



## FACT SHEET: Understanding trauma, the trauma response and trauma's relationship to suicidality

The word 'trauma' originates from the Greek word that literally translated means 'wound', which we understand to identify both physical and emotional harms. When we experience trauma we can also experience an emotional response that reflects tremendous stress that overwhelms a person's ability to cope. As such, the word trauma may reflect both the injury or event, as well as the impact from an emotional and behavioural perspective.

Trauma is known to be a risk factor for suicide; however, the association is complex and influenced by many factors. This includes the cause of the trauma (for example witnessing a car accident versus an act of violence) or whether it refers to cumulative and repeated traumas perpetrated by a person or people (for example, child sexual abuse and being detained for years in refugee camps).

The following information will assist you in understanding the trauma response.

- Not everyone responds to trauma exposure in the same way. Some may experience a stress response that resolves. Others find the stress response endures, with sleep disturbance, feeling 'on edge' and agitated, upset stomach, diarrhoea and an inability to stop thinking about what happened. Sometimes there may be a feeling that the threat (whether real or imagined) may return, or that it never left. These symptoms are commonly called 'hyperarousal' and are common to trauma responses.
- There are many events or experiences that are traumatic. They include experiences of violence and sexual abuse across life stages, any event where a person believes they may die, in addition to witnessing or hearing about horror and grief of war, asylum and torture, suicide loss, environmental and natural disaster and accidents, to name a few. Vicarious trauma is the exposure to the story, experience or distress to another's trauma.

- The trauma response can be triggered by any range of real or perceived stimuli, across all the senses; sounds, images, smells, tastes and sensations. A trauma response aligns with what is commonly known as 'fight, flight or freeze' response, and with the trigger known (or familiar) or unknown ('out of the blue').
- The experience of hyperarousal can be a confusing and distressing experience. Sometimes relatively minor things can trigger a person to react as though the traumatic event is occurring again. When a person endures ongoing trauma that is of an interpersonal nature, there may be additional impacts on how they see the world and themselves, affecting how they relate to others, their communication style and their ability to learn and retain information.
- Given that trauma can shape how a person perceives the world, their behaviour and relationships can be misunderstood. They may struggle to understand why they feel as deeply as they do, or why they behave as they do. Sometimes this can bring intense self-criticism and shame.
- People that have endured trauma learn different ways of coping, both helpful and less helpful, from talking to people about how they feel, exercising or educating others about their experiences, through to substance use, self-injury and suicidal behaviour. Intense emotions such as shame, can trigger suicidal thinking and behaviour

There are many options for how to support someone that has experienced trauma and who may also experience self-harm and suicidality. See SRAAs other Fact Sheets or Blue Knot Foundation for more information specific to supporting someone impacted by trauma.