



Trauma and Stress-Related Disorders

Adjustment Disorder

Post Traumatic Stress Disorder

Reactive Attachment Disorder

What is psychological trauma?

- Psychological trauma is an **emotional response to a terrible event** like an accident, rape or natural disaster.
- Immediately after the event, shock and denial are typical.
- Longer term reactions include unpredictable emotions, flashbacks, strained relationships and even physical symptoms like headaches or nausea.

What can trauma lead to?

- While these feelings are normal, some people have **difficulty moving on with their lives.**
- This can lead to **a psychological disorder** such as ***adjustment disorder*** or ***posttraumatic stress disorder.***
- Psychologists can help these individuals find constructive ways of managing their emotions.

Adjustment Disorder



What is an adjustment disorder?

- Work problems, going away to school, an illness – any number of life changes can cause stress. *Most of the time, people adjust to such changes within a few months.* But if **you continue to feel down or self-destructive and have an unusually strong or long-lasting reaction to an upsetting event**, then you may have an adjustment disorder.



Anxious? Depressed?

- An adjustment disorder is **a type of stress-related mental illness**. You may feel anxious or depressed, or even have thoughts of suicide. **Your normal daily routines may feel overwhelming**. Or you may make reckless decisions. In essence, ***you have a hard time adjusting to change in your life***, and it has serious consequences.



What are the symptoms?

- Adjustment Disorder symptoms **vary from person to person**. The symptoms you have may be different from those of someone else with and adjustment disorder. *But for **everyone**, symptoms of an adjustment disorder **begin within 3 months of a stressful event in your life.***



Emotional Symptoms

- Sadness
- Hopelessness
- Lack of Enjoyment
- Crying Spells
- Nervousness/Jitteriness
- Anxiety/Worry
- Trouble Sleeping
- Difficulty Concentrating
- Feeling Overwhelmed
- Thoughts of suicide



Behavioral Symptoms

- Fighting
- Reckless driving
- Ignoring bills
- Avoiding family or friends
- Performing poorly in school or at work
- Skipping school
- Vandalizing property



What causes Adjustment Disorder?

- A divorce or relationship breakup
- A death in the family
- Moving to a new home
- Starting a different school
- Having a baby
- Retirement
- Surviving a disaster
- A job loss
- Financial problems
- Physical assault
- A big life disappointment



- In some cases, people who face an **ongoing stressful situation** – such as living in a crime-ridden neighborhood can reach a breaking point and develop an adjustment disorder



Isn't this normal?

- While it is normal to experience feelings of sadness and anxiety after events such as these, those with an adjustment disorder experience **marked distress, in excess of what would be expected from exposure to the event**



Who is at risk?

- Like all of the disorders we will discuss this semester, **no one is immune** from adjustment disorder. However, certain risk factors do make someone **more likely** to develop an adjustment disorder. Risk factors include:
 - *You generally don't cope well with change*
 - *Lack of a strong support system (friends & family)*
 - *If you experiences severe stress in early childhood*
 - *Overprotective or abusive parenting*

Who else is at higher risk?

- *Family disruptions or frequent moves early in life may make you feel like you're unable to control events in your life*
- *Other mental health problems*
- *Exposure to wars or violence*
- *Difficult life circumstances*



What qualifies for a diagnosis?

- If symptoms occur **within 3 months** of a stressful event or change, and **last no more than 6 months** after the stressor ends

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What if it lasts longer?

- **Most** adults with adjustment disorder **get better within 6 months** and don't have long-term complications. However, people who also have other mental health issues, a substance abuse problem or a chronic adjustment disorder are more likely to have long-term mental health problems, which may include:
 - Depression
 - Alcohol and Drug addiction
 - Suicidal thoughts and behavior

Teens with Adjustment Disorder

- Compared with adults, **teens** with this disorder – especially chronic adjustment disorder marked by behavioral problems – **are at a significantly increased risk of long-term problems.**



Other Problems

- In addition to **depression, substance abuse and suicidal behavior**, teenagers are at a risk of developing psychiatric disorders such as:
 - Schizophrenia
 - Bipolar Disorder
 - Antisocial Personality Disorder



When to see a doctor

- Sometimes the stressful change in your life goes away, and your symptoms of adjustment disorder get better because the stress has eased. But **often, the stressful event remains a part of your life. Or a new stressful situation comes up, and you face the same emotional struggles all over again.**
- **Talk to your doctor if you're having trouble getting through each day.** *You can get treatment to help you cope better with stressful events and feel better about life again!*

Treatment

- Most people find treatment of adjustment disorder helpful, and they **often need only brief treatment**. Others may benefit from longer treatment. There are 2 main types of treatment for adjustment disorder – **psychotherapy** and **medications**

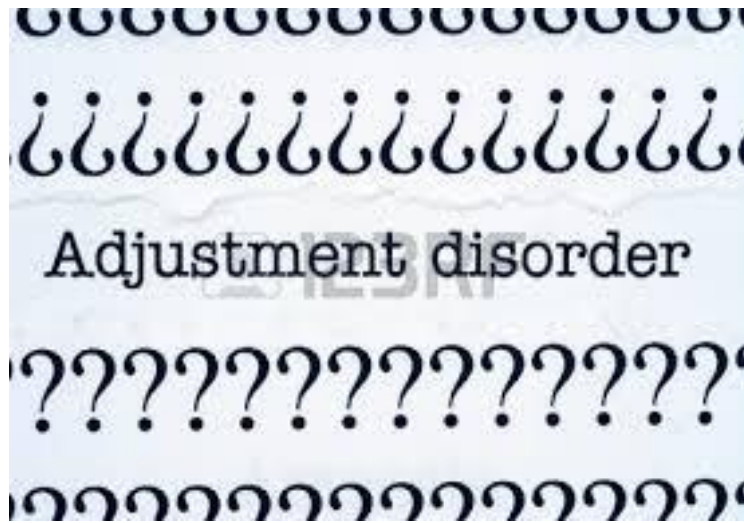


Psychotherapy

- The main treatment for adjustment disorders is psychotherapy, also called **counseling** or **talk therapy**.
- You may attend **individual** therapy, **group** therapy, or **family** therapy.
- Therapy can provide emotional support and help you get back to your normal routine.



- Therapy can **also help you learn why the stressful event affected you so much**. As you understand more about this connection, you can **learn healthy coping skills to help you deal with other stressful events that may arise**.



Medications

- In some cases, medications may help, too. Medications can help with such symptoms as depression, anxiety and suicidal thoughts. **Antidepressants** and **anti-anxiety** medications are most often used to treat adjustment disorders.



Do what works for you

- Sometimes therapy and/or medication are not necessary. Some things you can do to help with an adjustment disorder include:
 - **Talk things over** with caring family and friends
 - Try to keep eating a **healthy diet**
 - Stick to a **regular sleep routine**
 - Get regular **physical activity**
 - Engage in a **hobby/activity you enjoy**
 - Find a **support group** geared toward your situation
 - Find support from a **faith community**

Always Consult your Doctor

- As with therapy, you may need medications only for a few months, but **don't stop taking any medication without talking with your doctor first**. If stopped suddenly, some medications, may cause withdrawal symptoms.



Take control of Your Life

- When you face a stressful event or major life change, **take steps to care for your emotional well-being.** **Talking about your feelings** and **asking for help** is important to aid your recovery from an adjustment disorder or any of the disorders we will discuss this semester.

**TAKE
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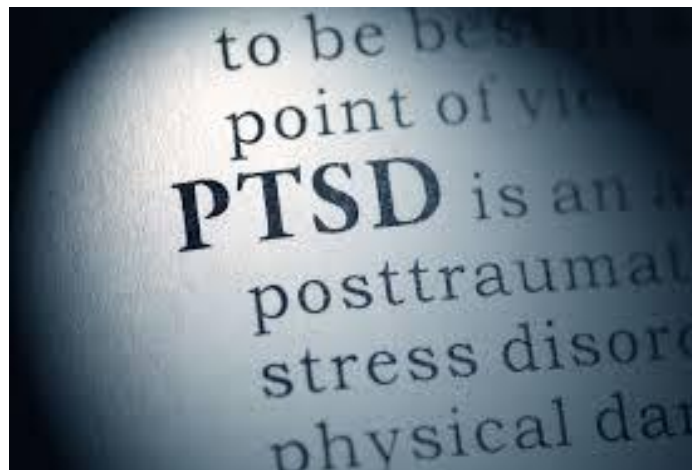
Post-Traumatic Stress Disorder (PTSD)

- Post-traumatic stress disorder (PTSD) is **a mental health condition that's triggered by a terrifying event - either experiencing it or witnessing it.**
- Symptoms may include flashbacks, nightmares and severe anxiety, as well as uncontrollable thoughts about the event.



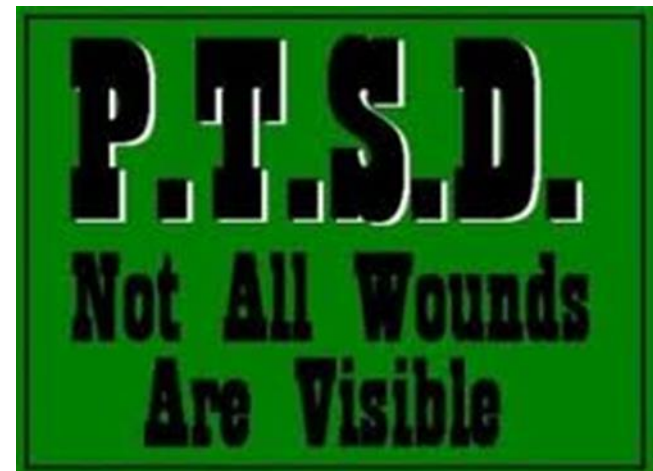
Adjustment Disorder vs. PTSD

- Many people who go through traumatic events have **difficulty adjusting and coping for a while**, but don't have PTSD - with time and good self-care, they usually get better.
- But **if the symptoms get worse or last for months or even years** and interfere with your functioning, **you may have PTSD.**



What are the symptoms of PTSD?

- Post-traumatic stress disorder symptoms **may start within three months of a traumatic event, but sometimes symptoms *may not appear until years after the event.***
- These symptoms cause significant problems in social or work situations and in relationships.



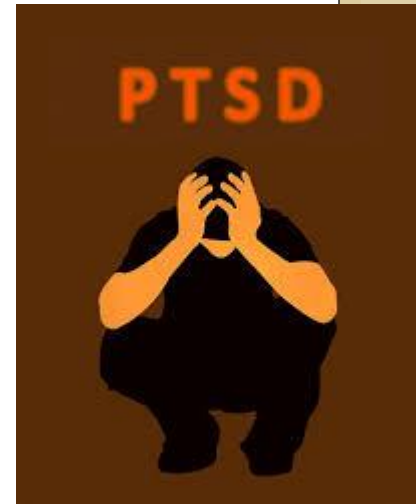
4 Types of Symptoms

- PTSD symptoms are generally grouped into four types: ***intrusive memories, avoidance, negative changes in thinking and mood, or changes in emotional reactions.***



Intrusive Memories

- Symptoms of *intrusive memories* may include:
- Recurrent, **unwanted distressing memories** of the traumatic event
- **Reliving the traumatic event** as if it were happening again (flashbacks)
- **Upsetting dreams** about the traumatic event
- **Severe emotional distress or physical reactions to something that reminds you of the event**



Avoidance

- Symptoms of *avoidance* may include:
- Trying to **avoid thinking or talking about** the traumatic event
- **Avoiding places, activities or people that remind you** of the traumatic event



Negative Changes in Thinking & Mood

- Negative feelings about yourself or other people
- Inability to experience positive emotions
- Feeling emotionally numb
- Lack of interest in activities you once enjoyed
- Hopelessness about the future
- Memory problems, including not remembering important aspects of the traumatic event
- Difficulty maintaining close relationships



Changes in Emotional Reactions

- Irritability, angry outbursts or aggressive behavior
- Always being on guard for danger
- Overwhelming guilt or shame
- Self-destructive behavior, such as drinking too much or driving too fast
- Trouble concentrating
- Trouble sleeping
- Being easily startled or frightened



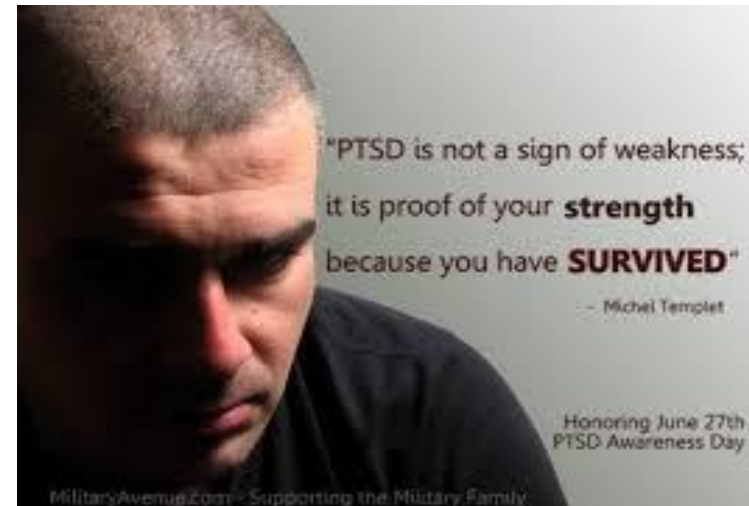
What triggers the symptoms?

- PTSD symptoms can vary in intensity over time. You may have more PTSD symptoms ***when you're stressed in general, or when you run into reminders of what you went through.***
- For example, **you may hear a car backfire and relive combat experiences.** Or you may see a report on the news about a sexual assault and feel overcome by memories of your own assault.



When is it time to get help?

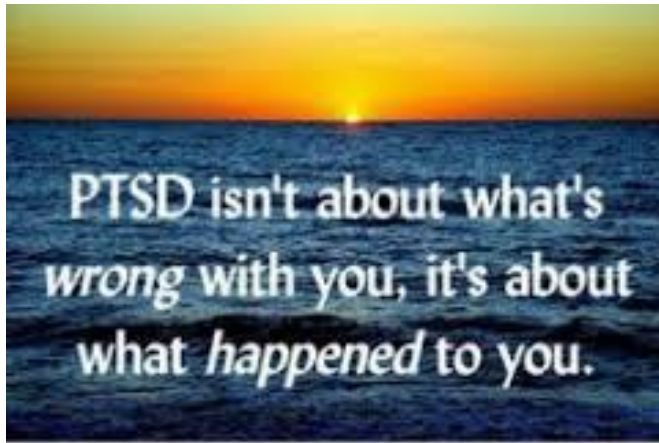
- If you have disturbing thoughts and feelings about a traumatic event for **more than a month**, if they're **severe**, or if you feel you're **having trouble getting your life back under control**, talk to your health care professional. Get treatment as soon as possible to help prevent PTSD symptoms from getting worse.



What causes PTSD?

- You can develop post-traumatic stress disorder **when you go through, see or learn about an event involving actual or threatened death, serious injury or sexual violation.**
- Doctors aren't sure why some people get PTSD. As with most mental health problems, PTSD is probably caused by a complex mix of several factors:





Why some and not others?

- Having **biological (blood) relatives** with mental health problems, including PTSD or depression
- **Life experiences**, including the **amount and severity of trauma you've gone through** since early childhood
- **Inherited aspects of your personality** — often called your **temperament**
- The way your **brain** regulates the **chemicals** and **hormones** your body releases in response to stress

Other Risk Factors

- Experiencing **intense or long-lasting trauma**
- Having experienced **other trauma earlier in life**, including **childhood abuse or neglect**
- Having **a job that increases your risk of being exposed to traumatic events**, such as **military** personnel and **first responders**
- Having **other mental health problems**, such as anxiety or depression
- **Lacking a good support system** of family and friends

What kinds of traumatic events lead to PTSD?

- The most common events leading to the development of PTSD include:
 - **Combat exposure**
 - **Childhood neglect and physical abuse**
 - **Sexual assault**
 - **Physical attack**
 - **Being threatened with a weapon**



Other types of traumatic events

- Many other traumatic events also can lead to PTSD, such as ***fire, natural disaster, mugging, robbery, car accident, plane crash, torture, kidnapping, life-threatening medical diagnosis, terrorist attack, and other extreme or life-threatening events.***



Effect on your daily life

- Post-traumatic stress disorder **can disrupt your whole life: your job, your relationships, your health and your enjoyment of everyday activities.**



Other Mental Health problems

- Having PTSD also **may increase your risk of other mental health problems**, such as:
 - **Depression** and **anxiety**
 - Issues with **drugs** or **alcohol use**
 - **Suicidal thoughts** and actions



What kinds of treatment can help with PTSD?

- Post-traumatic stress disorder **treatment can help you regain a sense of control over your life**. The primary treatment is **psychotherapy**, but often includes **medication**.



What kinds of therapy?



- **Cognitive therapy.** This type of talk therapy helps you recognize the ***ways of thinking*** (cognitive patterns) **that are keeping you stuck** - for example, **negative or inaccurate ways of perceiving normal situations**. For PTSD, cognitive therapy often is used along with exposure therapy.

Exposure Therapy

- **Exposure therapy helps you safely face what you find *frightening*** so that you can learn to cope with it effectively. One approach to exposure therapy uses "**virtual reality**" programs that allow you to re-enter the setting in which you experienced trauma.



Medication

- **Antidepressants, Anti-anxiety medication**, as well as **drugs to help you sleep** (if experiencing insomnia and recurrent nightmares) may all be prescribed to help with PTSD.



Taking Care of Yourself

- With or without therapy and medication, it is important to take steps to take care of yourself if you have PTSD.
- This may include **exercise, seeking out others who will listen, joining a support group, and *not* self-medicating** (turning to drugs or alcohol to numb your feelings)



What is Reactive Attachment Disorder (RAD)?

- Reactive attachment disorder (RAD) is **a rare but serious condition in which an infant or young child doesn't establish healthy attachments with parents or caregivers.**



- Reactive attachment disorder **may develop if the child's basic needs for comfort, affection and nurturing aren't met and loving, caring, stable attachments with others are *not* established.**



RAD in early childhood

- Reactive attachment disorder (RAD) **can start in infancy.**
- There's little research on signs and symptoms of RAD beyond early childhood, **and it remains uncertain whether it occurs in children older than 5 years.**



Signs & Symptoms of RAD

- Withdrawal, fear, sadness or irritability that is **not readily explained**
- Sad and listless appearance
- **Not seeking comfort or showing no response when comfort is given**
- Failure to smile



- Watching others closely but **not engaging in social interaction**
- Failing to ask for support or assistance
- Failure to reach out when picked up
- No interest in playing peekaboo or other interactive games



Can be confused with ASD

- Reactive attachment disorder is **rare**.
- **Signs and symptoms** can occur in children who don't have reactive attachment disorder or who have another disorder such as **autism spectrum disorder**.



What causes RAD?

- To **feel safe and develop trust**, infants and young children **need a stable, caring environment**. Their basic emotional and physical **needs must be consistently met**.
- For instance, **when a baby cries**, his or her need for a meal or a diaper change must be met with a shared emotional exchange that may include **eye contact, smiling and caressing**.



Emotional Needs not Met

- A child whose **needs are ignored or met with a lack of emotional response from caregivers does not come to expect care or comfort** or form a stable attachment to caregivers.



Are some babies just more resilient?

- **Most children are naturally resilient, and even those who've been neglected, lived in orphanages or had multiple caregivers can develop healthy relationships.** *It's not clear why some babies and children develop reactive attachment disorder and others don't.*



A lot more needs to be learned

- Various theories about RAD and its causes exist, and **more research is needed** to develop a better understanding and improve diagnosis and treatment options.



So what kids are most at risk?

- The risk of developing reactive attachment disorder from **serious social and emotional neglect** or the **lack of opportunity to develop stable attachments** may increase in children who:
 - Live in a **children's home** or **other institution**
 - **Frequently change foster homes** or **caregivers**
 - Have ***inexperienced parents***



- Have ***prolonged separation*** from parents or other caregivers **due to hospitalization**
- Have a **mother with *postpartum depression***
- Are part of an ***unusually large family***, such that **parental time is scarce or available unequally or rarely**



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Despite this...

- However, **most children who are severely neglected *don't* develop reactive attachment disorder.**



Treatment for RAD



- Children with RAD are believed to ***have the capacity to form attachments***, but this ability has been compromised by their experiences.
- The **best treatment** for a child with reactive detachment disorder is ***a positive, loving, stable, caring environment and caregiver.***

Sources

- *Psych Central.com*
- *Mayo Clinic.org*
- *American Psychological Association.org*