**Module 5: Trauma- And Stressor-Related Disorders**

LEARNING OBJECTIVES

**5.1. Stressors**

* Define stressor.
* Identify and describe common stressors.

**5.2. Clinical Presentation**

* Describe how PTSD presents.
* Describe how acute stress disorder presents.
* Describe how adjustment disorder presents.
* Describe how prolonged grief disorder presents.

**5.3. Epidemiology**

* Describe the epidemiology of PTSD.
* Describe the epidemiology of acute stress disorder.
* Describe the epidemiology of adjustment disorders.
* Describe the epidemiology of prolonged grief disorder.

**5.4. Comorbidity**

* Describe the comorbidity of PTSD.
* Describe the comorbidity of acute stress disorder.
* Describe the comorbidity of adjustment disorder.
* Describe the comorbidity of prolonged grief disorder.

**5.5. Etiology**

* Describe the biological causes of trauma- and stressor-related disorders.
* Describe the cognitive causes of trauma- and stressor-related disorders.
* Describe the social causes of trauma- and stressor-related disorders.
* Describe the sociocultural causes of trauma- and stressor-related disorders.

**5.6. Treatment**

* Describe the treatment approach of psychological debriefing.
* Describe the treatment approach of exposure therapy.
* Describe the treatment approach of CBT.
* Describe the treatment approach of Eye Movement Desensitization and Reprocessing (EMDR).
* Describe the use of psychopharmacological treatment.

KEY TERMS

**Acute Stress Disorder**: A mental health condition characterized by the development of severe anxiety, dissociation, and other symptoms that occur within one month after exposure to a traumatic event. Symptoms are similar to PTSD but occur in a shorter timeframe.

**Adjustment Disorder**: A group of symptoms, such as stress, feeling sad or hopeless, and physical symptoms, that can occur after going through a stressful life event. The reaction is stronger than expected for the type of event that occurred.

**Alterations in Arousal and Reactivity**: This term refers to changes in an individual's arousal and responsiveness, often seen in PTSD, which can include increased irritability, hypervigilance, exaggerated startle response, concentration problems, and sleep disturbances.

**Amygdala**: A part of the brain involved in processing emotions, especially those related to survival, such as fear and aggression. It plays a role in how we respond to emotionally laden stimuli and is involved in the formation of emotional memories.

**Avoidance of Stimuli**: A behavior commonly associated with PTSD and other anxiety disorders, where an individual actively avoids thoughts, feelings, conversations, activities, places, or people that remind them of the traumatic event.

**Body Scan**: A mindfulness technique often used in therapy where individuals pay attention to parts of their body and bodily sensations in a gradual sequence from feet to head, often used to reduce stress and increase body awareness.

**Closure**: In psychological terms, closure refers to an individual's need for a firm answer to a question and an end to uncertainty. It is often sought in the context of personal trauma or loss.

**Cognitive-Behavioral Therapy (CBT)**: A form of psychotherapy that treats problems and boosts happiness by modifying dysfunctional emotions, behaviors, and thoughts, emphasizing the importance of underlying thought in determining how we feel and behave.

**Cortisol**: A steroid hormone released by the adrenal glands in response to stress. It is often referred to as the "stress hormone" as it's involved in the body's stress response.

**Desensitization**: A process in psychotherapy where a patient is gradually exposed to an anxiety-provoking stimulus in order to reduce the emotional response to it over time.

**Epinephrine**: Also known as adrenaline, a hormone and a neurotransmitter involved in the body's fight-or-flight response. It increases heart rate, muscle strength, blood pressure, and sugar metabolism.

**Exposure Therapy**: A psychological treatment developed to help people confront their fears. The therapist exposes the client to the feared object or context without any danger, to overcome their anxiety and/or distress.

**Eye-Movement Desensitization and Reprocessing (EMDR):** A therapy technique developed by Francine Shapiro, involving lateral eye movements induced by a therapist to facilitate the cognitive processing of traumatic thoughts. This approach integrates elements of cognitive-behavioral and exposure therapies​​.

**Flashbacks**: In the context of psychological disorders, flashbacks are sudden, intense, and vivid recollections of past traumatic events, often experienced by individuals with PTSD.

**Flooding**: A psychological treatment method where a person is exposed to an overwhelming amount of the feared object or context, based on the idea that fear will eventually decrease.

**Hypothalamic-Pituitary-Adrenal (HPA) Axis**: A complex set of interactions among the hypothalamus, pituitary gland, and adrenal glands, playing a critical role in the body's response to stress.

**Imaginal**: In therapeutic contexts, this term refers to the mental visualization or imagination of scenarios, often used in exposure therapy for treating PTSD.

**In Vivo**: A term used in psychology and therapy to refer to real-life exposure to feared objects, situations, or environments, as opposed to imagining them or encountering them in virtual reality.

**Installation of Positive Cognitions**: A technique in therapy, especially in EMDR (Eye Movement Desensitization and Reprocessing), where positive beliefs are instilled to replace negative ones associated with traumatic memories.

**Negative Alterations in Cognition and Mood**: In PTSD, this term refers to symptoms such as negative beliefs about oneself or the world, distorted thoughts about the cause of the trauma, persistent negative emotions, and diminished interest in significant activities.

**Prolonged Grief Disorder**: A condition where individuals experience intense and prolonged mourning and emotional pain over the loss of a loved one, significantly impacting their daily functioning.

**Psychological Debriefing**: A technique used in the immediate aftermath of a traumatic event with the aim of preventing the development of PTSD, involving a structured group discussion about the event.

**Recurrent Experiences**: In PTSD, this refers to repeatedly reliving the traumatic event through nightmares, flashbacks, or intrusive thoughts.

**Reevaluation**: In therapeutic settings, this term often refers to the process of reassessing one’s thoughts, feelings, and behaviors, particularly after a period of treatment or intervention.

**Reprocessing**: A part of therapeutic techniques (like EMDR) where the client is helped to integrate and process traumatic memories, changing the emotional and cognitive response associated with them.

**Stressor**: Any event, either witnessed firsthand, experienced personally, or experienced by a close family member, that increases physical or psychological demands on an individual.

**Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT)**: A form of CBT that is specifically adapted for individuals who have experienced trauma, focusing on understanding and coping with the impact of traumatic experiences.