

Posttraumatic stress injury and you

It's okay to ask for help!

If you're struggling or find the content upsetting, speak to a parent, therapist, school counsellor or another trusted adult. They can share tips and ideas to help you feel better. There are other resources available to you too:

- ▶ **Kids Help Phone:** Call 1-800-668-6868 or text CONNECT or CAFKIDS to 686868
- ▶ **Family Information Line:** Call 1-800-866-4546 or email FIL@CAFconnection.ca
- ▶ **Dial 911** if you or someone you know is in immediate danger

It may feel tough to reach out for help, but support will be there if you need it.

What is trauma?

When someone sees, experiences or hears about deeply distressing, shocking or disturbing events, it can have a lasting emotional impact. This response is called **trauma**. Sometimes trauma comes from many little things over time, rather than one big thing.

These things can be extreme and even life-threatening, but may not always involve disaster or death. Things like discrimination or bullying can also lead to trauma.

People do not need to experience a traumatic event first-hand. Reading or hearing about these events can also lead to trauma.

Everyone is different. Two people can experience the same situation or event and only one may have trauma as a result.



Most people who experience trauma will recover over time.

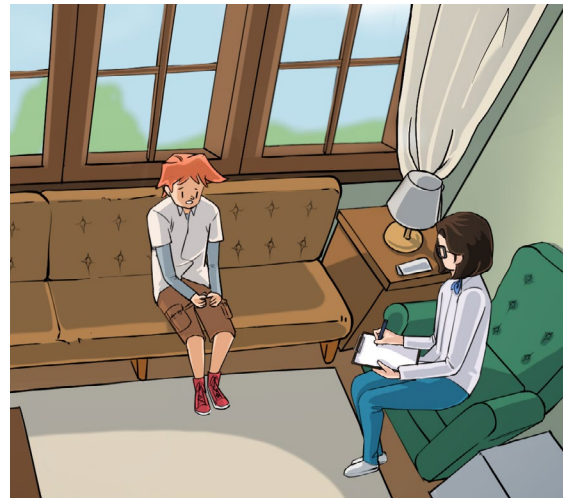
Sometimes, people develop mental health challenges or conditions related to trauma, such as posttraumatic stress disorder. This can happen immediately after traumatic events, or after a longer period such as weeks, months and even years.

Talking about trauma can be difficult and confusing

You may hear terms like posttraumatic stress injury, operational stress injury or posttraumatic stress disorder. These terms may come up when your loved one talks about their mental health.

On the other hand, you may not hear any of these terms, even if you notice something is different with your loved one.

There are many reasons for this – your loved one might not recognize the signs and symptoms or they might not think they are experiencing a mental health challenge or condition, they may want to protect you or they may worry about how you or others will respond if they admit they are having a tough time.



A specific tool is used to diagnose mental health conditions

One tool that medical professionals can use to diagnose a mental health condition is the *Diagnostic and Statistical Manual of Mental Disorders* (or DSM for short).

You can think of the DSM like an encyclopedia for mental health conditions. It contains many conditions – including PTSD – and describes the signs and symptoms that someone experiencing each condition might have. To be diagnosed with a mental health condition, a person needs to show certain signs and symptoms for a specific length of time.

You may be wondering what all of these terms mean

They all refer to something that happens after being exposed to a traumatic event, but each means something slightly different:

Posttraumatic stress injury

Posttraumatic stress injury (or PTSI for short) is a broad term that refers to any kind of mental health challenge or condition that happens after someone experiences, sees or hears about a traumatic event. You don't need a diagnosis to have a PTSI.

Operational stress injury

Operational stress injury (or OSI for short) is a more specific term that refers to any kind of mental health challenge or condition that happens after someone experiences, sees or hears about a traumatic event as part of their job. You don't need a diagnosis to have an OSI.

Posttraumatic stress disorder

Posttraumatic stress disorder (or PTSD for short) is a specific type of mental health condition that can happen after someone experiences, sees or hears about a traumatic event. PTSD is diagnosed by a licensed medical professional based on specific signs, symptoms and behaviours.

Let's break down these terms even more:

Word	Definition	This means....
Post	Post refers to after.	Posttraumatic is after something deeply distressing, shocking or disturbing happens.
Traumatic	Traumatic describes something as deeply distressing, shocking or disturbing.	
Stress	Stress is your body's response to challenges.	The body may negatively respond to traumatic events.
Operational	Operational describes job-related activities, particularly in the military or emergency response services.	The traumatic events occurred during work or service.
Injury	An injury is damage or harm to your body, including your brain.	Traumatic events can lead to physical or mental harm.
Disorder	A disorder is a medical term that describes a condition affecting your body and/or brain.	A diagnosable mental health condition may develop after traumatic events.

Here are some examples of how these terms may be used:

- 1 Emma's mom was in the Air Force. She said her PTSD came from seeing very stressful events happen to other people throughout her career, though she never talked about it at the time. Emma's mom is getting help from doctors, her peers and from mental health professionals.
- 2 Alex's big brother used to be a Mountie. Over the years, Alex's brother witnessed a lot of car accidents and told Alex that on a couple of occasions he even had to use a weapon during a police chase. These events created a lot of stress for him over time, which affected his mental health. Alex's brother uses the term "OSI" to describe his current mental health state.

When it comes to PTSD, the DSM lists four main types of symptoms:

You may notice some or all of these symptoms if your loved one has a PTSI or OSI.



1. Re-experiencing events

Your loved one may have flashbacks or nightmares where they feel like they're back in the traumatic experience. They might also have trouble paying attention because of certain thoughts or pictures popping into their head, distracting them from what they're doing.



2. Avoiding specific activities and experiences

Your loved one may avoid doing things that remind them of the trauma. For example, they might not want to do things they used to enjoy doing, like going to the movies, being at a concert or attending a sports game because of big crowds. They might spend more time alone than before. They might also use alcohol or other things to avoid bad feelings and thoughts.



3. Having negative thoughts and moods

Your loved one may get upset or more easily show other emotions, like worry or sadness. They may seem as if they are in a bad mood most of the time or may even stop showing their emotions.



4. Being on edge and reactive most of the time

Your loved one may have a quick temper and get angry easily. This can make certain activities feel more stressful. They may also act "on edge" or "suspicious" of things being unsafe. They may do things they feel make themselves and their Family safer, like putting up security systems in the home or texting you several times when you're out to check on you.

It's important to reflect on how you're feeling too

When someone you love has PTSD or experiences a PTSI or an OSI, it can be stressful for you and other Family members. It may feel like a rollercoaster of emotions.

It's important to know that everyone reacts differently and there is no right way to think, feel or act. Your responses are normal and okay.

There may be times when you need to ask for help because things feel so overwhelming or you can't seem to shake a negative emotion and that's okay too. There are people and places where you can get helpful tips and strategies to help you feel better.

Here are some of the ways you may be affected:

You may experience some, all or none of these.



Thoughts

- ▶ My loved one will never get better
- ▶ My loved one will never be the same
- ▶ My Family will never be like it was
- ▶ My loved one's symptoms are my fault
- ▶ My Family member doesn't love me anymore
- ▶ I need to fix the situation



Feelings

- ▶ Confusion
- ▶ Betrayal
- ▶ Anger
- ▶ Resentment
- ▶ Embarrassment
- ▶ Disappointment
- ▶ Sadness
- ▶ Loss or grief (e.g. grieving your life before)
- ▶ Hopelessness
- ▶ Worthlessness
- ▶ Tension or fear (e.g. feeling like you're walking on eggshells)
- ▶ Lack of emotions (e.g. feeling numb)



Behaviours

- ▶ Being overly alert about your loved one's symptoms
- ▶ Working to please others – even when it hurts you
- ▶ Avoiding your Family and friends
- ▶ Having difficulty making or keeping relationships
- ▶ Finding it hard to bond with your loved one or other Family members
- ▶ Acting older or younger than your age
- ▶ Over- or under-achieving at school and other areas of your life
- ▶ Copying behaviour (e.g. acting like your loved one to connect with them)
- ▶ Not wanting to participate in your extracurricular activities and hobbies
- ▶ Doing risky things (e.g. taking drugs)
- ▶ Acting out (e.g. skipping school, lying)
- ▶ Being aggressive or violent (e.g. bullying others)
- ▶ Harming yourself
- ▶ Having thoughts of suicide
- ▶ Experiencing symptoms of trauma yourself (e.g. feeling on-edge or easily reactive)
- ▶ Experiencing physical symptoms like stomach aches, headaches or extreme tiredness
- ▶ Eating too much or too little



Your day-to-day life might be different from before

With all of these changes, your day-to-day life might be different from how it was before. These changes may feel stressful, especially at first. Keep in mind that change can lead to positive results, like learning new skills or finding new ways to do things. Here are some of the ways your life may change:



Changing routines

Your usual Family activities may change slightly to make them more PTSD-friendly. For example, instead of going to the movie theatre, you might have movie night at home.

You or your Family members might go to therapy after school, on your own or together as a group.

Your loved one might be away from home for a period while they get the help they need.

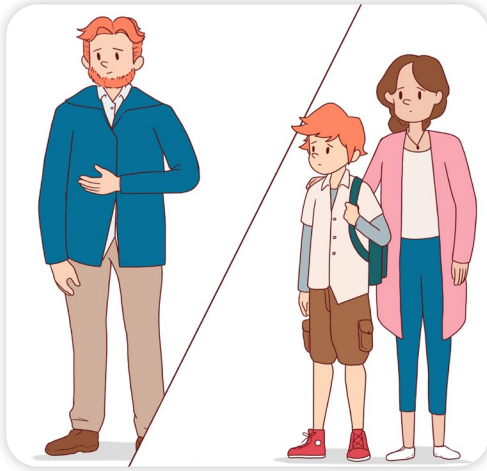
You may spend more time doing things with other Family members.



Shifting roles and responsibilities

You or your other Family members may take on new tasks that you never did before, like picking up medication or driving to and from appointments.

You may pick up some additional chores, like cooking dinner or mowing the lawn, to help around the house.



Family functioning

You may feel like it's more difficult to communicate with your Family members at times. For example, you might not talk as much as you used to.

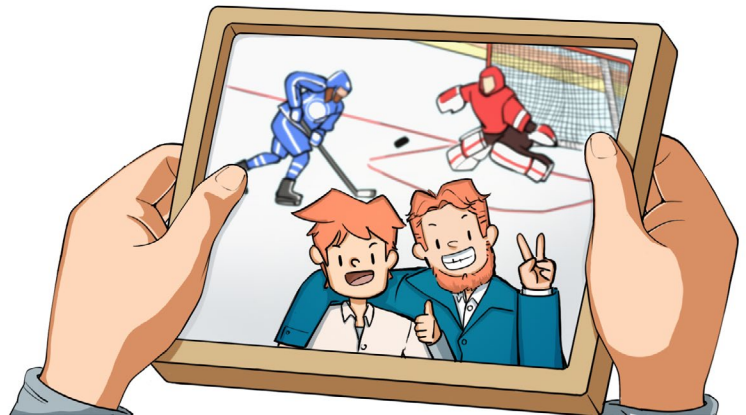
It may feel like you don't get along with your Family as well as before or that there's more conflict.

Certain activities, like driving to school, may become more stressful and start to feel more like a burden.

You may start to feel closer to your Family as you adapt to the changes.

Three important things to always keep in mind:

- 1 It's not your fault.
- 2 It's not your responsibility to "fix" the situation. There are many different treatment and support options available.
- 3 Your Family member still loves you!



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