



How to Cope with Traumatic Stress?

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DESCRIPTION

Traumatic stress is a common reaction to an abnormal incident. Commonly, symptoms get better with time, but individuals with more intense symptoms may need professional help.

Over the sequence of a lifetime, it's normal to be exposed to a traumatic event, whether it is a serious injury, violent act, a sexual violation, or other shocking event. In response, many will experience traumatic stress a normal reaction to an abnormal event. People may even experience traumatic stress by just seeing a very distressing event or having a close family member or friend experiences such an event.

In the days and weeks following such a trauma, it's very common for people to have a flurry of erratic emotions and physical symptoms.

They include:

- Sadness
- Feeling nervous, jumpy, or on high alert
- Irritability or anger
- Difficulty sleeping
- Relationship problems
- Intrusive thoughts, flashbacks, or nightmares
- Trouble feeling positive emotions
- Avoiding people, places, memories, or thoughts associated with the traumatic event

Usually, these signs get better with time. But for some people, more intense symptoms linger or interfere with their daily lives and do not go away on their own. Some people may have acute stress disorder in which they have extreme symptoms of stress that significantly interfere with daily life, school, work or social functioning in the month after a traumatic event. Others can develop posttraumatic stress disorder (PTSD), with symptoms that effect on daily life and last for more than a month after the trauma.

Coping with traumatic stress

The good news is that there are very active ways to treat and manage the stressful effects of trauma. Researchers and psychologists have discovered that these actions can help:

- Lean on your loved ones. Classify friends and family members for support. If you feel ready to discuss the traumatic event, you might talk to them about your experience and your feelings. You can also ask loved ones to help you with household tasks or other obligations to relieve some of your daily stress.
- Face your feelings. It's normal to want to evade thinking about a traumatic event. But not sleeping all the time, leaving the house, isolating yourself from close ones and using matters to escape reminders are not well ways to cope over time. Though avoidance is normal, too much of it can extend your stress and keep you from healing. Gradually, try to comfort back into a normal routine. Support from loved ones or a mental health professional can help a lot as you get back in the groove.
- Prioritize self-care. Do your best to get regular physical activity, eat nutritious meals, and get a good night's sleep. And seek out other healthy coping strategies such as art, relaxation, music, meditation, and spending time in nature.
- Be patient. Remember that it's a very common thing to have a strong reaction to a stressful event. Take things one day at a time as you recover. As the days pass, your symptoms should start to slowly improve

When to seek help

Not everyone needs treatment for traumatic stress. Most people recover on their own way with time. However, mental health doctors such as psychologists can help you find strong ways to cope in the aftermath of a traumatic event. If your distress is affecting in your work, relationships, or daily functioning, you may have acute stress disorder or PTSD.

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Treatments for traumatic stress

Psychologists can provide evidence-based interferences to help you cope with acute stress disorder or traumatic stress.

One is Psychological First Aid (PFA), initially designed to help children, adolescents, adults, and families in the aftermath of a terrorism or disaster. It's now used to help people who have experienced any type of trauma. PFA is based on the idea that distress is usual after a traumatic incident. Rather than treat that stress like a disorder, the focus of this method is to deliver support and assistance and share information about stress reactions and coping strategies. Mental health providers and disaster response workers provide PFA in the days and weeks after a trauma, in diverse settings including hospitals, community settings, housing shelters, and even over telephone crisis hotlines. The goal of PFA is to decrease distress and improve coping and functioning, both long-term and short-term.

Another evidence-based treatment is cognitive behavioral therapy, or CBT, which is effectively used to treat many

psychological disorders, including traumatic stress. CBT is a psychological treatment that helps people learn to change unhelpful thinking and behavioral patterns.

CONCLUSION

In addition, a variety of treatments have been developed to help children and adolescents who have been exposed to trauma or adverse childhood actions such as neglect or abuse. Many of these therapies are family-based and include the child's parents or caregivers in the treatment routeing. The World Health Organization recommends trauma-focused CBT to treat indications of acute traumatic stress in adults. Some research also suggests that people who receive trauma-focused CBT may be less likely to grow chronic PTSD.