

The Post-Traumatic Gazette No. 38

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When trauma strikes: by Patience Mason World Trade Center terrorist attack 11 Sept 2001

“O cruel, irreligious piety!” Tamora, Act I, *Titus Andronicus*, William Shakespeare

The sight of that airplane deliberately striking the World Trade Center is something that will stay with us for the rest of our lives. Everyone who saw the World Trade Towers collapse has become part of the world community of trauma survivors. People who are already trauma survivors have been re-traumatized. Post-Traumatic Stress Disorder symptoms often resurface—even for people who have had successful therapy—with further trauma or incidents that remind you of some aspect of the trauma, like total complete powerlessness while you watch other people die.

During a traumatic event, people lose the freedom to choose what happens. They don't have the power to prevent the trauma. Trauma is by its very nature more powerful than you, whether it is the rapist who is simply stronger, the hurricane's powerful winds, the guy with the machine gun who is better dug-in, or self-righteous fanatical crash dummies flying airplanes into the World Trade Towers. (“Crash dummy” is a street term for the guys whom criminals use to do dangerous dumb things for them. Seems to fit. Whoever was behind the attacks didn't give *his* life.)

Sometimes for the rest of your life you struggle with “if-onlies” which help you avoid and deny terrible feelings of helplessness, horror and fear. Better to think “I shouldn't have worn that red dress,” than to feel the terror that the rapist could have and would have killed you. Better to think, “I shouldn't have

taken the trail,” than feel your despair when the ambush opened up on your buddies. Better to say, “I was a bad kid and they straightened me out,” than to remember that anything could bring on a beating, anything or nothing.

The “if onlies” for this tragedy are infinite, but nothing any of us did made these men killers of the innocent. No one could have imagined such an event.

This attack has taken away our freedom to travel and our sense of safety. We will be worried when we travel, and when our loved ones are out of our sight. Once free thoughts will now be focused on controlling what cannot be controlled: other people, the way they think, and what they do. Moreover if we are not educated and aware, post-traumatic reactions may rule us, suppressing our feelings and distorting our lives. This loss of freedom does not have to be permanent, however. We can recover from the effects of trauma.

Why is there pain in seeing trauma even if you are not part of it? Human nature, the best part of human nature: compassion. It is what made the fire-fighters go back into a building that was burning and could collapse. It is also what makes people who have struggled with their own PTSD feel such pain when someone else, especially an innocent party, is hurt or killed. Survivors and those of us who live with and love people who have been traumatized, don't want other people to have to go through what we and our loved ones

went through back when PTSD didn't have a name and wasn't supposed to exist.

Suggestions for healing:

1. Focus on finding your own freedom from the effects of trauma. One of the rescue workers said he was digging to free any survivors, but he was also digging to find the freedom we have lost. It is the ground of our being in this country, freedom. If we become trapped in post-traumatic reactions, we are where the terrorists want us. We have to dig through our own feelings and experiences, but at our own rate, in our own time, in a safe way, and with support. Not every one develops PTSD from experiences like this. Understanding that it is normal to be affected by trauma will help free you. Denying the impact of trauma, keeping silent about it, and not having support are three things that increase the likelihood of having post-traumatic problems later.

You may have spent hours in front of the TV, hoping for news. I have found myself doing that lately, and I know it is a normal reaction, although not conducive to getting my work done. I tell myself that it is okay for me to be human and disturbed by seeing so much death and destruction. I can be kind and compassionate to myself. I can understand that this feels like a vigil to me and to many. We are not thrill seeking but trying to be there for those who have been lost. We are giving our attention and respect to what hap-

pened to them. This is not an everyday occurrence, to “get over,” like a skinned knee. We will—we are—going on with our lives, but we are also marking this loss, grieving for all those people, and helping ourselves through a time of pain and loss by doing what is human.

On one broadcast, the reporter was showing cars that had been towed from the WTC parking lot. Someone had put beautiful single flowers on them. She told the reporter that she was powerless over what happened, but she was trying to respond with humanity. Human beings care. Let yourself care, and do the things that come to you as ways to contribute to the healing.

2. Talk: talk to supportive people. Not people who say, “You’re alive, so what’s your problem?” If you are saying that to yourself, stop. You don’t have to qualify by reaching some level of personal loss to be upset by this event. We are hurting because we are human beings and care about each other. The best part of us is what hurts. People who say, “Yes, it scared me too. My life is changed too,” are the ones to talk to. Let yourself cry if you can. Everyone is experiencing grief for the loss of human life.

Many of us experience grief as anger, but grieving, though harder, is more healthy.

If you are not feeling anything, then you are probably numb, not cold and unfeeling. Have compassion for yourself. It means you have a post-traumatic symptom which is helping you cope, which means you care.

Critical Incident Stress Debriefing is a way of self-debriefing emergency responders (cops, firefighters, EMT’s, doctors and nurses who are often traumatized by what they see) after a disaster. They are encouraged to talk, each getting a chance to talk about what happened to them: what they did, what they saw, what they smelled, what they felt, what they touched, what they hoped the outcome would be, and what actually did happen. Emotions are expressed and accepted. No one interrupts or corrects. Each person is telling it from his or her perspective. Every

one shares on each topic, and then they move to the next. It doesn’t prevent PTSD, but it helps people process what happened and know it is okay to get help if the need it. Using a similar pattern to talk about this event or even write about it may help you even if you were not an emergency worker.

3. Know what post-traumatic reactions are: Most people are unaware of the effects of trauma, the symptoms of PTSD, or even that such an experience—seeing the death of people you may not even know and feeling fear, horror and/or helplessness—is by definition, the kind of experience that can cause Post-Traumatic Stress Disorder. So is losing a loved one or friend in the disaster. Having survived the attack is, too, as is being a rescue worker on the scene. The human cruelty of this terrorist attack makes it more more traumatic than a natural disaster. Individuals may not develop full blown PTSD but still have post-traumatic reactions. Knowing what they are can help you recover.

What are some of the effects trauma normally has on people?

People commonly become *numb* in order to focus on survival: people were counting steps as they went down through the smoke, holding hands. Numbing their fear helped them survive. Later they may find themselves maintaining this numbness through *avoidance*, because the emotions which are naturally evoked by such a tragedy are so painful. (This is called “professionalism” in some circles.) People may isolate. They may turn to drugs, alcohol, food, or other substances or compulsive behaviors to maintain numbness when it begins to wear off. If you find yourself doing this, it is very human, but it can be the start of a slippery slope to a life ruled by post-traumatic reactions. It is more healing to find a safe place to talk about the tragedy (and cry about it). If your life is distorted by numbing, the terrorists win again. If you have made progress in healing from some other trauma, you may slip back. Little kids may also slip back to bed-wetting or baby talk or needing a

night light.

Other normal reactions are feeling like others can’t understand what you are going through, and feeling like there is no future, both of which have an element of realism. You may also forget details or periods of time, a sign of how overwhelming the trauma was to you.

Avoiding painful emotions is a lot of work, so you may begin to avoid anything that reminds you of the trauma (thoughts, feelings, situations, activities). Avoiding things that remind you of the trauma may also mean you stop doing things you once loved to do. You may find yourself crying when your feelings break through, which is normal and healthy, not weak, unmanly (or unwomanly). You may find yourself very angry, too.

Often people expect you to get over it right away. The people who are saying “get over it” make it very clear that people who have not experienced trauma can’t understand, which reinforces feeling detached and estranged from other people.

These are the normal numbing and avoidance symptoms. They start as your brain focuses on survival or on helping others survive as the rescuers have. They maintain themselves because it is easier to be numb. It helps you keep on keeping on. Balancing the need to keep on with moments where you let yourself feel is important for healing.

Survivors become easily *aroused*, constantly watching for danger, quick to anger, unable to sleep or concentrate on everyday stuff (believe me they are concentrating on survival information), and perhaps seeing danger everywhere and being controlling and bossy. You may have been elated and feel ashamed but it was the adrenaline running through you. You may feel like you are jumping out of your skin (adrenaline again).

Finally, people also commonly *re-experience* the trauma through intrusive thoughts, nightmares, intense physiological (sweating, shaking) or psychological reactions to things that resemble some part of the trauma, flashbacks when it feels like it is happening again,

and anniversary reactions.

Most of these symptoms begin as survival skills that help you get through the trauma. Chemicals in your brain focus your attention on how to survive and give you the energy to do so. Rapid adaptation to the circumstances is also built into your brain. Some of the symptoms develop as ways to survive the aftermath of trauma by avoiding triggers and unendurable pain. Some seem to be your better-safe-than-sorry brain trying to warn you it might happen again (re-experiencing). You may even act in the way you did during your trauma (re-enacting). All of these and more are normal reactions.

These survival skills can become tremendous problems over time—blocking your ability to feel, to find help, to calm yourself after a trigger, and to process the pain.

Remember, if you have been exposed to or survived other traumatic events (war, political repression, personal violence, sexual assault, or natural or man made disasters) this may re-trigger PTSD or you may develop it now for the first time (the post in PTSD). When you are triggered, if you start “recycling” your PTSD, that does not mean that your therapy and other recovery activities did not work. It means you need to do more recovery work. What helped before will help again as you to go through the process of working through the pain. Keep an open mind, and you may also find more tools to add to your recovery tool kit.

The capacity to be re-triggered can happen even if you weren't aware that you had PTSD. Most people who have it, don't know it. They don't fit the stereotype of wacko veteran with the gun. Most veterans who have PTSD don't fit that stereotype either. Most people with PTSD are invisible hard-working people with families who are struggling with reactions they don't understand. Nobody knows how nuts they feel.

4. Realize PTSD is a normal response to trauma. Normal, but not comfortable to have. It's painful. Most people with PTSD are scared. They struggle to hide their symptoms and

seem normal. Not affected. Fine. John Wayne is one model for this, but John Wayne was an actor who never faced a bullet.

For most people, suppressing PTSD symptoms becomes a full time job. People wind up losing friends and even family. Unfortunately, there also is a continual search by some to figure out why some people get PTSD, as if it were some sort of failure.

PTSD is actually a success, proof of survival. Dead people don't get it.

People get PTSD because they care.

Good support can help with traumatic events, but I don't care who you are, if you live through enough trauma you'll probably struggle with PTSD symptoms. It is good to be informed. Trauma survivors can look good to outsiders while their family pays a heavy price. Families are systems and they can be organized around making the survivor look good while absorbing his or her pain.

For those of you who have small children, talking to them about this in simple terms is suggested. Yes some bad men hurt all those people but we are safe here. The police will find the bad men and make sure we are safe. Let them cling. Let them have a nightlight. If they wet the bed you can say that is common for little kids when something scary has happened and after a while they will be dry at night again. Sometimes kids will misbehave when they are afraid. Be gentle and firm. Try to stick with a routine the child is used to. Read them a bedtime story. Listen. Note if they change behaviors and let them talk. Kids are by nature valuable, vulnerable, imperfect, needy and self-centered. They may worry that something they did caused this. They will see it as a possible danger to them. “Will someone blow us up, or blow up your office?” Fear is normal and saying things that normalize it is good. “Yes, this is scary. Anyone would be scared of an airplane hitting them, but the police are not going to let that happen again. It still scares us, but we will see over time that things are safe again.” Let them be imperfect and needy. If

you are feeling kind of imperfect and needy yourself, seek adult help so you can be a parent to your kids.

For parents and teachers, I recommend a book, Debra Alexander's *Children Changed by Trauma* which is published by New Harbinger (1-800-748-6273). If you are an adult who survived childhood trauma without help it will teach you the help any child needs.

5. It is okay to ask for help. Going for help is one of the first and best things you can do for yourself. Grief and trauma counselors are working to help people through the immediate aftermath of this tragedy, but you may need more help. If you do, be kind to yourself and get it.

Normal people have problems especially with traumatic events. How do you tell if you need help? Are you numb? Are you very angry and it is coming out on family and friends? Some people experience grief as anger because anger is a powerful emotion and grief is not. Are you thinking about it all the time, dreaming about it, feeling as if it is happening all over again? Are you drinking and drugging, using sex, TV, food, the internet to keep numb? Can you talk about it? Don't let the terrorists stop your voice. You also don't have to talk about it. Other forms of telling your story include writing about it (journal, play, poem, article, book), drawing and painting, dancing, sculpture, acting. Anything creative is healing.

Adults need to be kind to themselves. No one would say to a firefighter who came out of the ruins, “Why the hell are you crying? You're alive!” Don't say it to yourself, either. This is a grievous loss. If you can cry that is healing. If you can't—yet—that is where you are at, and that is okay, too. Being numb is a survival skill given to us by God or evolution—it doesn't matter which—but we all have it. It helps us get through things.

It is good to be able to be numb and also good to be able to feel your feelings when it is safe. If you don't, if, as many Americans are taught, you try to tough everything out alone, you are not being fair to yourself or your

family. Those who have prohibitions against getting help often take out their emotional problems on family members and then forbid them to get help. It becomes a vicious cycle.

Feelings that are stuffed eventually come out. Grief and sadness stuffed may erupt into yelling at the kids. Fear stuffed may make you over controlling, as I was. Despair stuffed can make you verbally destroy the dreams of your kids. And while you are stuffing away bad feelings you will not be able to have good ones either. Happiness, joy, love, serenity will all elude you if you avoid sorrow, pain, fear, and despair. Remember feelings are not logical. They are feelings. You can't control them with logic without paying a high price.

Finding a safe place to express your feelings can be difficult. People often feel it is weak to ask for help, but I think it is a true measure of strength. It takes courage to say you need help. It takes courage to accept help.

If you cannot bring yourself—yet—to ask for help, one thing you can do is research. Look on the web for information on PTSD. There are lots of websites on the subject, as well as many books and articles.

My website, www.patiencepress.com, looks at the symptoms of Post-Traumatic Stress disorder as survival skills which later become big problems. Many people find this helpful.

To me trauma is the problem and PTSD symptoms are solutions to the immediate problem of trauma, and to some of the problems that grow out of being traumatized. Post-traumatic symptoms develop for a reason, survival, and they can be lessened by seeing what needs they met, and slowly figuring out how to meet those needs in your present circumstances. If you have PTSD it means you survived. The survival skills worked. A number of issues of the Post-Traumatic Gazette and some other articles can be downloaded from my website. I hope you will read them. I hope they help.

Other books I recommend: *I Can't Get Over It*, *Trust After Trauma*, and *Survivor Guilt*, all by Aphrodite

Matsakis, Ph.D. *PTSD: A Complete Treatment Guide* is her excellent book for therapists. Also available from New Harbinger.

Growing Beyond Survival: A Self-Help Tool kit for Managing Traumatic Stress by Elizabeth Vermilyea is full of healing ideas. Journaling is one way of dealing with trauma. *The Way of the Journal: A Journal Therapy Workbook for Healing*, by Kathleen Adams, is designed specifically for trauma survivors. So is *Managing Traumatic Stress Through Art: Drawing from the Center*, Barry M Cohen, Mary-Michola Barnes and Anita B. Rankin. Art is one of the ways you can help yourself express the inexpressible and speak the unspeakable. *Unspeakable Truths and Happy Endings: Human Cruelty and the New Trauma Therapy* by Rebecca Coffey, is another outstanding book for reading about the process of recovery. All from The Sidran Foundation (www.sidran.org, 1-888-825-8249).

6. Find good help: People are different and have different needs. Find someone you are comfortable with who provides you with a variety of tools and who listens to your story. If you have to do what they say when they say it, it is not therapy.

You have a right to talk, draw, journal, to be upset, to grieve. It doesn't matter if you were in the Towers and got out or saw it on TV. This is upsetting. Working through the pain and loss, the helplessness and horror, will free you from the grip of the terrorists.

Don't "get over it." Get *through* it. People who work through the pain of trauma become beacons of hope and teachers for the next generation of trauma survivors. There is always a next generation. If you can get through the grief and pain, they can, too.

To me, the most valuable thing we can do for ourselves and our country today is to take action against the destruction that has been visited upon us. We go out and light candles so the dead and missing are not alone in the dark. We sing to support the living and the dead. We donate stuff to help the rescuers and those who lost loved ones. We can also acknowledge that this trauma

has effects on all of us and talk about it, feel our pain, and slowly heal.

In the past we have forgotten the effects of trauma from one generation to the next. As soon as the war was over or the camps closed, the massacres ended, society dived into denial. Denial is not just a river in Egypt. But we are not living in Egypt. We live here. Today we have the opportunity to heal ourselves and free ourselves and our country from the claws of terrorists. Each of us can resist their efforts to make us soldiers in the armies of denial. Working through the pain will only make us stronger.

Helping Families Become Part of the Solution: Resources to Recommend

by Patience Mason

Family members may feel helpless, hopeless and defensive if they have dealt with PTSD on their own for a long time.

Family members may be in a state of denial that the newly traumatized or triggered person can't "just get over it."

Family members may simply be looking for ideas.

Some of these may help them:

Living with PTSD is difficult, especially if neither party knows what it is. They need information:

Most people are willing to receive information that is couched in non-blaming and non-shaming terms. It took me six months to write the lead articles explaining PTSD and how to recover in *The Post-Traumatic Gazette #1* because I wanted every word to be healing. Most explanations of PTSD leave the trauma survivor and family members feeling weird, weak and defective. Some sort of explanation of PTSD is essential. I found the DAV pamphlet *Readjustment Problems among Vietnam Veterans* by Jim Goodwin, Psy.D. very reassuring because what we had been living had a name and other people had it too. My book, *Recovering From the War*, is extremely helpful to veterans and family members, and the books for children I've written, *Why is Daddy Like He Is?* and *Why Is Mommy Like She Is?* are helpful to kids and adults. *Amongst Ourselves* by Tracy Alderman, Ph.D. and Karen Marshall, L.C.S.W., New Harbinger, 1998, is a wonderful resource for DID clients and family members. *I Can't Get Over It*, by Aphrodite Matsakis, Ph.D., New Harbinger, 1996, clearly explains PTSD and provides exercises for survivors of all types of traumas. Family mem-

bers find it useful too. (If you are not on New Harbinger's mailing list, call 1-800-748-6273. They seem to have a new wonderful book every month). *Children Changed by Trauma* by Debra Alexander, Ph.D., New Harbinger, 1999, is written for parents. Not only is it wonderful, but I think adults can use it to help them understand why someone isn't over something that happened in childhood. *Unspeakable Truths and Happy Endings: Human Cruelty and the New Trauma Therapy* by Rebecca Coffey, Sidran, 1998, is another excellent book. I also recommend Al-Anon Family Groups, Inc., (757-563-1600, fax 757-563-1655) From *Survival to Recovery: Growing up in an Alcoholic Home*, 1994, which gives examples of repressed memories, incest, other traumas and recovery from them using the 12- steps.

The most important information you can convey to the family of a trauma survivor is that it is normal to be affected by trauma.

If they learn nothing else from you, family members need to know it is normal to be affected by trauma. Homer and Shakespeare wrote about traumatic reactions (see *Achilles in Vietnam* by Jonathan Shay, M.D. and Lady Percy's speech on Hotspur in *Henry IV, Part I*). If you have eyes to see, PTSD is visible in people as diverse as Elizabeth I and George Washington, who stands out as an example of psychosocial acceleration—as John Wilson called it in *The Forgotten Warrior Project*. Samuel Pepys had dreams of fire, British soldiers went on a rampage of bloodlust on the way back from Lexington and Concord (Tim O'Brien, "Ambush," *Boston Magazine*, April 1993), and Dr. Livingston describes instant emo-

tional numbing as he was "shaken like a rat" by a lion. According to one FBI study, 69% of surviving spouses of police officers killed in the line of duty have PTSD. In the *National Vietnam Veterans Readjustment Study*, 66% of people who had experienced high war zone stress had diagnosable PTSD at some time in their life, and 33% still do today. Studies of WWII combat vets and POW's in the VA hospital for other things showed that 50+% of them had had PTSD at some time in the past and 25+ % of them still did, completely undiagnosed despite inpatient medical treatment at the VA.

Normal people are affected by what they have been through.

One book that puts this very succinctly for family members of rape survivors is *Free of the Shadows* by Caren Adams and Jennifer Fay, New Harbinger, 1989. Another is *Recovering From Rape* by Linda Ledray, R.N., Ph.D.

Back from the Brink by Don Catherall is also helpful.

Books by other survivors of the type of trauma can normalize it for the family. My husband's book, *Chickenhawk*, has this effect on people. *The Magic Daughter* by Jayne Phillips, *The Liar's Club* by Mary Karr, and other memoirs can serve this function.

PTSD symptoms can be seen as survivor skills that are activated at the time of the trauma to keep us alive. Later on these same skills can become the survivor's biggest problems.

There is a long discussion of this in the first issue of the *Post-Traumatic Gazette*, which is free. Download it at www.patiencepress.com. or send

for a copy. You are free to copy and distribute it to anyone it will help. Among others, John Briere, Ph.D. discusses PTSD symptoms as survivor skills in his books for professionals. *Scarred Soul* by Tracey Alderman, Ph.D., New Harbinger, 1997 discusses the how and who of one of the most frightening of these, self-injury, as does *Understanding Self-Injury* by Kristy Trautmann and Robin Connors available from Pittsburgh Action Against Rape, 81 South 19th St, Pittsburgh, PA 15203. Other books that helped me with this concept include the discussion of brain activation in *The Body Speaks* by James and Melissa Griffith (Basic Books, 1994) on p. 184. It is a terrific book for therapists and applies to PTSD work. *Emotional Intelligence* by Daniel Goleman also has a part on emotional hijacking of the brain, which I found helpful. Another helpful article is free on my website, a report I did on a talk by David Grossman who wrote *On Killing*. His discussion and diagram of the effects on the senses of hormonally induced heart rate increase really opened my eyes. Most books mentioned above have something along this line in them.

Living with PTSD affects you even if you are not aware of the effects.

Living with someone with PTSD affects people. It can drive you nuts. *Vietnam Wives* by Aphrodite Matsakis, Sidran 1998, my book, *Recovering From The War*, and *Allies in Healing* by Laura Davis (for family members of sexual abuse survivors) discuss some of the difficulties.

The Second Issue of the Post-Traumatic Gazette is a thor-

ough discussion of the affects and of how to get better at self-care. It is available free at www.patiencepress.com and may be downloaded, copied and given away.

Al-Anon Conference Approved Literature will help. You can read the pamphlet on *Detachment* at www.al-anon-alateen.org or get it at Al-anon meetings. Detachment and working on yourself are concepts that are invaluable for someone struggling with someone else's PTSD. In *How Al-Anon Works for Families and Friends of Alcoholics*, 1995, and *Paths to Recovery*, 1997. Al-Anon concepts are explained and how to use the steps and traditions to improve your life. I tell people to substitute the word PTSD for alcohol if they need to although a lot of people with PTSD develop alcohol problems, so either way works.

I have read a lot of adult children of alcoholics books and books on co-dependency because I found living with PTSD created similar difficulties. Janet Woititz' *Adult Children of Alcoholics* is wonderful as are all her books. I also recommend *Facing Codependence* by Pia Mellody, HarperCollins, 1989. I also got a lot of help from Earnie Larsen's set of pamphlets *I Should Be Happy... Why Do I Hurt?* which led me to his helpful book, *Stage II, Relationships* and Sharon Wegscheider-Cruse's *Choicemaking*.

There is help but changing takes time. Persistence and willingness are vital.

Family members need a realistic sense of how long it takes for a survivor to get better. They will both go through a process of mourning, the survivor for

what was lost in the trauma, and the family for loss of the old life. Every one would like instant cures, but changing patterns of behavior takes time. A discussion of effective vs. ineffective behaviors can feel less threatening.

Even though I wanted to help Bob, my quest to fix him was ineffective because as a person with PTSD, he needed to regain a sense of control in his life. In combat, he had to fly where he was told when he was told and how he was told. When I was telling him what to do, his healthiest response was not to do it. So even if I were right, it was ineffective. Trauma survivors also need to feel very painful feelings and family members need to let them. Cheering them up may seem nice, but it slows recovery.

Changing requires tools and support. Some Tools:

A. Acceptance: In the "Big Book," Alcoholics Anonymous, on page 448 (3d Ed.) is probably the most famous reading on the topic of acceptance. Most people want to be accepted as they are. Balancing acceptance and the desire for change is a delicate task. I learned to accept my painful emotions because of this reading, to sit with them and let them pass. I also learned to accept my husband and to let him find his own path to healing, which I had been blocking with advice. I also learned to accept that changing took time for both of us.

B. Boundaries. Free hand-out on Boundaries is available at www.patiencepress.com. *Learning To Say No, Establishing Healthy Boundaries*, Carla Willis-Brandon, MA, was helpful to me when I first started. The Serenity Prayer is a

good guideline.

C. Compassion: The best stuff on self compassion which generalizes to others and prevents a person from allowing abuse was developed by Steven Stosny, CompassionPOWER, 20139 Laurel Hill Way, Germantown, Maryland 20874 compassionpower@compassionpower.com, www.compassionpower.com. Using his HEALS technique is very effective. See issue #20 of the Post-Traumatic Gazette for other ideas

D. Detachment: read the Al-anon pamphlet at www.al-anon-alateen.org or pick it up at any Al-anon Meeting. There are 22 readings on Detachment in *One Day At A Time In Al-Anon*, also available at meetings. The *Courage to Change* is a newer Al-anon daily reading book that also addresses detachment.

E. Examination: I found it particularly effective to examine cognitive distortions using the book, *Feeling Good* by David Burns, MD. I found *The Twelve Steps: A Way Out*—the old editions with the gray or lavender covers—helpful in examining the patterns I grew up with. It has a very helpful Fourth Step inventory. Many commercially published Adult Children Of Alcoholics books focus on patterns learned in childhood. I couldn't change what I couldn't see. The idea of a daily inventory to keep me on track has also helped me.

F. Focus on yourself. Focusing on the person with problems is easy to do. Cheering him or her up, suggesting solutions, rescuing, cheerleading, all are behaviors that we are taught as kids and which our society reinforces. We are ashamed to focus on ourselves. It seems selfish. There is a healthy kind of self-

ishness, however. Focusing on your own growth is very hard. If you do it, you won't have time to be fixing everyone else, which will probably seem like a big break to them, and give them room to grow. They may grow raggedly or off in some direction that seems useless to you, but mistakes are how people learn (especially if no one is constantly warning and shaming and blaming if it is a mistake). I thought I knew what would help Bob. The things that have actually helped him are different. Very humbling!

G. Getting help is important. In addition to whatever therapy is available for family members, joining Al-anon, Co-dependents Anonymous or any other 12-Step meeting and working the steps is helpful. The third issue of The Post-Traumatic Gazette discusses the 12-step process as a self-initiated, self-regulating process of internalizing compassion and self-care. I have written formats of 12 -step groups for Veterans, Family and Friends and for Trauma Survivors, Family and Friends which can be downloaded from my website (www.patiencepress.com). Addresses and information about many 12-Step groups are online. Groups such as Vietnam Veterans of America or VOICES (Victims of Incest Can Emerge Survivors) can also provide support and information for family members. People need to be supported in recovery by other people who have faced the same problems.

H. Help is available today. Sources of help can be as close as the nearest VA/Vet Center or Crisis Center. There are hotlines for victims of violence, for domestic violence, for many other forms

of trauma, as well as web pages

I. Initiate your own recovery. Even if other members of the family including the trauma survivor are not willing to get help, you can get help. If living with a trauma survivor is wearing you out or driving you nuts or you just want to grow and change, it is perfectly okay, not selfish, to seek outside help. If you can't understand why the survivor can't just "get over it" or change, I suggest going to Al-anon meetings and working the steps with a sponsor to get some idea of how hard it is to ask for help, to accept help, and to change.

J. Judging is a waste of time. Was this bad enough to cause PTSD? So-and-so went through worse things and he's fine. This kind of judging is a waste of your time. People are different and are affected differently by different experiences. Dealing with how things are today is more effective.

K. Keep at it. Changing is ridiculously hard. It takes time and effort and more time and more effort. Plus we work through the same stuff over and over, which I call recycling.

L. Let go. I had plans for how Bob should recover. When I let go of my plans, he found his own way of healing that worked for him. I also had plans that I would recover if I went to 12-Step meetings for a few weeks. It is hard to let go of old behaviors and thought patterns however, so I am still going to meetings fourteen years later to reinforce the changes I've made.

M. Manage your own life. When I am really working on my own life, really living not just existing, I don't have time to manage other people. Yes they make mis-

takes, but if I'm not pointing them out, they seem to learn more from them. And when I am focused on me, I see more of what I do do and what I'd like to change.

N. Network. Other people are going through what you are going through. Find people who are growing and changing themselves, not bitching and moaning about the person with the problems as if they had none. Those people can make suggestions and support you in changing.

O. Organize. PTSD often leads to chaos. Part of recovery for me has been organizing my life and my stuff, one little bit at a time. Organizing with other people with PTSD has led to better treatment, too.

P. Patience. Yep! You definitely need this virtue. It is a quality you can develop as you recover, as I am. Having patience with yourself, which is based on realism about how hard it is to change, helps you have patience for others. **Persistence** is good, too.

Q. Quiet time. Bob and I both meditate and take quiet time each day to simply be. It takes patience, helps develop patience, and has a profound effect on how you feel. Are you worth your own time? We use the book *Wherever You Go, There You Are* by John Kabat-Zinn.

R. Recycling. The same stuff comes up again and again. I call this recycling. Taking a new action that I have learned in recovery helps me get through the problems faster than I did before. It is one of the ways you can tell you are recovering. You get through, around, over, and under things much faster. You see different paths, patterns and possibilities more quickly.

S. Safe sanctuary. The aim of recovery and of becoming a part of the solution is to make your relationship a sanctuary for both of you. Not a battle ground.

T. Trust. Family members sometimes feel betrayed by the person who has PTSD. Promises are broken. Needs are not met. I suggest changing the focus. We don't expect cancer patients to magically recover for us, nor diabetics to eat cake for us, yet some of us want people with PTSD to get over it for us. I have learned to trust that Bob is doing his best. I belong to support groups so I can get my needs for emotional and social support met without being entirely dependent on him. I never ask him to promise to do something, because I know he needs the freedom to make healthy choices for himself. I also trust him to be human and therefore not perfect. Makes my life a lot easier.

Trauma has consequences. There are some things trauma survivors can't do because of the trauma. There's strength in recognizing this.

U. Understanding. I've gone through layers of understanding PTSD, Bob, and myself, and every new layer has helped me heal. Bob isn't sometimes emotionally unavailable because I'm no good. It has nothing to do with me. It is because he has PTSD. When I understood that, it helped heal my low self-esteem. Other insights have come and changed the way I viewed myself and him. Understanding leads to compassion, and compassion heals us.

V. Value yourself and the survivor. Once I thought of Bob as the bad boy and treated him as such. Now I think of him as

a man who faced death everyday in Vietnam to help others. He is a hero to me, and I value him. And I am a woman who never gives up, so I value myself, too. I used to hate myself because I couldn't make him perfect. Valuing myself is a lot better.

W. Wait. Change is rarely swift. Change is very hard for trauma survivors. It is easier to wait if you are working on yourself and trying to live life while you wait.

X. X-ray your own stuff. Keep that pitiless eye on your own recovery. Judging someone else's recovery efforts is ineffective and a waste of time.

Y. Yearning. We all yearn to be loved, to be special to someone, to be happy. Let these yearnings motivate you to grow and change.

Z. Zero in on your own part. If I speak to Bob in "Hitler voice," I apologize for the tone. That is my part. How I said it is my responsibility. So is what I said. I no longer find it acceptable to think, "Well, he spoke in an ugly tone," or "He said something mean, so I can be mean back." It would have been nice if I'd been over that in grade school, but I wasn't. I am now, for the most part. My behavior usually is not a reaction to other people's behavior, but based on the kind of person I want to be. If I do react angrily or defensively, I make amends as soon as I am able.

These ideas have helped me heal my relationship with Bob and with myself. I hope you find them useful. Take what you like, and leave the rest.