

Its effects on personal development and relationships

[Technology](#), [Development](#)



Post-traumatic stress disorder (PTSD) is an anxiety disorder wherein a traumatic event produces disabling psychological reactions. Traumatic stressor events include but is not limited to assault, rape, hijacking, kidnapping, natural catastrophes (earthquakes, floods, and volcanic eruptions), accidents (automobile or airplane crash, fire) or man-made disasters (bombing, torture, incarceration in concentration camps) (Leigh, 1983). In order to apply the diagnosis of post-traumatic stress disorder, it is important that there is evidence of at least one of these stressors (Meyer & Salmon, 1988).

Reexperiencing the stressful event is common for those who have been through a severe psychological trauma. This is exhibited by having recurrent related dreams, déjà vu about the event, or persistent memories of the event (Meyer & Salmon, 1988). As a result, an individual having PTSD distances himself from the external world and exhibits at least one of the following: 1) lessened emotional responses; 2) lowered interest in at least one activity that has usually excited him before the stress; and 3) detachment from others.

People experiencing PTSD may startle easily, experience emotional numbing especially towards people with whom they used to be close, have disrupted sleep, become hyperalert, become more irritable or aggressive, or even become more violent (Meyer & Salmon, 1988; “ Post-Traumatic Stress Disorder”, 2007). It is important that the observed psychological effects are absent before the stress. “ Survivor guilt” is also common, in which the survivor of the stressful event experiences guilt over having able to survive.

Environmental cues or stimuli may precipitate a feeling that the traumatic event is reoccurring (Leigh, 1983). The severity of PTSD depends on several factors that are external to the individual. The more the present conditions are similar to the traumatic event, the more severe the reactions (Meyer & Salmon, 1988). The symptoms of PTSD were also found to be worse Post-Traumatic Stress Disorder 3 when the stressor involves human action, such as mugging or kidnapping, rather than natural disasters (“ Post-Traumatic Stress Disorder”, 2007).

There are also other disorders that may affect an individual that has been through a stressor event. Adjustment disorders are experienced by an otherwise healthy person in the aftermath of a catastrophe such as a severe storm or tornado. Civilian disaster syndrome is also experienced by some people as a reaction to disasters in civilian life. Such disasters include tornadoes, hurricanes, plane crashes and fire. Compared to PTSD, the stressors in an adjustment disorder are less severe and more within the realm of common experience (Meyer & Salmon, 1988).

Thus, the symptoms may also be milder. PTSD symptoms, compared to civilian disaster syndrome symptoms, are more severe and long-term. In some cases, although the response is delayed, the symptoms are severe and resistant to treatment when they do appear. It is worth mentioning that PTSD is not a normal reaction to the stressor. However, given the severity of the trauma, PTSD is an understandable reaction and is not at all uncommon (Meyer & Salmon, 1988). There are also some factors that make one more susceptible to acquiring the disorder.

These factors include experiencing a traumatic event that is especially severe, intense or long-lasting; having an existing mental health illness before the stressor event; lack of support from family and friends; and having family members that have mental health conditions such as PTSD and depression (Mayo Clinic Staff, 2007). Women are also more likely to have PTSD than men (“ Post-Traumatic Stress Disorder”, 2007). The disorder is often accompanied by depression, substance abuse and other anxiety disorders. It is important that one seek treatment immediately when experiencing symptoms of PTSD.

When an individual experiences fear, anxiety, lack of focus, and disruption of sleep Post-Traumatic Stress Disorder 4 and eating patterns, this does not immediately mean that he has PTSD. However, if such symptoms and feelings last for more than a month and he feels that he lacks control over his life and that he is quite unlikely to get that control back, it is crucial that he talks to a health care professional immediately (Mayo Clinic Staff, 2007). This is because PTSD is disabling. The guilt feelings about surviving when other didn't can be very persistent.

All the symptoms mentioned here causes severe negative effects in one's relationship if the disorder is not treated. Conflicts between family, friends and colleagues may arise that could ultimately lead to estrangement or breakup. Work is also affected because a person who suffers from PTSD is not able to do his job as he normally can. He will lose interest in everyday activities and will detach himself from people. These negative effects in

relationship are not just limited to those experiencing PTSD. Let's start with extreme disorders such as schizophrenia, paranoia and affective disorders.

Schizophrenics usually exhibit interpersonal symptoms such as being withdrawn, inability to relate with others, being suspicious, argumentative, violent, aggressive and negative to suggestions (Meyer & Salmon, 1988). All these symptoms are especially destructive to relationships. As long as an individual exhibits these symptoms, he is unlikely to form significant and lasting relationships with others. Those who are experiencing paranoia (delusions) on the other hand have a more coherent and clear thinking but at times have delusional beliefs.

These people feel misunderstood or mistreated on a chronic basis (Karson and Bigelow, 1986 as cited by Meyer & Salmon, 1988). They also project their thoughts away from the self onto other people or events, thus creating negative thoughts and ultimately results to conflict with other people. Their delusional thoughts are damaging to their relationships with other people for they are frequently suspicious of people's actions. Post-Traumatic Stress Disorder 5 Affective disorders include, in extreme cases, mania and depression.

Manic persons are usually hyperactive, having short attention span and create many grandiose projects that are seldom finished. There is difficulty in communication with manic persons because their mind usually skips and links between thoughts (Meyer & Salmon, 1988). It is likely for an individual to get confused when talking to a manic person. Because an open and clear

communication line is needed for any relationship to be successful, its lack usually leads to destruction of relationships or the inability to develop relationships at all.

Depressive syndrome is also an affective disorder characterized by loss of interest or pleasure. Depressed people are pervaded by feelings of sadness, hopelessness and helplessness. Behaviorally, the patient withdraws from any social and family contact, and loses interest in hobbies or activities that used to bring pleasure (Leigh, 1983). Personality disorders do not reach the psychotic levels that schizophrenics, paranoids and those experiencing affective disorders, usually exhibit. These are not as bizarre as other disorders but are nevertheless severely maladaptive (Meyer & Salmon, 1988).

Although personality disorders differ in specific symptoms, severity and treatment, there are certain patterns of symptoms that are common for all. Among these symptoms are patterns of behavior that are markedly different from the society's expectation of a normal behavior; difficulty in getting along with people; and negative effects in thoughts, emotions, interpersonal relationships and impulse control (" A Report on Mental Health Illnesses in Canada", 2002). Indeed interpersonal relationships are severely affected because those suffering from personality disorders because their actions towards people do not exhibit emotional maturity.

Their difficulty in getting along with people is caused by their being irritable, demanding, hostile, fearful or manipulative. They may also have excessive

need for attention and admiration, or be acutely uncomfortable in close relationships. Post-Traumatic Stress Disorder 6 It is quite impossible to discuss all the behavioral, mental and emotional health problems here but it is evident from the preceding discussion that these problems severely affect an individual's relationships. Unfortunately, aside from upsetting relationships, these problems also affect personality development.

It is very likely that mental illnesses occurring during childhood and adolescence have an influence on personality development (Rey, 1996). In fact, most experts agree that personality disorders emanate from childhood. This means that personality disorders, if allowed to remain unchecked during childhood and adolescence, will be carried over to adulthood, thus disabling an individual's personal growth and development. A child who has suffered from attention deficit hyperactivity disorder (ADHD) for example, if not diagnosed during childhood, grows up hearing a lot of negative messages from others.

Parents, teachers, coaches and friends will notice his difficulty in sitting still, his inability to focus and pay attention for a long time, and his doing things he is not supposed to do or told not to do. As he is continually criticized for these actions over which he does not have any control, he develops a sense of shame. As the child grows up to be an adult, he carries this sense of shame with him and consequently make erroneous conclusions of themselves (White, 2004). Even intelligent and articulate individuals who have ADHD think of themselves as stupid because they are unable to finish a certain task.

They also often have trouble trusting themselves because they can't complete tasks in the time that they expect. They begin to have trouble believing their own intuitions and therefore tend to just go along with the decisions of others even if they do not necessarily agree with them. These people are therefore prone to let others determine their self-worth (White, 2004). In general, their views of themselves, being inaccurate, inhibit full personal growth. Persons who have ADHD often carry an enormous amount of emotional baggage with them.

Lacking self-confidence and having trouble trusting themselves, their personalities Post-Traumatic Stress Disorder 7 often affect the relationships they are in. They may resent criticism from significant others and friends. They may also have trouble recognizing social cues such as changes in facial expression, voice tone and body language, which would lead to a partner concluding that he/she is not being listened to (White, 2004). Basically, this just reinforces the earlier discussion that relationships are affected by mental, emotional and behavioral health problems.

The inability to experience complete personal development is not limited only to ADHD patients or to people who are suffering from extreme cases of mental illness. Even those who have experienced emotional problems that remain unchecked develop behaviors that are not socially adaptive. Children who are not allowed to mature emotionally - people who have experienced rejection by people close to them or those who have not experienced warmth and acceptance from parents - are more likely to have maladaptive

behaviors such as hostility, aggression, dependence and a negative view of the world (Sibcy II, 2007).

In general, emotional, behavioral and mental health problems result to stunted personal growth and the inability to have significant relationships. Individuals who are having these problems however should not consider it an impossibility to still experience personal and emotional growth. With various treatments now available, which were not present decades ago, there are more chances for these people to recover from these problems that have weighed them down.