

Workbook

# Coping with Trauma



Good Thinking   
Digital Mental Wellbeing for London

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**NHS**

South London and Maudsley  
NHS Foundation Trust

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[slam.nhs.uk](https://slam.nhs.uk)

# Introduction

Many people experience something traumatic at some point in their life. A traumatic event is one where you are in danger, perhaps where there is threat to life or safety (e.g. through an accident, assault, natural disaster, war, illness or abuse). It can also be an event in which you witness something traumatic happening to others or learn about it happening to a loved one. Afterwards, it's common to experience a range of reactions.

- You might have emotional responses, such as:
  - fear
  - anger
  - sadness
  - shame and guilt
  - helplessness
  - horror
  - confusion
  - feeling numb
  - feeling disorientated
  - feeling overwhelmed
- You might have repeated distressing thoughts of the trauma, see pictures of it in your mind or feel as if it is happening again in the present
- You might re-experience smells, sounds or physical sensations that you had at the time
- You might struggle to sleep, have disturbed sleep or nightmares
- You might want to avoid people, places and activities that you didn't before
- You might feel jumpy, easily startled and always on the lookout for danger

These reactions are completely normal and might fade on their own a few weeks after the trauma, particularly when you have support from your loved ones or close friends. But if any of these reactions continue and start to affect how you live your life, the good news is that there are therapists and psychologists in the NHS who can help you to recover and feel better.

You can find out more from your local psychological therapies services. Go to [bit.ly/2K3EE50](https://bit.ly/2K3EE50) for more information.

In this workbook, trauma expert Caroline Harrison, a Cognitive Behavioural Therapist at the Centre for Anxiety Disorders and Trauma, South London and Maudsley NHS Foundation Trust, provides a series of techniques that are helpful when you:

- Experience overwhelming emotions, such as anger, fear and despair
- Have a flashback, intrusive memories or wake from a nightmare
- Re-experience feelings in your body from the time of the trauma
- Feel unreal or spaced out
- Want to avoid using other coping strategies that might have harmful consequences, such as drinking alcohol and using drugs

The seven techniques described in this workbook are to help people who have experienced trauma and are out of danger now. They may not help if you are still going through the trauma or if you are currently in danger – in these situations, the techniques could potentially make you feel worse. However, if the trauma is over and in the past, these techniques can help you focus on what's happening around you, stay in the present and help to remind you that the danger is over and that you are safe now.

The techniques cannot be as effective as seeing a trained therapist so there is nothing wrong if you don't find them helpful. Sometimes you need to go through them with a trained therapist who can help find the best techniques for you and also offer other support to help you feel better. But we hope these techniques are helpful for those who are coping with common reactions to trauma, especially if you're already waiting to see a therapist.

## Coping with Trauma: Techniques

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If you need urgent help and you're already in touch with your Community Mental Health Team, please contact them. Visit [good-thinking.uk/urgent-support](https://www.good-thinking.uk/urgent-support) to find details of additional support, such as **NHS 111**, your **nearest A&E**, **crisis lines** in your local area and other support organisations, such as **Shout** (text **SHOUT** to **85258**).

## Technique 1

# Grounding statement

“I am safe now”



A grounding statement is made up of a few positive words to remind you that you got through the trauma and are surviving in the present. This might be:

“I am safe now. It is (today’s date) and the trauma isn’t happening now.”

or

“I am (wherever I am at this moment). It’s not the place where the trauma happened. The trauma isn’t happening now and I am safe.”

As well as reminding you that you are safe, your grounding statement might acknowledge the feelings you have. It could be:

“I am feeling frightened but I am safe now.”

or

“I survived the trauma and I am safe now.”

**Exercise: Write your own grounding statement(s) below.**

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## Technique 2

# Grounding across the five senses



Use your five senses (sight, sound, smell, touch and taste) to help you notice your current environment and focus on the present rather than the trauma in the past. You can use as many of your senses as you like – try to find something that works for you. It might depend on how you feel at the time.

### Sight



What can you see around you? What colours are there?  
How many trees/birds/windows do you see?

What can you see that tells you that things are different to the time of the trauma? Are you in a different place? Is it a different time of day?

Have a good look around and really focus in on the details of everything you can see.

### Sound



Do you notice any noises at the moment? Can you focus on them one by one? Which are close by and which are further away?

Listen carefully and take notice of the sounds around you.

You could also listen to music or a podcast to remind you that you're in the present and the trauma is not happening now.

### Smell



Find a smell you like that reminds you of a time you were safe or felt happy. This might be a favourite perfume, a flower, perhaps some tea.

Make the smell portable, if you can (e.g. put it on a tissue in your pocket). When you get images, memories, flashbacks or feel spaced out, unreal or overwhelmed, you can use the smell to help ground you in the present moment.

### Touch



Find an object that you like and that you associate with good memories – ideally it should be something you have got since the trauma(s) that is small and good to fiddle with (e.g. a keyring, pebble, fidget spinner or something similar).

When feelings and memories become overwhelming, focus on the object's texture, colour, shape, temperature etc to feel more grounded in the present. You could also focus on throwing it up in the air and catching it.

If you don't have anything to hand, notice what is around you (e.g. the carpet under your feet). You could also run your hands under cold water, lean against the wall, move around or tense and relax your muscles. It can be anything that works for you and reminds you that the trauma isn't happening now.

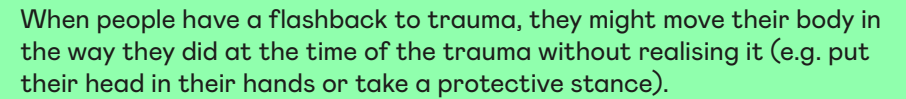
### Taste



If you get flashbacks and think you can taste something from the time of the trauma (e.g. blood in the mouth), try to replace that taste.

Chew a strong mint or some gum to remind you that the trauma isn't happening now.

# Body movement

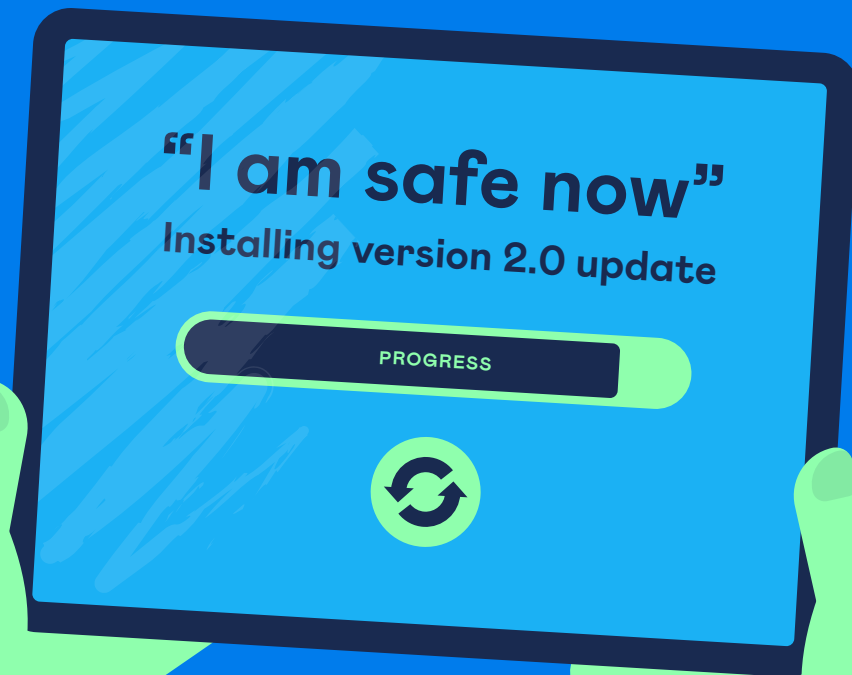


**Exercise: Find a way to move your body that perhaps you couldn't do at the time of the trauma or that just makes you feel good. Write down what works for you and try it now to remind you that the trauma is over and you are safe.**

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## Technique 4

# Updating



After strong reminders, images, flashbacks or nightmares about the trauma, it can really help to remind yourself of what you know now; we call this 'updating'. This might be information you couldn't take in at the time because it was too frightening or confusing.

It's common after trauma for people to blame themselves – often for things that were not their fault. Talking to a therapist or a loved one can help with this. When you're reminded of the trauma, try to add an update such as:

"I am safe now."

or

"Now I know I didn't die."

or

"Now I know it  
wasn't my fault."

or

"I feel tired/achy/cross/stressed  
now but it's proof that I'm alive."

**Exercise: Write your own updating statement(s) below.**

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## Technique 5

# Same/ different



When you look at the image on the previous page, can you spot the difference? Traumatic memories are easily triggered by things around you that are similar to those from the time of the trauma or by any sensations in your body you may also have been feeling at the time (e.g. anxiety, muscle tension, pain).

These triggers are not always obvious; it can sometimes seem as if the memories come out of the blue. This isn't your mind being out of control but due to "hidden" triggers you are not aware of, either out there in the world or inside the body (like emotional reactions or body position). When this happens, it helps to remind yourself what is different to the trauma; what was then and what is now. For example:

"Yes, it's sunny today and I'm on my bike – just like at the time of the trauma – but all these other things (take time to notice them) are different, so I know I am safe now."

or

"Although I am feeling anxious, it's about something else. The trauma is over and I am safe now."

You can also think about things that are different about you. For example:

"I am older/taller/have a different hairstyle/wear glasses, which is not the same as at the time of the trauma."

**Exercise:** In the space below, write what is different about you and your situation now, which tells you that you are safe.

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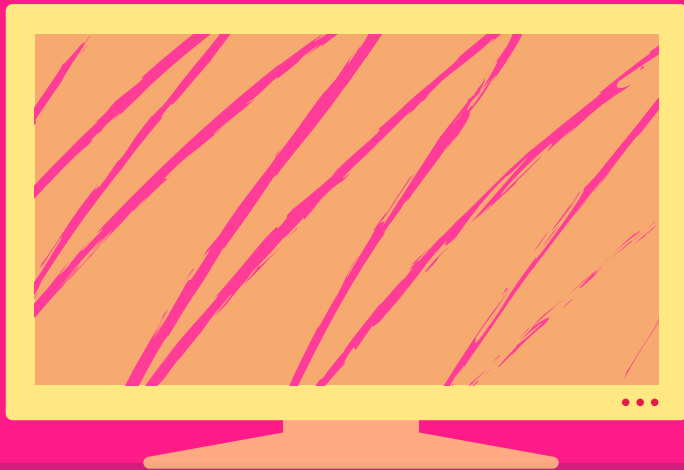
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## Technique 6

# Imagery work



Sometimes, vivid images of the trauma pop into people's minds, which can be distressing. The following technique can help:

- Try putting the image(s) on an imaginary TV screen for which you have the remote control
- Make the image go blurry or turn it to black and white
- Move the image further and further away from you
- See if you can stop the image, fast forward past it or, at least, turn the sound or brightness down

These images are happening inside your head, so the good news is that you can change them to a less threatening version. Sadly, it's not possible to change what happened during the trauma but, if you find yourself stuck with a distressing image, it can help to:

- Change it to something less frightening (e.g. by removing the blood or making the scene look more peaceful)
- Imagine someone you trust helping you in the scene
- Imagine painting over the image or wiping it away

It might take a little time playing around with this technique but, eventually, you should hopefully find something that works.

**Exercise:** Which image technique helps you the most? If you change the image, what do you change it to? Describe your less threatening image below, using lots of sensory detail (e.g. what you see, hear or smell in the changed version).

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## Technique 7

# Nightmare rescripting



Nightmares are scary. The good news is they are only happening in your head, which means if they were a film, you would be the director and can completely change the script (and your special effects budget has no limits).

### Try this technique to rescript your nightmare:

- Write down what happens in the nightmare, then look over it and decide at what point you want the dream to change (this should be before the bad stuff happens)
- Get rid of what you have written from this point on and rewrite the script with how you want the dream to go instead
- Remember that anything you like can happen (you are the director, so you're in charge of special effects!) and it doesn't matter if the idea that pops into your head is bizarre or surreal (sometimes these ideas are the best ones!) provided they involve you being safe – for example, you could be a superhero with special powers
- Use lots of sensory detail as you write it down (e.g. smells, sounds and tastes)
- Read it to yourself a few times before you go to sleep

See how this goes – and don't worry if it doesn't seem to work as it may need tweaking.

**Exercise:** Write down the new version of how you want your dream to go, using lots of sensory detail (e.g. smells, sounds and tastes).

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## Useful Good Thinking resources

Click the links to view each resource

### **Advice for healthcare professionals**

[www.good-thinking.uk/coronavirus/advice-for/healthcare-professionals/](http://www.good-thinking.uk/coronavirus/advice-for/healthcare-professionals/)

### **Advice for people working in residential social care and home care**

[www.good-thinking.uk/coronavirus/advice-for/people-working-social-care/](http://www.good-thinking.uk/coronavirus/advice-for/people-working-social-care/)

### **How to cope with bereavement and grief**

[www.good-thinking.uk/coronavirus/how-to/cope-bereavement-and-grief/](http://www.good-thinking.uk/coronavirus/how-to/cope-bereavement-and-grief/)

### **How to deal with stress**

[www.good-thinking.uk/coronavirus/how-to/deal-with-stress/](http://www.good-thinking.uk/coronavirus/how-to/deal-with-stress/)

### **Looking after yourself and supporting your colleagues (advice for healthcare professionals)**

[www.good-thinking.uk/coronavirus/advice-for/looking-after-yourself-and-supporting-your-colleagues-healthcare-professionals/](http://www.good-thinking.uk/coronavirus/advice-for/looking-after-yourself-and-supporting-your-colleagues-healthcare-professionals/)

### **Podcast: Dealing with stress and trauma (Professor Neil Greenberg)**

[www.good-thinking.uk/coronavirus/personal-stories/dealing-stress-and-trauma/](http://www.good-thinking.uk/coronavirus/personal-stories/dealing-stress-and-trauma/)

### **Podcast: Shout – the crisis text line**

[www.good-thinking.uk/coronavirus/personal-stories/shout-the-crisis-text-line/](http://www.good-thinking.uk/coronavirus/personal-stories/shout-the-crisis-text-line/)

## Other useful resources

### **Centre for Anxiety Disorders and Trauma, South London and Maudsley NHS Foundation Trust**

<https://www.slam.nhs.uk/national-services/adult-services/centre-for-anxiety-disorders-and-trauma/>

### **COVID Trauma Response Working Group**

<https://www.mentalhealthatwork.org.uk/organisation/covid-trauma-response-working-group/>

### **BABCP (The lead organisation for CBT in the UK and Ireland)**

<https://babcp.com/>

### **EMDR Association UK**

<https://emdrassociation.org.uk/>

### **Centre for Mental Health (Trauma, mental health and coronavirus)**

[www.centreformentalhealth.org.uk/publications/briefing-56-trauma-mental-health-and-coronavirus](http://www.centreformentalhealth.org.uk/publications/briefing-56-trauma-mental-health-and-coronavirus)

### **Intensive Care Society (Wellbeing hub)**

<https://www.ics.ac.uk/ICS/Wellbeing/ICS/Wellbeing.aspx?hkey=4f549260-379b-4b0e-9600-49d8a8d58d9a>

### **MIND (PTSD advice)**

<https://www.mind.org.uk/information-support/types-of-mental-health-problems/post-traumatic-stress-disorder-ptsd-and-complex-ptsd/about-ptsd/>

### **NHS (PTSD advice)**

[www.nhs.uk/conditions/post-traumatic-stress-disorder-ptsd/](http://www.nhs.uk/conditions/post-traumatic-stress-disorder-ptsd/)

### **Rethink Mental Illness (PTSD advice)**

<https://www.rethink.org/advice-and-information/about-mental-illness/learn-more-about-conditions/post-traumatic-stress-disorder-ptsd/>

### **Royal College of Psychiatrists (PTSD advice)**

<https://www.rcpsych.ac.uk/mental-health/problems-disorders/post-traumatic-stress-disorder>

### **Solent NHS Trust (Memory Aid: CBT for Trauma)**

[www.academy.solent.nhs.uk/media/37860/2020-memory-aid\\_cbtft\\_printable.pdf](http://www.academy.solent.nhs.uk/media/37860/2020-memory-aid_cbtft_printable.pdf)

### **YoungMinds (PTSD advice)**

<https://youngminds.org.uk/find-help/conditions/ptsd/>

## Acknowledgements

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## Notes

