress** known as PTSD or Post Traumatic Stress Disorder. SSFOA feels that PTS(D) is not a disorder but is a wound that affects thousands of servicemembers and their families. We believe PTS(D) sufferers should be treated with the same respect, care and honor as all wounds and illness receive.

Awareness campaign
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