

FACT SHEET

Post Traumatic Stress and Relationships



“FIGHT THE STIGMA OF MENTAL ILLNESS”

Post Traumatic Stress (PTS) and associated illnesses affect not only those exposed to trauma but their loved ones as well, particularly those who live with them.

Relationships can impact either positively or negatively on a loved one's PTS symptoms. Research demonstrates that being in good relationships and having strong social support networks are critical in recovery and prevention of relapses for those experiencing PTS and associated illness. Sadly, however, even the very strongest of relationships can be tested when a family member is experiencing PTS difficulties, and the family can suffer as a consequence.

Solid relationships are extremely important and beneficial to those with PTS as they provide:

- Companionship and a sense of belonging, reducing the chance of isolation
- Self-esteem, which can help with depression and the feelings of guilt
- Opportunities to make a positive contribution within the relationship/s, which can reduce feelings of failure or alienation
- Practical and emotional support when coping with intense PTS symptoms.

Partners, friends, or family members may feel hurt, alienated or disheartened because the person experiencing difficulties may be unable to overcome the effects of the trauma; this in-turn can lead to feelings of anger toward or distance from the person experiencing PTS.

The first step in living with and supporting a loved one is learning about PTS and understanding how symptoms may impact on relationships.





Family Relationships

Changes in the capacity to function as a parent and partner can lead to family needs being unmet, placing further stress on the family as a whole. Family members can also become extremely distressed when witnessing the assortment of symptoms that accompany PTS, such as night-terrors or anger outbursts. These stresses often result in families requiring assistance at some point, the earlier the better the outcome for all. Since PTS affects the whole family, it can be particularly beneficial for the family to seek assistance *together*. This can help the family communicate better and work through relationship difficulties.

In some cases, people with PTS may start to depend too much on their partners, family members and friends. (This can also include support persons such as healthcare providers or therapists). It is important this is identified and if possible managed early. Caregivers and family members can burn out very quickly and healthcare providers may not be in a position to assist in a timely manner, leaving those with PTS and their family to deal with a crisis on their own.

TIPS – for those with PTS

Identify and establish support networks and write up an action plan in the event of a crisis. This plan will include such things as:

- what classifies as a crisis
- what to do in a crisis
- who to contact, including phone numbers
- how to approach suicidal thoughts or actions, and
- what to say to your work or children in the event you may be hospitalised.

Being prepared is far better than not knowing what to do. Your treating practitioners can assist with writing up the plan and it's very important to involve your partner or caregiver also. PUTP has provided a sample of an 'action plan'.

TIPS – for partners and caregivers

Being involved in your loved one's care and creating the action plan is very important, providing you have consent. In the event of a crisis you will play a crucial role. Knowing what to do will relieve further stress on you and your loved one.

It can be extremely overwhelming if your loved one is hospitalised in a psychiatric facility, especially for the first time. Use resources available and support networks. Speak to the staff, including the treating psychiatrists: they are usually very experienced and caring and will answer most questions and concerns you have. Don't be afraid to visit or bring flowers, cards and gifts. Encourage family and friends to visit also, but seek permission from your loved one first. Find support groups and people who have been through similar circumstances, they can be a wealth of information and very helpful. There are now many online PTSD support groups and forums also. If your loved one is hospitalised, use the time wisely to catch up on 'you time'. Go to lunch, catch up with your mates or watch a movie with friends and take some time out. Your loved one is in good hands. This is a great opportunity for kids to have sleepovers and their friends over.



Establish a good relationship with a professional experienced in trauma who has the ability to help and assist children with any questions or advice they may require regarding their parent's PTS. This can be done by email or phone or a quick visit. A five minute phone call or answering an email can take weeks of angst away for a child who may not understand why their parent with PTS is behaving or has behaved in a certain way.

PTS and relationships with children

Emotional numbing or disassociation is a common symptom of PTS; this can be extremely difficult for family, friends and also work colleagues as it may appear the individual is disinterested, distant, or doesn't care, and at times they can show little or no emotion. This can be excruciatingly hurtful, especially for children.

It is a common myth that children are resilient and can take on a great deal before being affected by their parent's PTS. The last thing you or your partner need is your children growing up into 'wounded' adults. Witnessing the array of PTS symptoms, such as sleep disturbance, anger outbursts, withdrawal and substance abuse, can have a lasting effect on children if left undealt with or ignored. Education, support and being open about PTS are essential if your children are to thrive in such an environment and go on to lead productive and healthy adult lives. Utilising significant others such as grandparents, aunts and uncles can help with emotional support, love and affection. The most difficult PTS symptom for your children to understand will be the 'emotional numbing'. Realising that when they are sad or unhappy, their PTS parent may be unable to cuddle or wipe away tears can be excruciating. It is extremely important this is explained to children, and not left for them to ever believe or feel it could be their fault (which children are prone to do in the absence of information and reassurance). Being open with family, friends, teachers, school councillors, coaches and babysitters have many benefits for your children, such as:

- reducing the emotional impact on the child
- counteracting stigma and isolation by giving your child more people to talk to if they need to
- enabling other people to detect if something is starting to encroach on your child's health and wellbeing.



“STOMP OUT THE STIGMA OF POST TRAUMATIC STRESS”

TIPS

If you have been living with PTS for many years, it is never too late to re-build relationships and talk openly about your symptoms. It is understandable that you may not wish to discuss your trauma—this is perfectly normal and is *neither necessary or even desirable*¹. However, you can talk about how some of the symptoms have impacted on your life.

TIPS

It's important to become educated about PTS and recognise certain triggers (for example, anniversaries, smells, or sounds) to effectively assist your family member with PTS through difficult times. Discuss these with your children and explain why their parent with PTS may be quiet or withdrawn and possibly angry or agitated. Be open with children about PTS, hiding symptoms or ignoring them will only lead to further misunderstandings and distrust later on.

A parent with PTS may not feel comfortable attending events such as sporting games or school plays due to the noise and crowds, and this can be tough on the family. Utilising friends and family to attend these events with your children will make it a little easier for them as they can have someone barracking for them.

TIPS

Take photos and involve the parent with PTS in getting ready for activities. Talk about what they are going to be doing or how they played the game. They may feel shame about not attending, but they will feel better than not being involved at all or feeling further isolated. Acknowledging and understanding that those with PTS find it difficult to attend certain events and that you completely understand, will make it easier for them. A parent with PTS should never be made feel guilty for having symptoms. They wouldn't be blamed if they had a broken leg or cancer: it is no different. PTS is a medical condition.

TIPS

Talk openly about mental health in your family—as you would about physical health. Encourage a positive view about maintaining good mental health through diet, exercise and understanding the early signs and symptoms of anxiety and depression. Try and walk daily as a family if this is possible (Some with severe PTS symptoms may feel uncomfortable leaving the house; perhaps a treadmill or punching bag can be used for exercising).

¹ This is due to the possibility that revisiting the trauma could be a trigger and bring up painful memories.



TIPS

Do things together as a family. Board games are great: they are quiet and play can stop and resume later if necessary. Find ways of exercising together. But keep in mind fatigue can play a major role. Try and remain in social circles if possible, but only if these friendships are supportive and conducive to healthy lifestyles.

Children may not want to have friends stay over because the parent with PTS can be uncomfortable with noise and disruption, or they may fear how their parent may react, especially if alcohol or substance abuse is involved.

TIPS

Plan for the parent with PTS to visit a friend or another family member and encourage your children to have friends over. Stigma may come into play as many people who don't comprehend mental health problems may fear their child could be in danger if they know of a parent having PTS. As ridiculous as this may sound, it can happen. The best defence is to extend the invitation to the parents as well, show your home and family to be normal (See fact sheet on *Combating Stigma*). Provide opportunities to let your children have friends over, make noise, play music loud and have fun.

Are you the partner of someone with PTS?

If your partner or loved one has PTS, it's essential that you take care of yourself and get extra support. PTS can take a heavy toll if you let it. It can be hard to understand why your loved one won't open up to you—why he or she is less affectionate and more volatile. The symptoms of PTS can also result in job loss, substance abuse, and other stressful problems.

Letting your family member's PTS dominate your life while ignoring your own needs is a sure-fire recipe for burnout. In order to take care of your loved one, you first need to take care of yourself. It's also helpful to learn all you can about PTS. The more you know about the symptoms and treatment options, the better equipped you'll be to help your loved one and keep things in perspective.



Helping a loved one with PTS

Be patient and understanding! Getting better takes time, even when a person is committed to treatment. Also, be patient with the pace of recovery and offer a sympathetic ear. A person with PTS may need to talk about the traumatic event over and over again. This is part of the healing process, so avoid the temptation to tell your loved one to stop rehashing the past and move on. On the other hand, don't pressure your loved one into talking. It can be extremely difficult for people with PTS to talk about their traumatic experiences. For some, it can even make things



worse. Never try to force your loved one to open up. Let the person know, however, that you're there when and if he or she wants to talk.

Try to anticipate and prepare for PTS triggers. Common triggers include anniversary dates, people or places associated with the trauma, and certain sights, sounds, or smells. If you are aware of what triggers may cause an upsetting reaction, you'll be in a better position to offer your support and help a loved one with symptoms or reactions.

Don't take the symptoms of PTS personally, as difficult as this can be sometimes. Common symptoms of PTS include emotional numbness, anger and withdrawal. If a loved one seems distant, irritable, or closed off, remember this most likely won't have anything to do with you or your relationship.

Avoid becoming angry, critical or too protective, and don't treat your partner like a child. They are intelligent adults able to make decisions. Some you may agree with and some you may not. Seek assistance yourself if you feel you're not coping. It's not helpful to have two people in the same household struggling with increased stress. For those with PTS it is far more helpful if stress can be kept to a minimum.

PTS, intimacy and sexual difficulties

For those who suffer PTS due to sexual assault we can provide you with resources and referrals to other organisations with the specialised experience in this field

One area that has been poorly understood and addressed is the impact of PTS on intimacy and sexuality. Due to its private nature, couples may feel too embarrassed or ashamed to discuss the issue, leaving them to suffer in silence. Those with PTS and associated illness who experience sexual difficulties may start to give up on intimacy altogether. This is not because they want to or don't find their partner attractive. It is because PTS symptoms encroach on their daily life. Any intimacy can be a reminder of sexual difficulties, so that some will avoid it at all costs – by picking fights, not showering or shaving before bed or brushing their teeth. Taking medication and bombing out early – sleeping in another area of the house are other avoidance behaviours.

Many with PTS experience symptom of irritability and chronic fatigue, leading to emotionally withdrawing from their partner, feeling disconnected and detached from loved ones. On the flipside irritability, anger and chronic fatigue do not make their partner feel particularly loving towards them either!

TIPS

Given that it appears as though many forms of sexual dysfunction are linked to PTS symptoms, sexual difficulties may decrease if symptoms of PTS and associated illness (such as depression and alcohol abuse) are addressed.

Sexual dysfunction can have a profound impact on an individual's quality of life and that of their partner. Shame, guilt, anger and blame all come into play when trauma interferes with a loving relationship. For many couples, "*sex is the glue that keeps a marriage together*". Many couples choose not to disclose and marriages and partnerships fall apart under the pressure. Affairs can be common when people have suffered trauma as many of the symptoms encroach on sexual functionality. Partners may find comfort elsewhere or feel their partner is no longer attracted to them and leave the relationship. Those with PTS may seek love and affection elsewhere thinking they are no longer in love with or attracted to their partner, only to find these relationships fail also.

Sexual problems and sexual dysfunction can refer to a wide range of issues, including decreased sexual desire or low libido, premature ejaculation, or erectile dysfunction. Studies have found that people who have been exposed to traumatic events may be more likely to experience sexual dysfunction.

There are a number of reasons why a diagnosis of PTS may increase risk for sexual dysfunction. Those experiencing PTS symptoms can be very hypervigilant, meaning they find it hard to relax and wind down; many are often scouting for danger. High levels of anxiety interfere with sexual functioning. To achieve sexual fulfilment a person needs to relax and let their guard down, even if only momentarily; this is very difficult for those with chronic PTS. Many are not likely to feel attractive or sexual and will not be able to become easily sexually aroused.

TIPS

When you first notice there is a problem, don't ignore it or be ashamed. This is a very normal side-effect of PTS, and also of medication. Talk to your GP or specialist and get a referral to someone trained in this field.

Many of the medications used to treat PTS and any associated depression may cause extensive sexual side-effects. The most common medications used are the selective serotonin reuptake inhibitors (SSRI) antidepressants, which are associated with a reduced libido and delayed orgasm. Tricyclic antidepressants may also cause erectile dysfunction and difficulty becoming aroused and major tranquillisers can cause loss of libido, arousal disorder and delay or difficulty in achieving orgasm.

TIPS

If you have PTS and are experiencing some form of sexual difficulty, it will be important to seek out help from a medical professional. Sexual dysfunction often does not resolve itself without some form of intervention. There are a number of effective treatments.

Some people suffering from chronic PTS may have poorer physical health which can have a negative impact on a person's sexual function. They could be physically unfit, overweight, or suffer from other medical diseases such as diabetes and heart disease. They may smoke or drink to excess. Patients may have hormone imbalances also.

TIPS

Talk to your partner and ask them to attend the appointments with you. This will help your partner to understand that this is a medical issue, not a personal issue directed at them. Try to remain intimate: remember you don't have to be engaging in sex to still be intimate with your partner.

A fulfilling sexual relationship and treatment of sexual dysfunction has not only been shown to improve quality of life and self-esteem, but also relationships. Furthermore there is increasing evidence that such treatment may also have a direct effect on the primary psychological condition, be it PTS, depression or both.

Ask your doctor about treatment for sexual dysfunction or about referral to a specialist in this area. Discuss the problem with your partner or your support group. Most people end up feeling regret that they had not dealt with such an important issue earlier on.

TIPS

Relax and spend quality time together in a safe place. Try to openly have a conversation about how you are both feeling: No blame or finger pointing is vital, as is being respectful of each other's feelings and opinions. Complementing each other frequently can help with self-esteem.

If you can, reduce alcohol intake as too much may alter sexual response, both in males and females.

TIPS

Sexual difficulties have everything to do with your partner. Sexual health flourishes in healthy relationships. If you are experiencing repeated episodes of erectile dysfunction or sexual difficulties, talk to your partner. If you do not think you can communicate with your partner about sexual issues, you may have just identified one part of the problem!

Good relationships can be the difference in someone recovering from PTS, managing their symptoms well or giving up. It can be an extremely difficult time for those who suffer the consequences of trauma and for their loved ones who support them through it. If you're a friend or a work colleague the best support you can give is to be understanding and non-judgemental. Continue to call as you would normally or email funny jokes through. Isolating those with PTS can impact terribly. If you can, champion for those who may be struggling and remember to include them in invitations. They may not wish participate in activities or join in, but they also won't feel as isolated.

Where to find help

In a Crisis call 000 – or attend casualty at your nearest hospital

Life Line
13 11 14

Kids Help Line
1800 55 1800 (free call)

Mensline Australia
1300 78 99 88

Alcoholics Anonymous
(02) 9663 1206

Relationships Australia
1300 364 277

SANE Australia
1800 18 SANE

Carers Australia
1800 242 636

Black Dog Institute
02 9382 4530

WVCS – Veterans and Veterans Families Counselling Service
1800 011 046

Australian Centre for Sexual Health
02 94 37 3906

www.acpmh.unimelb.edu.au

www.copmi.net.au
For children of parents living with mental illness

www.relationships.org.au
1300 364 277

www.carersaustralia.com.au

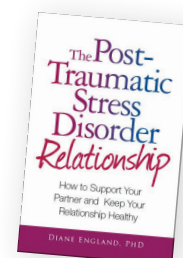
www.parentline.com.au

Don't suddenly stop taking medication in the hope this will improve things: most likely this will have a terrible effect. Talk to your practitioner about the side-effects and discuss ways you may be able to reduce medication. Reducing medication must be done under strict guidance as it can be dangerous to cease instantly.

Protest against others who may be making negative comments or suggestions towards those with PTS or any mental health condition. It's everyone's responsibility to stop the 'STIGMA' – You could be the difference in assisting someone back on their feet, keeping them in work or stopping someone from wanting to give up!

Recommended Reading

Diane England, 2009, The Post-Traumatic Stress Disorder Relationship, Published by Adams Media, a division of F+W Media Inc 57 Littlefield Street, Avon MA 02322. USA www.adamsmedia.com available at Amazon as an E book.



Information partially sourced and adapted from the National Centre for PTSD – Posttraumatic Stress Disorder – American – www.ptsd.va.gov

Disclaimer

This fact sheet is a guide and not a substitute for appropriate medical or psychological treatment. It serves only for informational and educational purposes. For those experiencing any difficulties, please seek the assistance of your GP, specialist or therapist.



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PICKING UP THE PEACES

PTS EDUCATION & AWARENESS

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