



Healing Trauma's Invisible Wounds

A Program of Mental Health America

2012 Mental Health Month Toolkit



Healing Trauma's Invisible Wounds

DEAR COLLEAGUES,

For more than 50 years, Mental Health America and their hundreds of affiliates from around the country have led the observance of May is Mental Health Month by reaching millions of people through the media, local events and screenings. This unified effort includes educational messages about mental health and substance use conditions and the importance of mental health. For 2012 Mental Health America will be using two brand "platforms" as themes rather than one specific May is Mental Health Month theme.

This toolkit features the theme *Healing Trauma's Invisible Wounds*. This platform resonates with the 2012 MHA Bell of Hope Project's goal to build a nationwide Military Community Peer Assistance Network to address the ongoing mental health crisis among the nation's military community, which includes active duty service members, National Guard, Reserve, veterans and their collective dependents.

MHA Affiliates are welcome to use either of the two platforms throughout the year as stand-alone themes or as supporting themes for specific treatment/recovery programs or wellness programs in their local areas.

This toolkit includes:

- Key Messages
- Positive Steps for Prevention, Education, Treatment and Policy
- Flyer/Poster
- Swiss Cheese Press Release
- Drop-In Article
- Sample Mayoral Proclamation
- Fact Sheets
 - Post-Traumatic Stress Disorder
 - Trauma by the Numbers
 - Understanding Trauma

MHA Affiliates are welcome to use these materials as they see fit to supplement their May is Mental Health Month efforts or other programs during the year.



Healing Trauma's Invisible Wounds

Key Messages

A New Understanding of Trauma

Until recently, trauma survivors were largely unrecognized by the formal treatment system. The costs of trauma and its aftermath to victims and society were not well documented. Inadvertently, treatment systems may have frequently re-traumatized individuals and failed to understand the impact of traumatic experiences on general and mental health. Today, the causes of trauma—sexual abuse, violence in families and neighborhoods, and the impact of war, for example—are matters of public concern. Trauma survivors have formed self-help groups to heal together. Researchers have learned how trauma changes the brain and alters behavior. A movement for trauma-informed care has emerged to ensure that trauma is recognized and treated and that survivors are not re-victimized when they seek care. Complementing these changes are programs to promote healthy development of children and healthy behaviors in families, schools and communities that reduce the likelihood of trauma.

Key Messages

- The aftermath of trauma is costly to victims and to the whole community.
- Healing from trauma is possible. Validating the trauma and establishing trust and safety are the first steps.
- Trauma survivors need healing, not just treatment.
- Addressing trauma is key to successfully treating self-harming and risky behaviors.
- Coercive and disempowering practices in traditional behavioral health treatment and in schools, correctional facilities, foster care, jails and prisons can re-victimize trauma survivors.
- Trauma-informed care is an approach to engaging people with histories of trauma that acknowledges the role that trauma has played in their lives and treats symptoms as reflecting this experience.
- Screening for trauma is essential, especially for high-risk and vulnerable populations. The key question to ask is “what happened to you?” not “what’s wrong with you?” Mental health systems, correctional systems, and other local human service agencies are revamping practices to adopt trauma-informed care.
- Data supports the need for broad-based programs and policies that help to reduce child maltreatment as well as enhance positive family functioning.



Positive Steps for Prevention, Education, Treatment and Policy

Communities and Community-based Organizations

1. Identify sub-groups in your community who have experienced trauma, such as abused and neglected children, victims of violent crime and assault, refugees, veterans and minority groups.
2. Educate the community on reporting child abuse, domestic abuse and hate crimes.
3. Educate young women and other vulnerable groups on safety and self-defense.
4. Support the formation of mutual support groups for survivors of different forms of trauma: childhood abuse, crime and violence, rape and violence against women and vets.
5. Advocate for and strengthen local policies and programs to protect and shelter trauma victims.
6. Recognize trauma experiences among first responders.
7. Learn about prevention programs in the community and schools to promote positive parenting and healthy behaviors in children and adolescents.

Mental Health Administrators and Human Service Providers

1. Understand and recognize the signs and behaviors associated with trauma.
2. Screen for trauma history.
3. Introduce trauma-informed care to change practices and eliminate coercive and disempowering practices.
4. Eliminate re-traumatizing treatments such as seclusion and restraint
5. Establish trauma healing groups and promote peer-led survivor groups.
6. Establish shelters for battered women and other vulnerable groups.

State Health and Mental Health Directors

1. Educate direct service staff about the signs and behaviors associated with trauma.
2. Eliminate services that re-traumatize individuals (e.g. seclusion and restraint)
3. Screen patients for trauma history.
4. Promote public messages that trauma victims should not suffer silently and healing is possible.
5. Educate state and local agencies on trauma-informed practices.
6. Support creation of trauma healing groups and peer-led survivor groups.
7. Promote cost-effective prevention programs in schools and communities to promote healthy behaviors in order to reduce the incidence of trauma.

Policymakers

1. Recognize the emotional as well as financial toll that unaddressed trauma takes on citizens and society.
2. Encourage the study and adoption of trauma-informed practices by state and local agencies.
3. Promote policies and programs that reduce child maltreatment and interpersonal violence.
4. Promote cost-effective prevention programs in schools and communities to promote healthy behaviors in order to reduce the incidence of trauma.



can affect anyone.

HEALING

**is possible for
*everyone.***

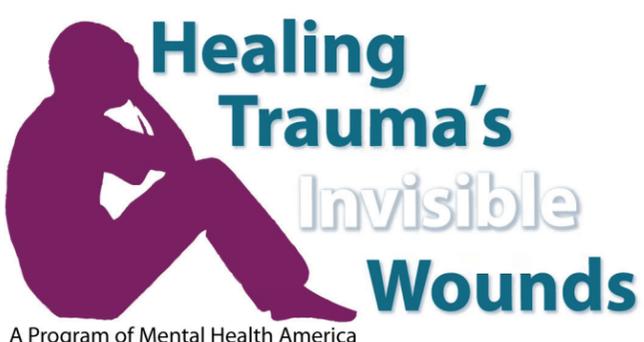
A traumatizing experience can happen to an individual at any age, or to an entire community.

Some of the most common causes of trauma include:

- Living under threat
- Childhood sexual, physical or emotional abuse or neglect
- Experiencing violence
- Being bullied
- Living through a natural disaster, war or other form of upheaval
- Serving in combat
- Witnessing something terrible happen to another person or group of people

The good news is that the invisible wounds caused by traumatic experiences can heal. With the proper treatment, support and self-care, recovery is possible for everyone.

If you or a loved-one need help healing from trauma, visit www.mentalhealthamerica.net to locate the MHA Affiliate nearest you and begin your journey to recovery.



SAMPLE PRESS RELEASE

FOR IMMEDIATE RELEASE:

CONTACT:

Mental Health Month Raises Awareness of Trauma and Impact on Children, Families, Communities *Healing the Invisible Wounds*

This May is Mental Health Month, [Affiliate] is raising awareness of trauma, the devastating impact it has on physical, emotional, and mental well-being, and how therapeutic techniques based in neuroscience can mitigate these effects and create dramatic changes in people's lives.

A traumatic event—which threatens our lives, our safety or our personal integrity—can affect us profoundly.

“Most people think that “trauma” refers to physical trauma that occurs as a result of a car accident or assault,” said [NAME, POSITION, AFFILIATE]. “But it’s much more than that.”

Trauma includes:

- Interpersonal violence – such as abuse, rape, domestic violence, and bullying;
- Social violence — such as war, terrorism, and living under oppressive political regimes;
- Natural disasters and accidents — such as hurricanes, floods, earthquakes, tornadoes, and auto crashes;
- Serving in combat;
- Chronic social stressors – such as racism, sexism, poverty, humiliation and cultural dislocation;
- Childhood trauma—including physical, emotional and sexual abuse; emotional and physical neglect; a parent who’s an alcoholic or addicted to other drugs; a mother who’s been battered; a family member in prison or diagnosed with mental illness; and a loss of a parent through divorce or abandonment.

Trauma has tremendous human and societal costs. Trauma is the leading cause of the death of children in this country. The effect of trauma on productive life years lost exceeds that of any other disease. The economic cost of 50 million injuries in the year 2000, alone, was \$406 billion. This includes estimates of \$80 billion in medical care costs, and \$326 billion in productivity losses. And the predicted cost to the health care system from interpersonal violence and abuse ranges between \$333 billion and \$750 billion annually, or nearly 17 to 37.5 percent of total health care expenditures.

“As a society, we are just beginning to deal with trauma—bringing it out of the shadows, finding new ways of healing its wounds, and casting off the shame that prevents trauma survivors from seeking help,” said [NAME].

When children or adults respond to these traumas with fear, horror and/or helplessness, the extreme stress is toxic to their brains and bodies, and overwhelms their ability to cope, [NAME] said. While many people who experience a traumatic event are able to move on with their lives without lasting negative effects, others may have more difficulty managing their responses to trauma.

Unresolved trauma can manifest in many ways, including anxiety disorders, panic attacks, intrusive memories (flashbacks), obsessive-compulsive behaviors, Post-Traumatic Stress Disorder, addictions, self-injury and a variety of physical symptoms. Trauma increases health-risk behaviors such as overeating, smoking, drinking and risky sex. Trauma survivors can become perpetrators themselves.

[NAME] said unaddressed trauma can significantly increase the risk of mental and substance use disorders, suicide, chronic physical ailments, as well as premature death.

Until recently, trauma survivors were largely unrecognized by the formal treatment system. The costs of trauma and its aftermath to victims and society were not well documented. Inadvertently, treatment systems may have frequently re-traumatized individuals and failed to understand the impact of traumatic experiences on general and mental health.

“Today, the causes of trauma—sexual abuse, violence in families and neighborhoods, and the impact of war, for example—are matters of public concern,” said [NAME]. “But more needs to be done to recognize the devastating impact of trauma and successful approaches to treatment.

Many trauma survivors have formed self-help groups to heal together. Researchers have learned how trauma changes the brain and alters behavior.

A movement for trauma-informed care has emerged to ensure that trauma is recognized and treated and that survivors are not re-victimized when they seek care.

“It is critical that these efforts strengthened and we heal the invisible wounds of trauma,” [NAME] said. “They are crucial to promoting the healthy development of children and healthy behaviors in families, schools and communities that reduce the likelihood of trauma.”

Mental Health Month was created more than 50 years by [AFFILIATE’S] national organization, Mental Health America, to raise awareness about mental health conditions and the importance of mental wellness for all.

[Description of local MHA affiliate]

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Healing Trauma's Invisible Wounds

Drop-In Article

It could be a rape or bullying or poverty or neglect or a hurricane or mass tragedy. Whatever the cause, a traumatic event has a devastating impact on physical, emotional and mental well-being. Communities can be traumatized, as well.

This May as part of the annual Mental Health Month activities, [Affiliate] is raising awareness of trauma, the human and societal costs, and how therapeutic techniques based in neuroscience can mitigate these effects and create dramatic changes in people's lives.

Most people think that "trauma" refers to physical trauma that occurs as a result of a car accident or assault. But it's much more than that. Trauma includes interpersonal violence just as abuse and bullying; social violence such as war and terrorism; natural disasters and accidents; serving in combat; stressors such as poverty and humiliation; and childhood trauma, which includes physical, emotional and sexual abuse, and difficult family relationships.

Trauma takes a huge toll on lives and health. Trauma is the leading cause of the death of children in this country. The effect of trauma on productive life years lost exceeds that of any other disease. The economic cost of 50 million injuries in the year 2000, alone, was \$406 billion. This includes estimates of \$80 billion in medical care costs, and \$326 billion in productivity losses. And the predicted cost to the health care system from interpersonal violence and abuse ranges between \$333 billion and \$750 billion annually, or nearly 17 to 37.5 percent of total health care expenditures.

As a society, we are just beginning to deal with trauma—bringing it out of the shadows, finding new ways of healing its wounds, and casting off the shame that prevents trauma survivors from seeking help.

When children or adults respond to traumas with fear, horror and/or helplessness, the extreme stress is toxic to their brains and bodies, and overwhelms their ability to cope. While many people who experience a traumatic event are able to move on with their lives without lasting negative effects, others may have more difficulty managing their responses to trauma.

Unresolved trauma can manifest in many ways, including anxiety disorders, panic attacks, intrusive memories (flashbacks), obsessive-compulsive behaviors, Post-Traumatic Stress Disorder, addictions, self-injury and a variety of physical symptoms. Trauma increases health-risk behaviors such as overeating, smoking, drinking and risky sex. Trauma survivors can become perpetrators themselves.

Unaddressed trauma can significantly increase the risk of mental and substance use disorders, suicide, chronic physical ailments, as well as premature death.

Until recently, trauma survivors were largely unrecognized by the formal treatment system. The costs of trauma and its aftermath to victims and society were not well documented. Inadvertently, treatment systems may have frequently re-traumatized individuals and failed to understand the impact of traumatic experiences on general and mental health.

Today, the causes of trauma—sexual abuse, violence in families and neighborhoods, and the impact of war, for example—are matters of public concern. But more needs to be done to recognize the devastating impact of trauma and successful treatment.

Many trauma survivors have formed self-help groups to heal together. Researchers have learned how trauma changes the brain and alters behavior.

A movement for trauma-informed care has emerged to ensure that trauma is recognized and treated and that survivors are not re-victimized when they seek care.

It is critical that these efforts strengthened and we heal the invisible wounds of trauma. They are crucial to promoting the healthy development of children and healthy behaviors in families, schools and communities that reduce the likelihood of trauma.



Sample Mental Health Month Proclamation

Encourage your local public officials to go on the record in support of mental health. Below, please find a sample proclamation that designates May as Mental Health Month. An official signing of a proclamation is a perfect occasion for a news event, photo opportunity or other activity.

Mental Health Month 2012 "Healing Trauma's Invisible Wounds"

WHEREAS, mental health is essential to everyone's overall health and well-being; and

WHEREAS, all Americans experience times of difficulty and stress in their lives; and

WHEREAS, prevention is an effective way to reduce the burden of mental health conditions; and

WHEREAS, there is a strong body of research that supports specific tools that all Americans can use to better handle challenges, and protect their health and well-being; and

WHEREAS, mental health conditions are real and prevalent in our nation; and

WHEREAS, with effective treatment, those individuals with mental health conditions can recover and lead full, productive lives; and

WHEREAS, each business, school, government agency, healthcare provider, organization and citizen shares the burden of mental health problems and has a responsibility to promote mental wellness and support prevention efforts.

THEREFORE, I [NAME OF PUBLIC OFFICIAL], do hereby proclaim May 2012 as Mental Health Month in [STATE OR COMMUNITY]. As the [TITLE OF LOCAL OFFICIAL], I also call upon the citizens, government agencies, public and private institutions, businesses and schools in [STATE OR COMMUNITY] to recommit our community to increasing awareness and understanding of mental health, the steps our citizens can take to protect their mental health, and the need for appropriate and accessible services for all people with mental health conditions.



Healing Trauma's Invisible Wounds

Fact Sheet: Post-Traumatic Stress Disorder (PTSD)

If you have lived through a terrible experience, it is normal to feel lots of emotions, such as distress, fear, helplessness, guilt, shame or anger. You may start to feel better after a few days or weeks, but sometimes, these feelings don't go away. If they last a long time or disrupt your life, you may have post-traumatic stress disorder (PTSD). PTSD is a real problem and can happen at any age, affecting children and nearly eight million American adults.

Who can be affected by PTSD?

- Anyone who was a victim of a life-threatening situation or has been exposed to one.
- Combat veterans or civilians exposed to war.
- Children who are neglected and/or abused (physically, emotionally, sexually or verbally).
- Survivors of violent acts, such as domestic violence, rape, bullying, sexual, physical and/or verbal abuse or physical attacks.
- Survivors of unexpected dangerous events, such as a car accident, natural disaster, or terrorist attack.
- People who have learned of or experienced an unexpected and sudden death of a friend or relative.
- Emergency responders who help victims during traumatic events.

What are the symptoms of PTSD?

For many people, symptoms begin almost right away after the trauma happens. For others, the symptoms may not begin or may not become a problem until years later. Three groups of symptoms define PTSD:

- **Reliving the trauma.** Thoughts about the trauma come to mind even when you don't want them to. You might also have nightmares or flashbacks about the trauma or may become upset when something reminds you of the event.
- **Being constantly on guard or hyper-aroused.** You may be easily startled or angered, irritable or anxious and pre-occupied with staying safe. You may also find it hard to concentrate or sleep or have physical problems.
- **Avoiding reminders of the trauma.** You may not want to talk about the event or be around people or places that remind you of the event. You also may feel emotionally numb, detached from friends and family, and lose interest in activities.

There are also other symptoms:

- **Panic attacks:** a feeling of intense fear, with shortness of breath, dizziness, sweating, nausea and racing heart.
- **Physical symptoms:** chronic pain, headaches, stomach pain, diarrhea, tightness or burning in the chest, muscle cramps or low back pain.
- **Feelings of mistrust:** losing trust in others and thinking the world is a dangerous place.
- **Problems in daily living:** having difficulty functioning in your job, at school, or in social situations.
- **Substance abuse:** using drugs or alcohol to cope with the emotional pain.
- **Relationship problems:** having problems with intimacy, or feeling detached from family and friends.
- **Depression:** persistently sad, anxious or empty mood; loss of interest in once-enjoyed activities; feelings of guilt and shame; or hopelessness about the future. Other symptoms of depression may also develop.
- **Suicidal thoughts:** thoughts about taking one's own life. If you or someone you know is thinking about suicide, call 911 or 1-800-273-TALK (8255).

How can I feel better?

PTSD can be treated successfully. Treatment, support and self-care are critical to your recovery. Although your memories won't go away, you can learn to manage your response to them and the feelings they bring up. You can also reduce the frequency and intensity of your reactions. Get evaluated by a mental health professional. If you are diagnosed with PTSD, you can recover with the help of:

Psychotherapy. Although it may seem painful to face the trauma you went through, doing so with the help of a mental health professional can help you get better. Several types of therapy are helpful, including cognitive processing therapy, exposure therapy and cognitive behavioral therapy. Couples counseling and family therapy will help others to understand and support you.

Medicine. such as selective serotonin reuptake inhibitors or SSRIs, is used to treat the symptoms of PTSD. It lowers anxiety and depression and helps with other symptoms. Sedatives can help with sleep problems. Anti-anxiety medicine may also help.

Support groups. Talking to other survivors of trauma similar to yours can be a helpful step in your recovery. You can share your thoughts to help resolve your feelings, gain confidence in coping with your memories and symptoms and find comfort in knowing you're not alone. Contact your local Mental Health America affiliate or go to www.mentalhealthamerica.net/go/go/find_support_group.

Self-care. Recovering from PTSD is an ongoing process. But there are healthy steps you can take to help you recover and stay well. Discover which ones help you feel better and add them to your life.

Helping a Family Member with PTSD

If PTSD is affecting your family, consider contacting a mental health professional for individual, couples or family counseling. Through counseling, you can get the help you and your family needs to cope and support each other. For a referral to local services, contact your local Mental Health America organization or Mental Health America at 800-969-6642. You can also visit www.mentalhealthamerica.net.

More on PTSD

Mental Health America
www.mentalhealthamerica.net/go/ptsd

National Center for Post-Traumatic Stress Disorder
(802) 296-5132
www.ncptsd.org

Veterans

MHA's Operation Healthy Reunions Military PTSD Information
www.mentalhealthamerica.net/reunions/resources.cfm

Make the Connection: Shared Experiences and Support
<http://maketheconnection.net>

Trauma Survivors

Sidran Institute
888-825-8249
www.sidran.org

Gift from Within
(207) 236-8858
www.giftfromwithin.org

Witness Justice
800-4WJ-HELP
www.witnessjustice.org/index.cfm

National Center for Victims of Crime (NCVC)
(202) 467-8700
www.ncvc.org

National Center for Trauma-Informed Care
<http://mentalhealth.samhsa.gov/nctic/trauma.asp>

National Suicide Prevention Lifeline
1-800-273-TALK (1-800-273-8255)



Healing Trauma's Invisible Wounds

Fact Sheet: Trauma by the Numbers

Childhood abuse, interpersonal violence, bullying, disaster, war and other traumatic events leave many people with psychological trauma that does not go away. It can have profound effects on emotional and mental well-being, how we relate to others, how we act, and even overall health. We are just beginning to grasp how many people are affected by trauma and the toll that it takes. These facts call attention to the extent of trauma and its human cost:

Childhood Trauma

- Severe trauma in early childhood affects all areas of development, including cognitive, social, emotional, physical, psychological and moral. The pervasive negative effects of early trauma result in significantly higher levels of behavioral and emotional problems among abused children than non-abused children.ⁱ
- Children exposed to early trauma due to abuse or neglect lag behind in school readiness and school performance, they have diminished cognitive abilities, and many go on to develop substance abuse problems, health problems and serious mental health disorders.ⁱⁱ
- The Department of Justice estimated that between 1 and 1.5 million children were assaulted, robbed, or raped in 1992. The Centers for Disease Control and Prevention reported that 8.7 million children under the age of 15 were seen in hospital emergency rooms for injuries in 1992.
- The U.S. Administration for Children and Families reported that 896,000 children confirmed victims of child abuse and neglect in 2002. Many of these children/youth suffered multiple forms of severe abuse and neglect but were only reported under one category.
- Between 75 and 93 percent of youth in the juvenile justice system have experienced some degree of trauma.ⁱⁱⁱ The U.S. Advisory Board reported that in 1995 near-fatal abuse and neglect each year leave 18,000 permanently disabled children, tens of thousands of victims overwhelmed by lifelong psychological trauma, thousands of traumatized siblings and family members, and thousands of near-death survivors who, as adults, continue to bear the physical and psychological scars. Some may turn to crime or domestic violence or become abusers themselves.^{iv}
- The 2010 Adverse Childhood Experiences (ACE) Study, an observational study of the relationship between trauma in early childhood and morbidity, disability, and mortality in the United States, demonstrated that trauma and other adverse experiences in are associated with lifelong problems in behavioral health and general health.^v

Crime, Violence and Sexual Abuse

- In 2006, according to the FBI, a robbery occurred every 1 second, forcible rape every 6 seconds, violent crime occurred every 22 seconds, murder every 31 seconds, and aggravated assault every 37 seconds. The estimated number of violent crime offenses was more than 1.4 million.
- Crime victims have a much higher lifetime incidence of posttraumatic stress disorder (PTSD) than people who have not been victimized (25% vs. 9.4%). Of crime victims diagnosed with PTSD, 37% also suffer from depression.^{vi}
- Predicted cost to the health care system from interpersonal violence and abuse ranges between \$333 billion and \$750 billion annually, or nearly 17% to 37.5% of total health care expenditures.^{vii}
- More than 6 in 10 U.S. youth have been exposed to violence within the past year, including witnessing violence, assault with a weapon, sexual victimization, child maltreatment, and dating violence. Nearly 1 in 10 was injured.^{viii}
- A survey in 2000 of American youth between the ages of 12 and 17 estimated that 1.9 million adolescents had been victims of sexual assault, 3.9 million had been victims of physical assault, and 8.8 million had witnessed violence.^{ix}

- A lifetime history of sexual abuse among women in childhood and adulthood ranges from 15 to 25 percent.^x An estimated 5 percent of males under the age of 18 experienced sexual victimization in the past year.
- One in every four women will experience domestic violence in her lifetime. Most cases of domestic violence are never reported to the police. An estimated 1.3 million women are victims of physical assault by an intimate partner each year.
- One in 6 women and 1 in 33 men have experienced an attempted or completed rape.
- Racially motivated violence and discrimination can be traumatic and have been linked to PTSD symptoms among people of color.^{xi}
- LGBT people experience violence and PTSD at higher rates than the general population.^{xii}
- For those who access the public mental health, substance abuse and social services, as well as people who are justice-involved or homeless, trauma is an almost universal theme.^{xiii}
- Trauma victims are routinely re-traumatized by coercive practices used by schools, juvenile institutions, jails and prisons, police and psychiatric hospitals.

Wounded Warriors

- Since October 2001, approximately 1.6 million U.S. troops have been deployed in Afghanistan and Iraq. Early evidence suggests that many returning service members may be suffering from post-traumatic stress disorder and depression. Traumatic brain injury is also a major concern. In 2008 a RAND study found 18.5 percent of returning veterans reported symptoms consistent with PTSD or depression.^{xiv}
- Of the troops that have served in Iraq and Afghanistan, 299,600 have gone to the VA for care. Of these, 120,000 were treated for mental disorders, including nearly 60,000 for PTSD. Substance abuse disorders remain one of the top three diagnoses in the VA health system.^{xv}
- Returning veterans with mental health and substance abuse problems may run into problems in other areas of their lives such as homelessness and unemployment, or worse, crime or suicide. One-third of the nation's homeless individuals are veterans.^{xvi}
- The National Vietnam Veterans Readjustment Study found differences among Hispanic, African American, and White Vietnam theater Veterans in terms of readjustment after military service. Both Hispanic and African American male Vietnam theater Veterans had higher rates of PTSD than Whites. Rates of current PTSD in the 1990 study were 28% among Hispanics, 21% among African Americans, and 14% among Whites.

ⁱ http://mentalhealth.vermont.gov/sites/dmh/files/report/cafu/DMH-CAFU_Psychological_Trauma_Moroz.pdf

ⁱⁱ Ibid.

ⁱⁱⁱ Adams, E.J. (2010) Healing invisible wounds: Why investing in trauma-informed care for children makes sense. *Justice Policy Institute Policy Brief*.

^{iv} U.S. Advisory Board on Child Abuse and Neglect, 1995 report, "A National's Shame."

^v Felitti, V.J., & Anda, R.F. (2010) The relationship of adverse childhood experiences to adult medical disease, psychiatric disorders, and sexual behavior: Implications for healthcare. In R. Lanius & E. Vermetten (Eds.). *The hidden epidemic: The impact of early life trauma on health and disease*. Cambridge University Press.

^{vi} Dean Kilpatrick and Ron Acierno, *Journal of Traumatic Stress*, 2003.

^{vii} Dolez, T., McCollum, D., and Callahan, M. (2009) Hidden costs in health care: The economic impact of violence and abuse. Eden Prairie, MN: Academy on Violence and Abuse.

^{viii} Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice. National Survey of Children's Exposure to Violence, October 2009. <https://www.ncjrs.gov/pdffiles1/ojdp/227744.pdf>

^{ix} Dean Kilpatrick, Ph.D. (Crouch, J.L., Hanson, R.F., Saunders, B.E., Kilpatrick, D.G., & Resnick, H.S.

^x Substance Abuse and Mental Health Services Administration. (2009). *Substance abuse treatment: Addressing the specific needs of women*. Retrieved March 25, 2011, from <http://www.ncbi.nlm.nih.gov/bookshelf/picrender.fcgi?book=hssamhsatip&part=tip51&blobtype=pdf>

^{xi} Bryant-Davis, T., & Ocampo, C. (2005). Racist-incident based trauma. *The Counseling Psychologist*, 33, 479–500.

^{xii} Harvard School of Public Health and Children's Hospital Boston. "Pervasive Trauma Exposure Among US Sexual Orientation Minority Adults and Risk of Posttraumatic Stress Disorder," Andrea L. Roberts, S. Bryn Austin, Heather L. Corliss, Ashley K. Vander Morris, Karestan C. Koenen, *American Journal of Public Health*, online April 15, 2010.

^{xiii} Jennings, A. (2004). The damaging consequences of violence and trauma: Facts, discussion points, and recommendations for the behavioral health system. Retrieved from <http://www.theannainstitute.org/Damaging%20Consequences.pdf>

^{xiv} RAND Corporation. Invisible Wounds of War: Psychological and Cognitive Injuries, Their Consequences, and Services to Assist Recovery, April 2008. <http://veterans.rand.org/>

^{xv} Florida Statewide Office for Suicide Prevention, Veteran Statistics. http://www.helppromotehope.com/documents/Veteran_Statistics.pdf

^{xvi} Ibid.



Healing Trauma's Invisible Wounds

Fact Sheet: Understanding Trauma

A traumatic event is one that threatens our life, our safety or our personal integrity. Traumatic events can affect us profoundly, causing psychological trauma. Exposure to trauma over time, like serving in a war zone or growing up with abuse or being bullied, can intensify psychological trauma.

Traumatic events affect us all initially. We can feel shocked and overwhelmed, and may feel a loss of control. Emotions can range from anger and horror to grief and numbness. Some people recover from trauma with the passage of time. But others, especially after repeated exposure, are left with invisible wounds to their emotional and mental well-being, and even their physical health.

As a society, we are just beginning to deal with trauma—bringing it out of the shadows, finding new ways of healing its wounds, and casting off the shame that prevents trauma survivors from seeking help.

Sources of Trauma

Many kinds of experiences can be traumatizing. They can happen to one person or to an entire community, and at any age. We can be traumatized by:

- Living under threat
- Childhood sexual, physical or emotional abuse or emotional neglect
- Experiencing violence, whether from violent crime, rape or a serious accident
- Living through natural disaster, war or upheaval
- Serving in combat
- Witnessing terrible things happening to others

How Trauma Hurts

Experiencing traumatic events can make us feel afraid, powerless and hopeless. We can be paralyzed by feelings of shame, guilt, rage, isolation and disconnection. Trauma triggers our defenses, which include a high state of vigilance, being prepared to fight or flee and numbness and disassociation. For people exposed to repeated trauma, these feelings and defenses can be long-lasting or permanent.

Trauma affects the developing brain and body and alters the body's stress response mechanisms. Emerging research shows that traumatic event can affect the way our brain works and impair the immune system.

Unresolved trauma can show up in many ways, including anxiety disorders, panic attacks, intrusive memories (flashbacks), obsessive-compulsive behaviors, post-traumatic stress disorder, addictions, self-injury and a variety of physical symptoms. Trauma increases risky behaviors such as overeating, smoking, drinking and unprotected sex. Trauma survivors can become perpetrators themselves.

Unaddressed trauma can significantly increase the risk of mental and substance use disorders, suicide, chronic physical ailments, as well as premature death.

Getting Help

The first step for all trauma survivors is getting to safety. Children who are being harmed need protection, as do adults in abusive relationships. The next step is understanding the role that trauma has played in your life, past and present challenges, and beginning to heal. Seek a therapist or counselor who has helped people who have experienced a trauma like yours. Mutual support from other trauma survivors can be powerful.