Behaviors That Interfere with Giving Support

- Rushing to tell someone they will be okay
- Acting like someone is weak or exaggerating or that they should just “get over it” because they aren’t coping as well as you are
- Discussing your own personal experiences
- Giving advice without listening to the person’s concerns or asking the person what works for him or her
- Stopping people from talking about what is bothering them

When Your Support is Not Enough

- Let the person know that experts think that avoidance and withdrawal are likely to increase distress, and social support helps recovery.
- Encourage the person to talk with a counselor, clergy, or medical professional, and offer to accompany them.
- Encourage the person to get involved in a support group with others who have similar experiences.
- Enlist help from others in your social circle so that you all take part in supporting the person.

Common negative reactions that may continue include:

- Intrusive reactions
- Distressing thoughts or images of the event while awake or dreaming
- Upsetting emotional or physical reactions to reminders of the experience
- Feeling like the experience is happening all over again (“flashback”)

Avoidance and withdrawal reactions

- Avoid talking, thinking, and having feelings about the traumatic event
- Avoid reminders of the event (places and people connected to what happened)
- Restricted emotions; feeling numb
- Feelings of detachment and estrangement from others; social withdrawal
- Loss of interest in usually pleasurable activities

Immediate Reactions

There are a wide variety of positive and negative reactions that survivors can experience during and immediately after a disaster. These include:

<table>
<thead>
<tr>
<th>Domain</th>
<th>Negative Responses</th>
<th>Positive Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cognitive</td>
<td>Confusion, disorientation, worry, intrusive thoughts and images, self-blame</td>
<td>Determination and resolve, sharper perception, courage, optimism, faith</td>
</tr>
<tr>
<td>Emotional</td>
<td>Shock, sorrow, grief, sadness, fear, anger, numb, irritability, guilt and shame</td>
<td>Feeling involved, challenged, mobilized</td>
</tr>
<tr>
<td>Social</td>
<td>Extreme withdrawal, interpersonal conflict</td>
<td>Social connectedness, altruistic helping behaviors</td>
</tr>
<tr>
<td>Physiological</td>
<td>Fatigue, headache, muscle tension, stomachache, increased heart rate, exaggerated startle response, difficulties sleeping</td>
<td>Alertness, readiness to respond, increased energy</td>
</tr>
</tbody>
</table>
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What Helps

- Talking to another person for support or spending time with others
- Engaging in positive distracting activities (sports, hobbies, reading)
- Getting adequate rest and eating healthy meals
- Trying to maintain a normal schedule
- Scheduling pleasant activities
- Taking breaks
- Reminiscing about a loved one who has died
- Focusing on something practical that you can do right now to manage the situation better
- Using relaxation methods (breathing exercises, meditation, calming self-talk, soothing music)
- Participating in a support group
- Exercising in moderation
- Keeping a journal
- Seeking counseling

Positive changes in priorities, worldview, and expectations

- Enhanced appreciation that family and friends are precious and important
- Meeting the challenge of addressing difficulties (by taking positive action steps, changing the focus of thoughts, using humor, acceptance)
- Shifting expectations about what to expect from day to day and about what is considered a “good day”
- Shifting priorities to focus more on quality time with family or friends
- Increased commitment to self, family, friends, and spiritual/religious faith

When a Loved One Dies, Common Reactions Include:

- Feeling confused, numb, disbelief, bewildered, or lost
- Feeling angry at the person who died or at people considered responsible for the death
- Strong physical reactions such as nausea, fatigue, shakiness, and muscle weakness
- Feeling guilty for still being alive
- Intense emotions such as extreme sadness, anger, or fear
- Increased risk for physical illness and injury
- Decreased productivity or difficulties making decisions
- Having thoughts about the person who died, even when you don’t want to
- Longing, missing, and wanting to search for the person who died
- Children and adolescents are particularly likely to worry that they or a parent might die
- Children and adolescents may become anxious when separated from caregivers or other loved ones

Physical arousal reactions

- Constantly being “on the lookout” for danger, startling easily, or being jumpy
- Irritability or outbursts of anger, feeling “on edge”
- Difficulty falling or staying asleep, problems concentrating or paying attention

Reactions to trauma and loss reminders

- Reactions to places, people, sights, sounds, smells, and feelings that are reminders of the disaster
- Reminders can bring on distressing mental images, thoughts, and emotional/physical reactions
- Common examples include: sudden loud noises, sirens, locations where the disaster occurred, seeing people with disabilities, funerals, anniversaries of the disaster, and television/radio news about the disaster

What Doesn’t Help

- Using alcohol or drugs to cope
- Extreme withdrawal from family or friends
- Overeating or failing to eat
- Withdrawing from pleasant activities
- Working too much
- Violence or conflict
- Doing risky things (driving recklessly, substance abuse, not taking adequate precautions)
- Blaming others
- Extreme avoidance of thinking or talking about the event or a death of a loved one
- Not taking care of yourself
- Excessive TV or computer games