PTSD Awareness in the Workplace

How to Have Courageous Conversations About Mental Health





Resources



https://qrco.de/bdoUKz

Today's Objectives

- Remove stigma around PTSD & other mental health conditions
- Understand the nature of trauma
- Learn about how to apply Mental Health First Aid to PTSD & more
- Practice case examples
- Receive resources for ongoing wellness programming



Mental Health Implications of Pandemic

- Feelings of grief and loss
- Increase in stress, anxiety and depression
- Increase in substance abuse
- Relationship conflict, abuse, violence
- Money anxiety
- PTSD/Trauma
- Increase in suicide



Additional Factors for Some Veterans

- PTSD from active duty/combat
- Military Sexual Trauma
- Reintegration challenges



What is Psychological Trauma?

Emotional trauma is **the result of extraordinarily stressful events** that shatter people's sense of security, making them feel helpless and vulnerable in a perceived dangerous world.

Traumatic experiences often involve a threat to life or safety, but any situation that leaves one feeling overwhelmed and alone can be traumatic, even if it doesn't involve physical harm.

It's not the objective facts that determine whether an event is traumatic, but the *subjective emotional experience* of the event. The more frightened and helpless people feel, the more likely they are to be traumatized.

Types of Trauma

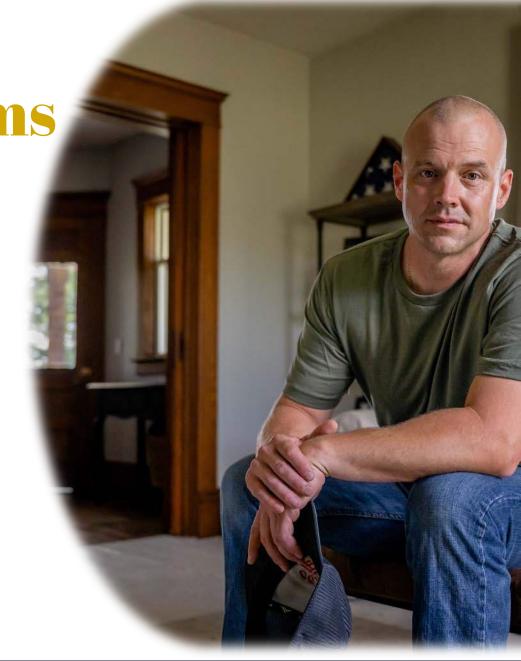
Civilian (ex. auto accident, house fire, etc.) Environmental (ex. natural disaster, hurricane) Combat

• Nearly 40 percent of soldiers who have served in Iraq and Afghanistan struggle with their mental health when they return home and one in three experience symptoms of PTSD or depression, or reported a possible exposure to a TBI while deployed. (The RAND Center for Military Health Policy Research, 2008)

Human Induced (ex. rape, military sexual trauma or torture, child or adult physical and sexual abuse)

Common PTSD Symptoms

- Nightmares, trouble sleeping
- Flashbacks, intrusive thoughts, or images
- Strong startle reactions
- Problems with anger
- Constantly feeling overly alert or on edge
- Avoidance of crowds, social gatherings, driving in traffic, or other potential triggers
- Anxiety or panic attacks
- Dissociation/fugue states
- Substance misuse



Commonly Overlooked Sources of Emotional/Psychological Trauma

Falls or sports injuries

Surgery (especially in the first 3 years of life)

The sudden death of someone close

An auto accident (The most common cause of PTSD among civilians)

The breakup of a significant relationship

A humiliating or deeply disappointing experience

The discovery of a life-threatening illness or disabling condition

Risk Factors

Not all potentially traumatic events lead to lasting emotional and psychological damage. Some people rebound quickly from even the most tragic and shocking experiences. Others are devastated by experiences that, on the surface, appear to be less upsetting.

Some **risk factors** make people susceptible to emotional/psychological trauma following a stressful experience:

- They are already under a heavy stress load or have recently suffered a series of losses.
- They have been traumatized before especially if during childhood.
- They have a history of mental health conditions
- They have low support

Important Variables

Magnitude

• The higher the magnitude of the trauma, the more likely the survivor is to develop a trauma disorder. Civilian traumas are believed to be of the lowest magnitude, whereas prolonged human induced traumas are of the highest magnitude.

Frequency

- single-blow, one-time events, such as a horrible accident, a natural disaster, or a violent attack.
- Ongoing, relentless stress or chronic trauma, such as living in a crime-ridden neighborhood or struggling with cancer.

A stressful event is most likely to be traumatic if:

- It happened unexpectedly
- The person was unprepared for it
- The person felt powerless to prevent it
- It happened repeatedly
- It was human induced

Effects of Trauma Overview

Following a traumatic event, most people experience a wide range of physical and emotional reactions. **These are NORMAL reactions to ABNORMAL events.** The symptoms may last for days, weeks, or even months or years after the trauma ended.

Symptoms may be:

- Cognitive
- Emotional
- Physical
- Relational

Cognitive Effects of Trauma

3 core assumptions are shattered:

- 1. The world is a benevolent place
- 2. The world is meaningful
- 3. The self is worthy
 - Loss of confidence in own judgment
 - Flashbacks (dissociative symptoms)
 - Difficulty concentrating, mental confusion
 - Dysfunctional beliefs and schemas
 - about safety, responsibility and choice

Emotional Effects of Trauma

- Shock, denial, or disbelief
- Anger, irritability, mood swings
- Guilt, shame, self-blame
- Feeling sad or hopeless
- Anxiety, fear and depression
- Feelings of shame, guilt, loss, fear, isolation, hopelessness
- Loss of pleasure in doing things that were once enjoyable (anhedonia)
- Emotional numbing, lack of affect
- Nightmares, terrifying memories, flashbacks

Physical Effects of Trauma

Insomnia or nightmares

Being startled easily

Racing heartbeat

Aches and pains

Fatigue

Difficulty concentrating

Edginess and agitation

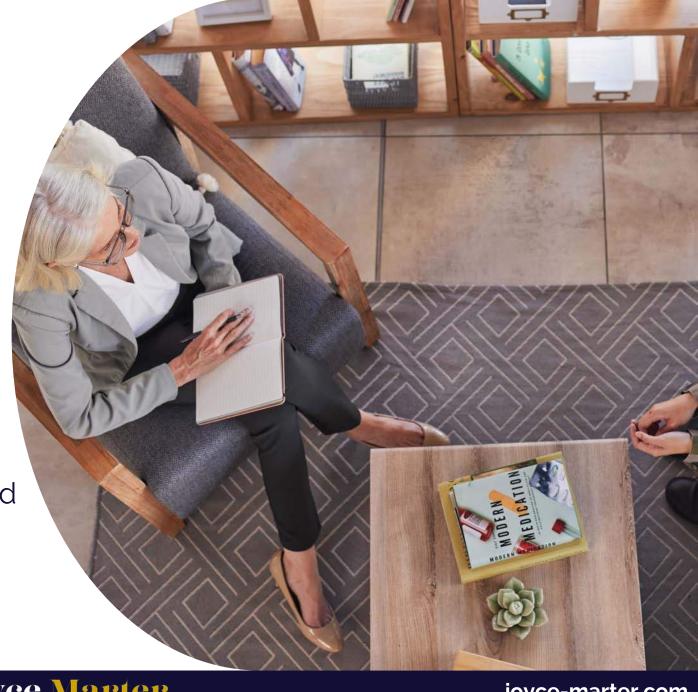
Muscle tension

Relational Effects of Trauma

- Withdrawing from others/difficulty connecting with others
- Unable to form or sustain close, satisfying relationships
- Having trouble functioning at home or work
- Avoiding more and more things that remind you of the trauma or are a perceived threat
- Emotionally numb and disconnected from others
- Impaired capacity to love or to be vulnerable

Effective Treatment is Available

- Individual counseling:
 - EMDR
 - Cognitive behavioral therapy
 - DBT
 - Mindfulness
- Support Groups
- Mental Health Medications
- Intensive outpatient, day treatment, and residential treatment
- EAP and other services available to Veterans



Practice Mental Health First Aid

- Help offered to a person developing a mental health problem or experiencing a mental health crisis
- Given until appropriate treatment and support are received or until the crisis resolves
- Not a substitute for counseling, medical care, peer support, or treatment



Cultivate a Positive Workplace Culture & Be the Bridge to Help

- Professional
- Inclusive
- Respectful
- Kind
- Collaborative
 - Lift one another up
 - Work as a team
- Psychologically safe



Mental Health First Aid Action Plan

- Assess for mental health issues, risk of suicide or harm
- Listen non-judgmentally
- Give reassurance and information
- Encourage appropriate professional help
- Encourage self-help and other support strategies



In Case of Imminent Risk

- Contact a family member
- Send employee to local ER
- Call 911
- Duty to warn if there is homicidal ideation
- Err on the side of caution





How can you turn a difficult conversation into a productive dialogue?

Improve the Communication Process

First seek to understand the other party

Recognize that you may not be understood

Notice when your emotional brain has been activated

Observe your process

Watch the other's reaction to you as a way toward selfawareness

Take a break and regroup

Seek help when needed

Re-engage when you are not triggered

Practical Solutions to Conflict

- Avoid a fight, flight or freeze response
- Avoid engaging tug-of-war
- Don't lock horns
- Unhook from the minutia
- "Zoom out" to gain perspective



Practical Solutions to Conflict

- Become rooted in the present
- Let go of defensiveness
- Take responsibility
- Appreciate the power of empathy
- Practice flexibility, adaptability & compromise



6 Steps to Effectively Resolve Conflict

- 1. Pause and get grounded.
- 2. Set an intention for the conversation. Visualize it going well.
- 3. Request a time to talk
 - Consider place and time
 - Face-to-face or voice-to-voice preferred over email/messaging
- 4. Speak with healthy assertiveness, positivity and respect
- 5. Listen with openness, empathy & healthy detachment
- 6. Collaborate to find a win-win compromise or resolution



Case Example

Angelica has returned from maternity leave and does not seem herself. Her appearance is disheveled, she has dark circles under her eyes, and looks un showered most days. She seems very distracted in meetings, is behind on her work, and recently snapped at one of the admin staff.

What do you think might be going on? As her supervisor, what would you do?



Case Example

Fred has become quite withdrawn and is no longer socializing with others at work. His affect is flat, and he is prone to anger outbursts at other staff who have made complaints that he is difficult to work with.

What do you think might be going on? As her supervisor, what would you do?





Thank You!

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