Second Stage Psychological Reactions to Trauma or Crisis

As the initial shock of our country’s crisis subsidies and we return to work and school, it is natural to expect that the intensity of our initial distress may begin to ease somewhat. We attempt to focus on the necessity of routine tasks and personal goals, while simultaneously sharing the collective concerns of the country and the world. It is not unusual, however, for a second set of emotional experiences to emerge which can be distressing or distracting in ways that differ from those associated with the initial shock. These types of experiences may be described in any of the following ways:

Delayed Reaction
“I am now feeling more distress than when I first heard about it.”

Explanation: When confronted with sudden and emotionally painful stimuli, the human psyche may at first create a state of emotional numbing to protect the impact from becoming incapacitating. As time elapses after the initial shock, the psyche is better able to tolerate the impact, particularly if the numbing gradually subsides and their stimuli are processed in less overwhelming quantities. A delayed reaction may occur as the numbing subsides.

Difficulty integrating the crisis with efforts to resume routine activities
“I know we need to get back to work but how can I think about my job, school, marketing, laundry, etc. while also knowing ‘We’re at war’?”

Explanation: Although returning to routing activities is important, it may be difficult to simultaneously cope with ramifications of being in a situation with which we are less familiar and which carries implications of danger.

Embarrassment or insecurity about one’s reactions
“I wasn’t a direct victim so why am I still feeling so distressed?”

Explanation: Just as we all have our own individual styles of approaching life, so do we also have various styles and time frames from handling stress. Even people who are not direct victims may still experience secondary effects which create valid distress that warrants attention.

Confusion about one’s thought process
“When the crisis first occurred I couldn’t think at all...now I can’t stop thinking.”

Explanation: Initial shock may interfere with thought processes or cognitive focusing skills, but as time progresses and the numbing subsides excessive thinking may occur in attempt to facilitate the integration of new stimuli.

Physical or emotional fatigue
“Although my physician reports that I’m not sick, and I’m sleeping my usual number of hours at night, I’m always feeling tired and drained.”

Explanation: When the mind is confronted with sudden painful stimuli, it utilizes all internal resources to cope with the unfamiliar input and to prevent overload. This ongoing process can drain normal sources of energy in order to maintain one’s capacity to function and tolerate the painful feelings.
Desire for closure and sense of finality
“Our country usually deals with stressful crises (earthquakes, floods, criminal acts, etc.) that have somewhat of and end in sight, but this type of emergency seems to continue or intensify as time goes on.”

Explanation: In an effort to heal, the human psyche seeks closure alone with some resolution of issues and the termination of pain. Knowing that event will come to a conclusion at a time fairly soon, and that the painful phase has already peaked provided as sense of approaching relief. Discussions or actions of war however do not provide this sense of eventual finality because additional episodes of emotional trauma may continue to occur possibly with increasing intensity.

Emergence of prejudices and biases previously not felt
“I’m not usually unfair, but I find myself feeling angry and prejudiced in ways I never felt previously.”

Explanation: Severe emotional stress may alter our usual defense structures, while simultaneously creating the need for an object or group upon which to displace our pain. We may then be confronted with internal processes against which we previously were able to defend or censor. Furthermore, the feeling of being attacked evokes primitive feelings of a survival need to focus our rage on an immediate target, even if this is not rational or well-informed.

Unexplainable emotional reactions
“I don’t know why I’ve been feeling this constant, mild depression all day.”
“I’m really feeling better and no longer totally stunned by the event, but suddenly I have crying spells.”

Explanation: After the immediate impact of a crisis subsides, we may be able to focus on other sources of stimuli without attending to all out emotional reactions. This suppression or repression of feelings, however, does not eliminate underlying emotional processes that are unconscious and less accessible to our awareness.

Hypersensitivity to all life events
“I’m crying easily at the slightest things and over-reacting to everything.”

Explanation: When impacted by severe emotional trauma, our psychological response systems may lose their “objectivity” and normal perspective. Becoming hypervigilant of new or unusual stimuli may have been a survival mechanism in more primitive phases of our development, but it often creates hypersensitivity.

Re-awakening of previous experiences or feelings of trauma
“I don’t know anyone directly involved in the tragedy, and I have never had a similar emergency in my life, but suddenly I’m remembering details of my auto accident that happened 25 years ago.”

Explanation: Any intense stimuli can re-awaken a previous traumatic experience, particularly if even one small sensation or aspect of it was similar to the characteristics of the current trauma.

Reassessment of life’s meaning
“Prior to this crisis I was feeling so much excitement about my vacation plans and movies I wanted to see, but now everything fun or entertaining seems boring and superficial.”

Explanation: The intensity of psychological stimulation in a traumatic crisis may create (even temporarily) a new sense of values or depth of experience so that activities which previously may have provided sufficient satisfaction may suddenly be experienced as mild or boring by comparison. As the initial shock of the trauma subsides, one’s capacity for enjoying light-hearted activities returns. The reassessment of one’s life goals, however, may persist and ultimately facilitate the development of more meaningful life plans or experiences.
To deal with these reactions it is important to acknowledge one’s own processes and style of coping (rather than to suppress memories, thoughts, or feelings). Furthermore, negative comparisons of one’s own coping mechanisms with the style of others is unproductive, and may exacerbate feelings of shame, insecurity, anxiety, or depression. Having intense emotional reactions after the initial shock has subsided is not unusual or indicative of psychological weakness, but rather is a relevant and natural step in the process of healing.

Coping strategies

- Allow yourself to react in your own individual way.
- Don’t jump to conclusions about the long-term effects or severity of the crisis. Perceptions and judgments during an emergency are frequently inaccurate.
- Control impulses to soothe anger with impulsive, aggressive, actions. Poor impulse control can ultimately exacerbate problems and intensify the crisis.
- Share your thoughts and feelings with others.
- Surround yourself with family and friends that are supportive (rather than critical).
- Do not react to rumors; educate yourself with facts.
- Be patient, allowing yourself time to recover.
- Take good care of yourself, attending to your basic needs: healthy foods, adequate sleep, exercise, and nurturing relationships.
- Return to your routine activities as quickly as possible.
- If religion is healing to you, seek spiritual support or consultation.
- Minimize tendencies towards procrastination, since putting off obligations tends to ultimately create more stress.
- Seek medical consultation if the distress is creating somatic symptoms.
- Do not attempt to self-medicate by excessively indulging in food, alcohol, or drugs.
- Try to maintain perspective. Realize that your perceptions and feelings may be related to your stress.
- Try to not personalize other’s reactions to you. (They, too, may be reacting to their own experiences of stress.)
- Volunteer your services or donate blood. Contributing to the solution reduces feelings of powerlessness.
- Speak with a licensed therapist in counseling or psychology.

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