PTSD Post-Traumatic Stress Disorder

PTSD is a set of symptoms that may develop after a traumatic event.

related conditions and feelings: trauma, stress, fear, anxiety, shame & guilt

What it feels like

You might have **intrusive thoughts**, **flashbacks**, or **nightmares** about traumatic events. You may feel **irritable**, have **strong reactions** to things, and **startle** more easily. You might be **overwhelmed** by negative feelings like **guilt**, **shame**, **sadness**, or **self-blame**. You may feel **on guard** and **hypervigilant** - and you may **have trouble sleeping**.

Why you might be feeling it

When something terrible happens, our bodies try to protect us. As a means to survival, our brains will play the traumatic events over and over again, in the hope of preparing us for future threats.

But instead of feeling safer and more prepared, we can end up feeling stuck.

PTSD can become a painful cycle of visiting and revisiting the worst things that have happened to us.



PTSD is not you refusing to let go of the past.

It is the past refusing to let go of you.

It can get better.

What it looks like

Avoiding anything that reminds us of traumatic events - including **people**, **places**, **sounds**, and **smells**.

We may even avoid being with our baby or the people who care about us most.

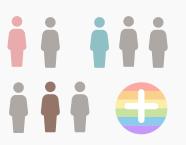
Some people say that they feel numb.

Others may try to stay busy to avoid sitting with what they're feeling.

Some of us use **drugs and alcohol** as a coping strategy.

How Common is PTSD?

Up to **53% of mothers** and **33% of fathers** report symptoms of posttraumatic stress after the NICU. And a third of birthing women report some symptoms of PTSD related to giving birth. For Black, Indigenous, Latine, and LGBTQIA+ parents, this stress can be greater.



Trauma-Informed Care

Trauma-informed care is care that:

- recognizes that many of us have had traumatic experiences that stay with us
- appreciates that medical care and child birth can be traumatizing
- avoids creating additional trauma

What you can do

- Let your providers know what trauma-informed and traumaresponsive care looks like for you.
- Tell your care team about the things that trigger or activate your stress response and ask for their help managing those triggers.
- Ask to complete a PTSD questionnaire to help assess your symptoms.
- Appreciate that this is a common, expected response to trauma.
- **Be kind and patient** with yourself.

Things that help

- Taking a slow, deep breath in through your nose and out through your mouth.
 Repeat. Slow, deep breathing helps calm your nervous system.
- Paying attention to and take care of your needs. Have something to eat, drink some water, go for a walk, take a nap, or talk to someone you trust.

Medications and therapies that can help

- Cognitive Processing Therapy (CPT)
- Eye Movement Desensitization & Reprocessing Therapy (EMDR)
- Trauma-focused Cognitive Behavioral Therapy (CBT)
- Medications like SSRIs and SNRIs that can help us cope with symptoms of PTSD

Suicide and Crisis Lifeline dial 988 988lifeline.org Call. Text. Chat.



Talking about PTSD

It is common to experience symptoms of acute and traumatic stress during and after your NICU stay. **YOU ARE NOT ALONE**. Many of us have felt the way you're feeling now. With help and support, you can understand and manage the way you respond to traumatic stress and the things that activate it. You can learn new strategies that lessen the negative impact of trauma.