



## WHEN TERRIBLE THINGS HAPPEN

### WHAT YOU MAY EXPERIENCE

#### Immediate Reaction

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

Domain	Negative Responses	Positive Responses
Cognitive	Confusion, disorientation, worry, intrusive thoughts and images, self-blame	Determination and resolve, sharper perception, courage, optimism, faith
Emotional	Shock, sorrow, grief, sadness, fear, anger, numb, irritability, guilt, and shame	Feeling involved, challenged, mobilized
Social	Extreme withdrawal, interpersonal conflict	Social connectedness, altruistic helping behaviors
Physiological	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 reactions

- Constantly being “on the lookout” for danger, startling easily, or being jumpy
- Irritability or outbursts 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

Information from:

<http://dmh.mo.gov/docs/diroffice/disaster/PsychologicalFirstAid--FieldOperationsGuide2ndedition.pdf>

- Common examples include: sudden loud noises, sirens, locations where the disaster occurred, seeing people with disabilities, funerals, anniversary 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 difficulties making decisions
- Having thoughts about the person who died, even when you don’t want to
- Longing, missing, or wanting to search for the person who died
- Children or adolescents are particularly likely to worry that they or a parent might die
- Children or adolescents may become anxious when separated from caregivers or other loved ones

**WHAT HELPS**

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

**WHAT DOESN'T HELP**

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