



UTE LAWRENCE-FISHER
CEO & FOUNDER
Post Traumatic Stress Disorder
Association of Canada

What is Mindfulness?

INVISIBLE TRIGGERS

STIGMA

SUICIDE

ABUSE SYMPTOMS

LONLINESS

HELPING THOSE WHO SUFFER FROM PTSD

How Can I Cultivate Greater Mindfulness?

Kindness - An Essential Companion of Mindfulness

DEPRESSION

EDUCATION

ANXIETY

VETERANS

POST TRAUMATIC STRESS DISORDER ASSOCIATION OF CANADA

Helping those who suffer from PTSD

How Can I Cultivate Greater Mindfulness?

VETERANS TRAUMA

Mindfulness Includes Pain, and Requires Readiness

STIGMA

LONGTERM EFFECTS

How Could Mindfulness Help Me?

ABUSE

Kindness - An Essential Companion of Mindfulness

Resources for Learning To Be More Mindful

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A proud supporter of PTSD



POST TRAUMATIC STRESS DISORDER

HELPING THOSE WHO SUFFER FROM PTSD

Other Resources on Mindfulness and Meditation

introduction



A young man who has spent his life learning the family business finally takes over the helm of his father's retail empire. A few years later the business fails and he is forced to file for bankruptcy. Soon it becomes impossible for him to do everyday things. Even getting out of bed in the morning becomes an overwhelming task. Eventually he shuts himself off from friends and family despite their efforts to bolster him.



A vital, strong, and accomplished woman is killed. Her parents, who have recently retired, are devastated. Their plans to travel and enjoy their retirement years are put on hold. Eventually, the couple splits up.



A woman, on her way to a business meeting, is involved in a horrific car accident. She walks away with just a few cuts and scrapes. Physically, she is fine. But she finds she cannot sleep, cannot concentrate, is jumpy, short-tempered and no longer has patience with her staff. Soon she is unable to run her business.

These are the faces of those who suffer from Post Traumatic Stress Disorder.

They are everyday people, like you and me, who have experienced a life-altering situation and are unable to get back to living their lives the way they used to.

definition

PTSD is a normal reaction to an abnormal event.

what is PTSD?

Post Traumatic Stress Disorder (PTSD) is in many ways a normal response to an abnormal situation. While the events that create trauma vary widely, they have these common characteristics:

- The events are unexpected
- You are unprepared for them
- They are unavoidable

Traumatic or life-threatening events can include:

- Combat/military experience
- Child sexual or physical abuse
- Terrorist attacks
- Sexual or physical assault
- Serious accidents
- Natural disasters

Life-altering events can also create an anxiety disorder:

- Job loss
- Business loss
- Divorce
- Loss of a loved one
- Exposure to death
- Life-threatening illness

Symptoms can occur weeks, months, or even years after a traumatic or life-altering event.

WAYS TO RECOGNIZE POST TRAUMATIC STRESS DISORDER

- Re-experiencing the event through vivid memories or flash backs
- Feeling emotionally numb
- Feeling overwhelmed by what would normally be considered everyday situations and diminished interest in performing normal tasks or pursuing usual interests
- Crying uncontrollably
- Isolating oneself from family and friends and avoiding social situations
- Relying increasingly on alcohol or drugs to get through the day
- Feeling extremely moody, irritable, angry, suspicious or frightened
- Having difficulty falling or staying asleep, sleeping too much and experiencing nightmares
- Feeling guilty about surviving the event or being unable to solve the problem, change the event or prevent the disaster
- Feeling fearful and a having a sense of doom about the future

Recognizing these symptoms in oneself or others is the first step toward finding appropriate treatment and eventually being able to recover.

(Adapted from the American Counselling Association)

Roméo Dallaire

PHOTO
HERE

Lieutenant General the Honourable Roméo A. Dallaire, O.C., C.M.M., G.O.Q, M.S.C., C.D., (Retired), Senator

Meet Roméo Dallaire, Honourary Chair, Post Traumatic Stress Disorder Association

The Honourable Roméo Dallaire has had a distinguished career in the Canadian military achieving the rank of Lieutenant-General and Assistant Deputy Minister of Human Resources. In 1994, General Dallaire commanded the United Nations Assistance Mission for Rwanda (UNAMIR) and his experiences there, in the midst of a genocide that claimed 800,000 lives in 100 days, became the subject of his 2003 award-winning book, *Shake Hands with the Devil: The Failure of Humanity in Rwanda*.

Due to the Post Traumatic Stress Disorder (PTSD) he suffered from the horrors of the genocide, General Dallaire was medically released from the military in 2000. Called to the Senate of Canada 2005, Senator Dallaire has continued to work tirelessly as an author, lecturer and humanitarian to raise awareness of PTSD and to champion research into the causes, diagnosis, treatment and prevention of PTSD.

“As Honourary Chair, I look forward to assisting the PTSD Association in its efforts to further the public’s understanding of PTSD, particularly as it affects soldiers, veterans and their families,” Senator Dallaire said. “The Association boasts an impressive roster of clinical advisors and researchers who have contributed greatly to our knowledge of PTSD and who will continue to make advances in this important field.”

“We are extremely grateful and fortunate that Senator Dallaire has accepted our invitation to be Honourary Chair,” said Ute Lawrence, the Association’s founder and CEO and author of *The Power of Trauma: Conquering post-traumatic stress disorder*. “His personal commitment to raising awareness and advocating for those affected by PTSD is inspiring,” she said. “We could not have identified a better public figure than Senator Dallaire to support the goals and mission of our organization.”

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case study – research excerpt

A couple was trapped in their car during a serious motor vehicle accident. The accident occurred on a major highway, involved over 100 vehicles, and caused a number of deaths and serious injuries. The couple crashed into the car in front of them, which was already involved in the accident. Although neither sustained serious injuries, they were trapped in their car for several minutes and feared that they would die. During that time, they also saw a child burn to death. Four weeks after the accident, both the man and the woman continued to have difficulty dealing with the accident. Both of them experienced sensory flashbacks to the accident, and had frequent nightmares about it. They also both had difficulty sleeping, and reported being more irritable than before the accident occurred. Both also had difficulty functioning at work, and they avoided driving and other reminders of the accident. (This case is reported in detail in Lanius et al., 2003).

When assessed with the Clinician Administered PTSD Scale (CAPS), they both met criteria for Acute Stress Disorder, with a score of 74 for the man and a score of a score of 86 for the woman. Both agreed to participate in a functional neuroimaging experiment during which they would listen to a personalized script based on their descriptions of their experiences during the accident.

Although they had experienced the same event, the couple had very different responses to their scripts during the experiment. The man reported feeling intense anxiety and emotional arousal, and his thoughts focused on ways to escape the experience. By contrast, the woman reported feeling “numb” and “frozen” while she listened to the script. For both of them, the experiences they had while remembering the event in the scanner were similar to their reactions at the time of the accident. The man reported having been emotionally aroused during the accident, and he managed to escape the car with his wife. The woman reported that she was “in shock” during the accident, and although not physically pinned, she said that she had felt unable to move, completely frozen. Thus, the couple had different phenomenological responses both to the accident and to the script they heard during the experiment.

In addition to the differences in their reports of how they felt while remembering the accident, the couple had different physiological and neural responses during the neuroimaging session. The man’s heart rate increased by 13 beats per minute, compared to his resting heart rate while lying in the scanner before the script began. He also showed an increase in activity in a number of brain areas, specifically the anterior frontal and anterior cingulate cortex, superior and medial areas of the temporal lobe (including the right amygdala), the left thalamus, and areas of the parietal and occipital lobes. The woman did not show an increase in heart rate while listening to the script, and the only area in which she showed an increase in brain activity was in the occipital lobe (Brodmann areas 18 and 19) (see Figure 1).

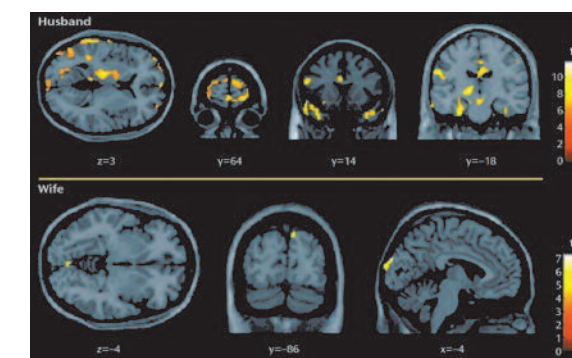


Figure 1

commentary

Research on PTSD aims to find the biological, psychological, and environmental factors that appear to play a causal role in the development of the disorder and to understand the ways in which people with PTSD respond differently to events than do people without the disorder. We know that some people who experience a traumatic event develop PTSD while others are able to “put the event behind them.” Therefore, research often compares responses to stimuli that act as trauma reminders in people with and without PTSD. These responses may be brain changes, changes in other biological factors such as levels of particular chemicals in the body, or differences in the ability to perform tasks that require memory or concentration either during or after experiencing a reminder of a trauma.

Even though our knowledge of the causes and the physiological changes that contribute to PTSD is still incomplete, there are treatments available for the disorder and some research looks at the effects of different types of treatment in order to see how effective they are. Such research may compare different drugs, or psychological therapies, and it may also be combined with the research described above in order to help us to better understand how the treatments work. In summary, research on PTSD, like research on other medical conditions, spans a wide range of approaches and techniques. Together, these diverse areas of research will give us a better understanding of the “whole picture” of this disorder.

– Dr. Ruth Lanius

helping those who suffer from PTSD

The good news is that PTSD is treatable. Unfortunately, many health care providers are not always able to link the symptoms with the diagnosis. Making people aware of PTSD, including individuals whose loved ones have experienced a traumatic situation, is one of the best ways to assist in an accurate diagnosis. Accurate diagnosis can lead to treatment and, eventually, healing, growth, and recovery.

PTSD association

The mission of the Post Traumatic Stress Disorder (PTSD) Association is to honour the human spirit and empower individuals suffering from PTSD. Our ultimate goal is to return the individual to full health. We strive to achieve this through education, links with appropriate services, and facilitation of research into both the cause of PTSD and the best treatment options for this disorder.

Our initiatives include:

- Developing educational materials, and offering courses, seminars and conferences.
- Collecting and disseminating information to the public and healthcare providers so that families, professionals and educators will be able to obtain the most current information on diagnosis and treatment of PTSD.
- Raising funds through events and activities, and soliciting financial assistance from organizations, corporations, individuals and government.

get involved

Trauma can affect all people from all walks of life. Would you like to share your experience with PTSD and tell others the best ways you found to cope?

Make a short (1 – 2 minute) video of your story. Briefly describe the traumatic or life-altering event you experienced and then share the best ways you have to cope.

If you'd like to participate, send an email to info@ptsdassociation.com and we'll provide instructions and assistance.

support the PTSD association

Does this information resonate with you?

Would you like to support the work of the PTSD Association?

Would you like to see a purpose-built Trauma Centre just for the treatment and support of people suffering from PTSD?

how to donate

The Post-Traumatic Stress Disorder Association is a Canadian registered charitable organization. You will receive a tax receipt for your donation.

Visit our website at www.ptsdassociation.com and click **DONATE** or send your cheque to **PTSD Association, 93 Dufferin Avenue, London, ON. N6C 1K3 Canada**

resources

Sidran Institute

sidran.org

National Center for Posttraumatic Stress Disorder

ptsd.va.gov

Canadian Mental Health

cmha.ca/bins/content_page.asp?cid=3-94-97

Healthy Place.com

healthyplace.com/communities/abuse/site/post-traumatic_stress_disorder.htm

National Institute of Mental Health

nimh.nih.gov

Anxiety BC - PTSD

anxietybc.com/resources/ptsd.php

David Baldwin's Trauma Information Pages – Comprehensive information and resources.

trauma-pages.com

Trauma Centre

traumacenter.org

Post-Traumatic Gazette

patiencepress.com/index.shtml

Victim Assistance Online

www.vaonline.org/trauma.html

Gift from Within

www.giftfromwithin.org/index.html

Jim Hopper

www.jimhopper.com

The Veterans Affairs Canada

www.vac-acc.gc.ca

Veterans Affairs Canada offers many specialized services for the treatment of operational stress injuries such as PTSD. Family members are also supported.

National Center for Post Traumatic Stress Disorder

www.ncptsd.ca.gov

Operated by the US Department of Veterans Affairs, this comprehensive site offers support to veterans and the general public on PTSD.

National Child Traumatic Stress Network

www.nctsn.net

Aiming to raise the standard of care and improve access to services for traumatized children, their families and communities.