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# Recovery After Trauma - Information for volunteers

Adapted for Emergency Services Foundation

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**Disclaimer**

This resource was produced with funding provided by the Victorian Government under the Valuing Volunteers Program. This project was initiated by the Emergency Services Foundation (ESF) and the resource is based on Phoenix Australia's Recovery After Trauma booklet. The content has been adapted for volunteers and their families by Phoenix Australia in consultation with representatives, volunteers and family members associated with Life Saving Victoria, Australian Red Cross, St. John Ambulance Australia, Victoria State Emergency Service, Victorian Council of Churches Emergencies Ministry, Country Fire Authority, and Wildlife Victoria.

The views and recommendations contained herein are solely those of Phoenix Australia and do not necessarily reflect those of the Emergency Services Foundation, or its member and associate member agencies.

Notice - Material provided for general information and awareness only - not to be used as a substitute for obtaining professional medical advice.

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# Contents

<b>Overview of project and guidance on use of core content .....</b>	<b>1</b>
Scope and intended audience of core content .....	1
Allowed tailoring of core content for organisations .....	1
Potential formats of the core content .....	2
Required acknowledgements .....	2
<b>What is a potentially traumatic event? .....</b>	<b>4</b>
<b>Helping yourself after a traumatic event .....</b>	<b>5</b>
<b>Agency support after a traumatic event .....</b>	<b>7</b>
<b>Potential impacts of a traumatic event .....</b>	<b>8</b>
Common mental health concerns after a traumatic event .....	8
What is posttraumatic stress disorder? .....	9
What is depression? .....	9
What is anxiety? .....	9
When do alcohol or drugs become a problem? .....	10
Unexplained physical symptoms .....	10
<b>Getting help for mental health concerns after a traumatic event .....</b>	<b>11</b>
What can I ask my counsellor? .....	11
What can I ask my doctor about medication? .....	11
Treatments for posttraumatic stress disorder .....	13
What are the evidence-based treatments for PTSD? .....	13
What will happen during counselling for PTSD? .....	13
What about medication for PTSD? .....	14
<b>What can I do as a family member or carer? .....</b>	<b>15</b>
<b>Frequently asked questions .....</b>	<b>18</b>
<b>Key things to remember .....</b>	<b>20</b>
<b>Where can I find more information? .....</b>	<b>21</b>
<b>My plan for recovery and managing trauma .....</b>	<b>23</b>

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# Overview of project and guidance on use of core content

The Emergency Services Foundation (ESF) engaged Phoenix Australia - Centre for Posttraumatic Mental Health (Phoenix Australia) to tailor the existing *Recovery after Trauma* booklet for use by Victorian emergency service agencies. Phoenix Australia consulted with mental health and wellbeing staff representatives across several agencies, as well as with Victorian emergency service agencies volunteers and their families to inform the tailoring of the material.

The original *Recovery after Trauma* booklet is a companion document to the Australian Guidelines for the Prevention and Treatment of Acute Stress Disorder, Posttraumatic Stress Disorder and Complex Posttraumatic Stress Disorder. The Guideline recommendations were approved by the Chief Executive Officer of the National Health and Medical Research Council in June 2020 and December 2021 under section 14A of the National Health and Medical Research Council Act 1992. The complete Guidelines, and resources for people affected by acute stress disorder or posttraumatic stress disorder, are available online: [www.phoenixaustralia.org](http://www.phoenixaustralia.org).

Phoenix Australia would like to acknowledge the contributions made through consultations by representatives, volunteers and family members associated with Life Saving Victoria, Australian Red Cross, St. John Ambulance Australia, Victoria State Emergency Service, Victorian Council of Churches Emergencies Ministry, Country Fire Authority, and Wildlife Victoria who provided valuable insights, feedback, and solutions to inform the tailoring of the *Recovery After Trauma* core content for volunteers.

Phoenix Australia has incorporated the feedback provided that is within the scope of the current project, and passed onto ESF for their future consideration, other suggestions that arose through the consultations regarding other potential resources or identified gaps.

## Scope and intended audience of core content

Given that the core content's origin was a companion document for the PTSD guidelines, it is not intended for promoting general mental health and wellbeing in volunteers, but rather is focussed on impacts, recovery and support for traumatic events, with a particular focus in sections on PTSD.

The primary audience for the core content is adult volunteers from the participating agencies, although there is a section for their family members.

## Allowed tailoring of core content for organisations

The core content included in this document is intended for the seven participating emergency service agencies to use to develop a tailored resource (online and/or hard copy) for their own agency.

Unless otherwise indicated in the list below, or within the document itself, the agreed core content as provided by Phoenix Australia within this document needs to remain unchanged. If any concerns, please contact ESF who will liaise with Phoenix Australia.

Tailoring required includes:

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- Each agency will add their own organisation specific information, including about ‘getting help’ and ‘where volunteers and their families can find more information about support options’.
  - Each agency will add their own content, images and branding
  - The included quotes are from a range of different industries, not just emergency services, and providing any identifying information regarding role etc is not possible.
  - In this core content document, we have used the term ‘agency’ as a placeholder. When each service internally finalises content for their service setting, individual services may replace this term to suit the context of their setting such as change the word to organisation, workplace etc.

Sections that require tailoring are indicated by use of yellow highlight.

## Potential formats of the core content

Some agencies may develop the core content contained in this document into a professionally designed booklet similar to the original Recovery after Trauma booklet, while others may include it on their intranet, in training materials or other resources, such as pulling out the family section so it can be provided/accessed as a standalone handout for family members.

For ease of your review, we will use the word “booklet” as a placeholder throughout this draft. In whichever format the final core content is presented, it is suggested that there is an introduction section that outlines who the information is intended for and outlines the key sections covered.

We recommend that careful attention be paid to design and presentation aspects of this core content, as it can greatly alter the readability and engagement with the content.

## Required acknowledgements

When using the core content contained in this document for agency materials and resources, the following acknowledgement needs to be included:

*This resource was produced with funding provided by the Victorian Government under the Valuing Volunteers Program. This project was initiated by the Emergency Services Foundation (ESF) and the resource is based on Phoenix Australia’s Recovery After Trauma booklet. The content has been adapted for volunteers and their families by Phoenix Australia in consultation with representatives, volunteers and family members associated with Life Saving Victoria, Australian Red Cross, St. John Ambulance Australia, Victoria State Emergency Service, Victorian Council of Churches Emergencies Ministry, Country Fire Authority, and Wildlife Victoria. [Name of organisation] has tailored the images and options for support to ensure that the resource is relevant for our volunteers and families.*

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The core content commences on the following page and continues to the end of the document.

Volunteering for an emergency agency can be rewarding, and can have many personal, social and professional benefits. Many volunteers are motivated by a sense of giving back to their community, and for some, volunteering can be a social or family activity that is an enjoyable break from other commitments and life stressors. Volunteering can, however, come with a range of challenges, including experiencing or witnessing potentially traumatic events. After a potentially traumatic event, it is normal to experience strong feelings of fear, sadness, guilt, anger, or grief. Generally, these feelings will resolve on their own and you will recover by using helpful strategies together with support from family and friends. However, there are times when people may experience more lasting impacts and may need professional help to recover.

This booklet is intended as a guide to support emergency service volunteers after exposure to a potentially traumatic event. It provides educational information, practical tips and links to further information and supports. This booklet covers the following key areas:

- What is a potentially traumatic event
- Helping yourself in the initial days and weeks after a traumatic event
- Understanding potential longer-term impacts
- Getting help – what to know, what to ask and where you can find more information
- Information for families about what they can do to help
- Frequently asked questions
- Your plan for recovery and managing trauma.

*Being a volunteer isn't just about responding to emergencies—it's about being part of something bigger. The friendships, the sense of purpose, and knowing you're making a real difference in people's lives make it incredibly rewarding. It's not just what we give; it's what we gain—skills, confidence, and a strong connection to our community."*

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## What is a potentially traumatic event?

**A wide range of events can be experienced as traumatic and have the potential to have negative emotional and physical impacts. We refer to these events as ‘potentially traumatic’ because while they can be traumatic for some, they may not have the same traumatic impact for others.**

A potentially traumatic event involves either experiencing or witnessing a situation that involves the threat of death or serious injury, such as physical assaults or other aggressive behaviours, motor vehicle accidents, disasters or other accidents that can occur during work or volunteering. It can also involve repeatedly hearing, reading or seeing distressing details of a traumatic event as part of your role.

Unfortunately, potentially traumatic events are common. About three-quarters of Australians will experience at least one in their lifetime, with many experiencing two or more. Exposure to these events is more common in certain groups, including those in high-risk roles, with up to 90% of emergency services members experiencing a potentially traumatic event as part of their role. Importantly, all types of volunteering roles can be directly or indirectly exposed to a potentially traumatic event – it’s not only first responder and frontline roles.



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## Helping yourself after a traumatic event

After a potentially traumatic event, it is normal to experience strong feelings of fear, sadness, guilt, anger, or grief. Generally, these feelings will resolve on their own, and you will recover by drawing on your usual coping strategies and your support networks, such as family and friends.

Even if you don't feel like it, try to do some of the things suggested below. They might help you to come to terms with what you experienced, reduce some of your distress and help you get back to performing well in the activities and roles you value.

- **Recognise that you have been through an extremely stressful event** and having an emotional reaction to it is normal.
- Give yourself permission to feel rotten but also **remember your strengths** - even though it's tough, you can deal with it.
- **Look after yourself** by getting plenty of rest (even if you can't sleep), regular exercise, and by eating regular, well-balanced meals. Physical and mental health are closely linked, so taking care of one will help the other.
- **Spend time with people you care about**, even if you don't want to talk about your experience. Sometimes you will want to be alone, and that's OK too, but try not to become too isolated. For many people this may be family, but for others, family support may not be available or helpful, so consider colleagues, carers and others you can reach out to.
- **Cut back** on tea, coffee, sugar, soft drink, and cigarettes. Your body is already "hyped up" enough, and these substances will only add to this. Try to avoid using drugs or alcohol to cope, as they can lead to more problems in the long term.
- **Make time for relaxation** - whether it's listening to music, going for a walk- whatever works for you. It might be helpful to learn a relaxation technique like meditation, yoga, progressive muscle relaxation, or breathing exercises.
- **Structure your days** and try to schedule at least one enjoyable activity each day. Try making a timetable for each day which includes some exercise, some relaxation and something that gives you a sense of achievement – even if it is just crossing something small of your 'to do' list.
- **Resume your normal routine** as soon as possible but take it easy. Don't throw yourself into activities, work or volunteering in an attempt to avoid painful thoughts or memories about the trauma. Tackle the things that need to be done a bit at a time and count each success.
- **Try not to bottle up your feelings** or block them out. Recurring thoughts, dreams, and flashbacks are unpleasant, but they will decrease with time.
- **Avoid making major life decisions** like moving house, changing jobs or volunteer roles in the days and weeks after the event. On the other hand, make as many smaller, daily decisions as possible, such as what you will eat or what film you'd like to see. This can help you to feel more in control of your life.
- **Talk about your feelings** to other people who will understand, if you feel able to do so. Talking things through is part of the natural healing process and will help you to accept what has happened.
- **Write about your feelings** if you feel unable to talk to others about them.
- **Keep informed** of the facts through media and other information sources, but don't overdo it. Try to avoid repeated viewing of disaster or trauma scenes.



- **Give yourself time** to re-evaluate. A traumatic event can affect the way you see the world, your life, your goals, and your relationships.
- **Discuss with your loved ones** what they can do to support you after the traumatic event, as well as what you can both do to help the household run smoothly and, for example, look after the children.

**Be mindful about the details you share** about the traumatic events with your colleagues and loved ones. While it is helpful to speak with loved ones about what you're going through, try to limit the amount of detail you give about the traumatic event itself. This will help protect the wellbeing of your colleagues and loved ones and help maintain the privacy of others involved in event.

You may also find that some people, including your colleagues, friends or children, may be curious to know more about what happened. It can be helpful to think of something you can say in this situation that protects your own and their wellbeing. For example, you might say *"Thanks for your concern, but I'd prefer not to talk about it at the moment"* or *"I'm trying to focus on just taking extra care of myself right now"*. If your child has asked, consider response appropriate to their age or developmental stage such as, *"I've had a really tough and frightening thing happen when out volunteering. I am safe now and there are people that can help me, but it'll take me a bit of time to get my head around what happened. I'd love to spend time with you, but I don't really want to talk about it right now if that's okay"*.

**Know when to ask for help.** If you feel you are not coping or continue to feel affected by the trauma after two weeks, ask for help. It is not a sign of weakness and its best to get help early.

**Start by talking to your GP or Employee Assistance Program (EAP).** There is also free help available through the expert organisations listed under resources.

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## Agency support after a traumatic event

Your volunteer agency encourages you to contact them after a traumatic event. They can help with recovery and provide support.

Support is available to help you recover after experiencing a potentially traumatic event (PTE). Each volunteer emergency service agency provides wellbeing supports – such as volunteer assistance programs, peer support, and other mental health initiatives.

For guidance immediately after a PTE and in the days and weeks that follow, your agency may provide check-ins, counselling, or peer support, either automatically or upon request. The type of support, eligibility, and how to access it may vary across agencies.

To find out what supports are available through your agency and how to access them, **please contact your agency directly** for more information specific to your agency. They are there to support volunteers and their families.

## Potential impacts of a traumatic event

**Potentially traumatic events affect everyone differently. Generally, the impacts will resolve by drawing on usual coping strategies and the support of family and friends. For some people, however, the impacts may continue beyond the initial weeks, and can develop into mental health conditions, including posttraumatic stress disorder (PTSD), depression, anxiety or problematic alcohol and drug use, or medically unexplained physical symptoms.**

It is hard to predict how different people will be impacted by a traumatic event, or what traumatic event might be the one that causes lasting impacts on the person. For example, volunteers who have witnessed the same incident may respond differently, and so their support needs and recovery look different.

The type, severity, and duration of reactions to a traumatic event can vary greatly, depending on the individual, and what else is going on in their personal, volunteer or work life at the time. For example, an individual may be impacted more by an event if they are currently experiencing difficulties in their personal life, or if there are other organisational or operational stressors within the agency, such as shift work, working alone, low control over job tasks, volunteering away from family and other supports, or bullying or harassment. If the individual is faced with other challenges or stressors after the potentially traumatic event, these can also impact their coping and recovery.

Volunteers can experience multiple traumatic events over the course of their volunteering. Even if you coped well with similar events in the past, this does not mean that you won't be affected by the trauma you are experiencing now.

It is not always the 'big events' that are the most impactful. Sometimes it can be the seemingly smaller events that can build and then be the 'straw that broke the camel's back', or the event might carry personal significance for the volunteer, such as the victim reminding them of a loved one or a previous traumatic event.

## Common mental health concerns after a traumatic event

**For some people the impacts may continue beyond the initial weeks, and can develop into mental health conditions, including posttraumatic stress disorder (PTSD), depression, anxiety or problematic alcohol and drug use, or medically unexplained physical symptoms.**

Some people may experience more than one of these at a time or may experience them together with other issues such as anger and relationship problems. These conditions can negatively impact your ability to function across your daily life, relationships, work and volunteering, study or other aspects of your life.

The following section provides some information on common mental health problems after a traumatic event. If you are noticing any of these problems, or if you just feel you aren't coping well after a couple of weeks, or if a loved one is worried about you, then it is time to seek professional help.

*“Even though I know the accident wasn’t my fault, I can’t stop feeling guilty and thinking I could have prevented it from happening. My heart starts racing every time I get back into the truck. I’m always expecting the worst and terrified I’ll come across another accident. My mates have tried to talk to me, but I just want to be left alone. The only thing that helps me relax is having a few beers, well, more than a few really. I used to love my job, but I’m not sure how much longer I can hang onto it.”*

## What is posttraumatic stress disorder?

A proportion of people will develop posttraumatic stress disorder (PTSD) after a traumatic event, with estimates varying between 15 - 25% of those exposed. A person with PTSD can experience a range of problems:

- **Re-living the traumatic event** through unwanted memories, vivid nightmares, flashbacks, or intense reactions such as heart palpitations or panic when reminded of the event.
- **Feeling wound up**, for example, having trouble sleeping or concentrating, feeling angry or irritable, taking risks, being easily startled or constantly on the lookout for danger.
- **Avoiding reminders of the event** such as activities, places, people, thoughts or feelings that bring back memories of the trauma.
- **Negative thoughts and feelings** such as fear, anger, guilt, or feeling flat or numb a lot of the time; or loss of interest in day-to-day activities and feeling cut off from friends and family.

## What is depression?

Everyone feels sad from time to time but if these feelings persist for two weeks or more, and get in the way of your day-to-day life, you may be suffering with depression.

### Signs to get help:

- Feeling sad, empty, hopeless or worthless
- Not being interested in usual activities
- Loss of energy
- Sleeping too much or too little
- Having trouble concentrating or making decisions
- Having thoughts of suicide

## What is anxiety?

It’s normal to feel anxious when you’re stressed or facing a particular threat, but if the anxiety doesn’t go away when the stress passes or becomes so severe that it interferes with normal life, you may need help.

### Signs to get help:

- Excessive fear or worry
- Physical symptoms such as racing heartbeat, sweating, trembling
- Breathlessness, dizziness or nausea

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- Feeling of loss of control or impending doom
  - Avoidance of feared objects, places or situations

## When do alcohol or drugs become a problem?

Some people have a drink or use drugs and medication to relax after a tough day to get to sleep or deal with pain. Where do you draw the line and decide it has become a problem?

### Signs to get help:

- Binge drinking to get drunk
- Feeling the need for a drink (or 2 or 3) or wanting to use drugs every day
- Drinking or using drugs to cope with problems or unpleasant feelings
- Drinking or using drugs is causing problems in your life.

## Unexplained physical symptoms

The body can be affected by stress. Some people experience physical symptoms after trauma, such as frequent headaches, dizziness, chest or back pain and digestive problems.

**If you've been experiencing any of these mental health problems, speak to your GP or mental health professional for help.**

**You don't need to keep feeling like this. Effective treatments for these problems are available, and you can get better.**

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# Getting help for mental health concerns after a traumatic event

**For those people who go on to develop a mental health concern after a traumatic event, there are effective treatments available for PTSD and/or other common mental health problems they may experience. Treatment can involve counselling, medication, or a combination of both.**

There can be enormous benefits to you and your loved ones by seeking the right professional help to reduce the frequency and severity of your symptoms, improve your relationships with others, and improve the quality of your day-to-day life so you can get back to doing the activities and roles that you value.

While recovery can have its ups and downs, the good news is that there are effective treatments available for PTSD, depression, anxiety and other common problems that might arise after a traumatic event. It is never too late to seek help and support for your recovery. You can talk to your GP or a mental health professional such as a psychologist, social worker or psychiatrist to find out about the available evidence-based treatments tailored for your specific needs.

If you are seeking help, consider asking the questions over the following pages so that you can ensure that you are getting the best treatment for you.

## What can I ask my counsellor?

**There are evidence-based treatments available for the common mental health concerns, such as PTSD, depression and anxiety, that can follow a traumatic event.**

Here are some questions that you can ask to help you get the information you need about your treatment:

- What is the best evidence-based treatment for me? Why/Why not?
- Can you tell me how this type of treatment works?
- Does this treatment have any negative effects?
- Can you tell me what training and experience you have in this type of treatment?
- How long will treatment last?
- What can I expect to happen during treatment?
- Can you tell me what I will need to do during treatment or in my day-to-day life to help me get better?
- What kind of improvements can I expect?
- What support will I need while I am having treatment?
- Do I need a referral from my General Practitioner to access this treatment? Would this reduce my costs?

## What can I ask my doctor about medication?

- How does this medication work?
- What can I expect to feel like if it works?
- Does it have any side effects and how long will they last for?
- If there are side effects, will they impact my ability to work or volunteer?



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- How long will it take before I start to feel better?
  - How long will I have to take it?
  - What do I do if I forget to take my tablets?
  - When it's time, how do I go about stopping the medication?
  - What will happen when I stop taking it?

Practitioners often ask about any stressors at home or work that may be impacting how you are coping, but they may not ask specifically about volunteering experiences. So that the practitioner can have a full picture of your situation and what may be impacting your coping, let them know about anything from your volunteering experience that may positively or negatively impact your mental health.

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## Treatments for posttraumatic stress disorder

The following section is for those who have PTSD and provides information on evidence-based counselling approaches and medications for treating PTSD. This information will help you ask the right questions of your health professional so you can be sure that you are getting the best possible treatment for you.

### What are the evidence-based treatments for PTSD?

Recommended counselling approaches for PTSD include trauma-focused cognitive behavioural therapy (TF-CBT) and eye movement desensitisation and reprocessing (EMDR). When you seek help for PTSD, consider one of these counselling approaches, as they are most likely to help you recover.

Medication may also be helpful for some people. The medications that are usually used to treat PTSD are antidepressants: sertraline, paroxetine or fluoxetine (selective serotonin reuptake inhibitors or SSRIs) and venlafaxine (a serotonin noradrenaline reuptake inhibitor or SNRI).

### What will happen during counselling for PTSD?

**The most important thing when getting help for PTSD is to face, and deal with, the memory of traumatic events rather than pushing them to the back of your mind. TF-CBT and EMDR will help you do this in a safe and controlled manner.**

Because the memory of traumatic events can cause strong emotions like fear and shame, people often want to escape or avoid anything associated with the trauma. Although avoiding reminders of the trauma provides temporary relief, it is one of the main reasons why some people don't recover. When people rely on avoidance to cope, they don't have the opportunity to come to terms with what happened to them or to develop skills that will help them feel safe when thinking about traumatic events. The anxiety and avoidance can then affect other areas of their lives.

During treatment for PTSD, you will learn ways to talk about traumatic memories and face situations that you have avoided since the trauma so you no longer feel so distressed by them. Your counsellor will take things slowly, help you gain control of your fears step by step, and teach you skills to manage any distress you might experience so you do not become overwhelmed by your feelings. If you have experienced more than one trauma, your counsellor will help you understand which experiences have had the most impact on you and which ones are important to talk about in order to get better.

You will be encouraged to examine how your thoughts about the trauma may be making the memory of it more painful. Many people blame themselves for what happened or start seeing the world as a dangerous place after a traumatic event and need help to deal with these thoughts.

The recommended types of PTSD counselling – TF-CBT and EMDR – usually involve 8 to 12 sessions with a mental health specialist. For some people, however, more sessions might be needed, especially if you have experienced several traumatic events or there are other mental health concerns that need to be considered.

You may hear of other treatments for PTSD that have not been mentioned in this booklet. This is either because they have not yet been properly tested, or because they have been found to be less effective than the recommended treatments. Treatments that do not focus on traumatic memories, such as learning to

manage anxiety, are very useful when provided alongside treatments recommended in this booklet but are less effective when offered on their own.

*"I was incredibly nervous the first time I went to counselling. I was really doing it for my family. I couldn't see how it would help. It took me a while to get used to the whole thing. My counsellor explained to me how my PTSD was keeping me feeling angry. She also explained why I felt so jumpy and tense at work. It was a relief to hear that. Through counselling, I was able to start making sense of what had happened. I'm also learning ways to control my anxiety and I feel safe at work again."*

## What about medication for PTSD?

The medications usually used to treat PTSD are antidepressants. Even if you don't have depression, antidepressants can help make feelings associated with trauma more manageable. There are different kinds of antidepressants, but research has shown that some selective serotonin reuptake inhibitors (SSRIs) and a serotonin noradrenaline reuptake inhibitor (SNRI) are most likely to help.

- **Before you start taking antidepressant medication**, you should be given information about possible side effects. As these are prescription medications this information should be provided by the prescribing doctor or the dispensing pharmacist. It is also important to understand what you might experience if you stop taking medication suddenly, forget to take a tablet, or reduce the amount you are taking.
- **Remember that antidepressants take a few weeks to reach their full effect**, so do not expect immediate results. If antidepressants are working, it is recommended that you take them for at least 12 months. After this period, you can stop by gradually reducing the dose, generally over a four-week period. This should only be done after discussion with your doctor and should be carefully monitored.
- **Remember, not all medications work in the same way for everybody.** If a particular type is working for you, your doctor may ask you to try another type, increase the dose, or suggest you try counselling.

For more information about PTSD and its treatment, see the Australian Guidelines for the Prevention and Treatment of Acute Stress Disorder, Posttraumatic Stress Disorder and Complex Posttraumatic Stress Disorder at [www.phoenixaustralia.org](http://www.phoenixaustralia.org).

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## What can I do as a family member or carer?

**As a family member or carer, there are things you can do to help support someone with mental health concerns after a traumatic event, while looking after your own wellbeing.**

The mental health impacts of traumatic events experienced by your loved one often affects the whole family, including any children and teenagers. If you or others in the family are finding the situation distressing, you may also need to seek separate help for yourself or them.

### Mental health and relationships

It can be difficult to watch someone you care about struggle with the distress caused by trauma. You might find yourself worrying about their wellbeing and feel uncertain when faced with their emotional reactions.

For example, people who experience mental health difficulties after trauma can often seem disinterested or distant, and you may feel shut out. They may stop participating in family or social life, ignore your offers of help, become irritable, or you may notice other changes in how they communicate with you. It is important to remember that these behaviours are symptoms of PTSD and other common mental health problems; they are not about you. Your loved one probably needs your support but doesn't know what they need or how to ask for help.

### There are many ways you can help...

#### **Listen and show that you care**

You can encourage your loved one to share their thoughts and feelings about what is happening to them. Remember that you are not their therapist and don't have to find solutions for them. If you feel you cannot bear to hear all the details of the trauma, you need to let the person know, while at the same time reassuring them that you care. Don't worry about saying 'the right thing', what's most important is listening and showing genuine concern.

Remember that providing support doesn't have to be complicated. It often involves small things like spending time together, having a cup of tea, or giving them a hug. Some people find it helpful to have time to themselves after a traumatic experience. If this is the case for your loved one, try to give them some space and time alone when they ask for it. Encourage a balance between time spent alone and time spent with others.

#### **Encourage your loved one to seek help and stay focussed on getting better**

You and other family members may be the first ones to notice when your loved one doesn't seem like their usual self, and so you may be one of the first people to encourage them to seek more support.

Your loved one may not realise that they need help or may find it hard to admit that they do. They might feel vulnerable and worried about having to talk about what happened, and they may be trying to "put on a brave face" to others. Getting professional help can be difficult as it often means facing painful memories. Also, getting better is rarely a straightforward path. Your loved one may experience ups and downs as they work through their memories and may become discouraged at times. You can provide support by acknowledging

that getting better can be difficult, and by commenting on positive changes and the small steps they are making, to help them remain hopeful.

Be familiar with the support options available after a traumatic event for your loved one through the agency and elsewhere. Encourage them to seek professional help if they don't seem to be their usual self or they're not improving after two weeks, or if you're feeling worried about them and think they would benefit from speaking to a health professional.

As a family member or carer, it can be beneficial to be involved in your loved one's treatment wherever possible. Your involvement will help you to support your loved one, and also help to ensure that your needs and perspective are taken into account throughout treatment.

### **Looking after children**

Reassure your child(ren) that their parent is safe now, but that they experienced something very distressing which may take some time for them to recover from. Let them know that they are being cared for by you and health professionals (if relevant) so that they can get back to their usual self – it might just take some time.

Listen to and talk with the child about what is happening in a way that is appropriate to their age or stage of development. Like adults, children can become frightened about things they don't fully understand.

Try to enjoy some activities together that you would do before the traumatic event and support them to stick to their usual routines as much as possible.

It may be that the disaster or other event your loved one was involved in is in the media for days or weeks, and this has the potential to upset or confuse your child(ren). As a parent, you can protect them by helping them understand the media coverage they see or hear, while limiting their exposure to media reports and potentially distressing details.

### **Look after yourself**

This may be the most important thing you can do to help your loved one. Supporting someone who has been through trauma can take a toll on you, sometimes so much so that your own health can be affected, and you can no longer help them effectively. While supporting them, they may tell you confronting and traumatic information about their experiences, and if you also volunteer or have experienced trauma in another part of your life, it may bring up reminders and distress about your own experiences.

It is crucial that you monitor your own wellbeing and take time out to engage in your own self-care and reach out to friends and other supportive people in your community. You can also enlist the help of a counsellor or a support group. Your GP or a mental health professional can provide you with information and the names of people and organisations who can help.

### **Concerns about safety**

If you are concerned about your or another person's safety, contact the police on **000**. You can also call **1800 RESPECT** (1800 737 732) the national family violence and sexual assault counselling service – to speak with a professional counsellor any time, any day. This service is free and confidential.

## **Resources and services for families and carers**

Agencies may provide support for the family members of volunteers, such as access to counselling services through volunteer assistance programs or other wellbeing initiatives, however these differentiate from agency to agency.

Please contact your agency directly for more information.

The Emergency Service Foundation (ESF) have a resource for families of Victorian Emergency Service volunteers about recognising early warning signs, having supportive conversations with your loved one, taking care of yourself, your children and accessing other help: [esf.com.au/families-guide/](https://esf.com.au/families-guide/)

Relationships Australia provides counselling and information on healthy relationships at [www.relationships.org.au](https://www.relationships.org.au) or call 1300 364 277

Carers Australia offers information, resources and access to support groups at [www.carersaustralia.com.au](https://www.carersaustralia.com.au) or call 1800 422 737

If children are affected by their parent's trauma, you can access Parentline for telephone counselling at [www.parentline.com.au](https://www.parentline.com.au) or call 1300 30 1300

Headspace provides information on how to talk to children and teenagers about their problems and where to find help, at [www.headspace.org.au](https://www.headspace.org.au)



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## Frequently asked questions

What if the event I experienced is so distressing that I can't bear to think about it?

Treatment will help you to come to terms with the traumatic experience at your own pace. Your counsellor will teach you skills so that you won't feel overwhelmed when recalling the traumatic event.

At what point should I seek professional help?

If you are still experiencing problems two weeks after a traumatic event, it might be worth talking to your GP or a mental health professional about starting treatment. If you are being cumulatively exposed to traumatic events over time, this two-week time frame is less relevant – so if you don't feel like your usual self, or your usual coping strategies are not working, then seek help as soon as you need it.

What if I've been having problems for a long time?

Even if your traumatic experience was a long time ago, treatment for mental health concerns such as PTSD, depression and anxiety can still work. For example, the PTSD counselling approaches recommended in this booklet and antidepressants have been shown to help recovery for long-term sufferers of PTSD.

What if I don't feel better when I expect to?

Some people who have been impacted by a traumatic event improve quickly, while others take more time to get better. Sometimes the impacts from the traumatic events can also feel more manageable for a while but worsen at times of stress or when a particularly strong reminder of the trauma triggers a reaction. Recovery is rarely smooth and has ups and downs.

Can I continue volunteering if treatment includes medication?

In most cases, yes. Many of the commonly prescribed medications for PTSD, depression, anxiety and other common mental health conditions don't cause side effects that will affect your volunteer role or paid employment. With some medications it might be good to take some time to understand how they affect you and get used to taking the medication before undertaking certain activities such as driving and completing particularly complicated tasks. This is something you should discuss with your doctor or pharmacist before your return to your usual work or volunteering role. If the medication has side effects that might impact your usual tasks, it may be that you can liaise with your health professional and agency to make some adjustments to your work or volunteering role so you are best supported while on the medication.

Sometimes things that happen during treatment can get in the way of your recovery, such as:

- Not receiving enough information about what to expect.

- Not feeling comfortable with your GP or counsellor. It takes time to develop trust in someone, but if you continue to feel uncomfortable, discuss it with the person you are seeing or look for the right person to provide you with help.
- Feeling overwhelmed by emotions during treatment sessions. Let the person treating you know how you feel and talk with them about slowing down the process.

If you're not sure treatment is helping you, ask your practitioner some of the following questions:

- My sleep, nightmares, mood, ... aren't improving. What else can we do?
- I had expected to feel better. Can we talk about my progress?
- Can we talk about other treatments? What else is available?
- Can you give me strategies to help me better manage my sleep, panic attacks...

***Traumatic events are common, and almost everyone who goes through such an event will be emotionally affected in some way. For some, the effects can be long-lasting. If you or someone you care about is continuing to struggle weeks or months after experiencing trauma, you can get help.***

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## Key things to remember

- The experience of a traumatic event is common, particularly in high-risk industries such as the emergency services. Most people will recover with the support of family and friends.
- Strong feelings of fear, sadness, guilt, anger, or grief are common soon after a traumatic event. Counselling can help.
- If these feelings last for more than a couple of weeks, or are overwhelming, speak to your GP.
- Some people may go on to develop posttraumatic stress disorder (PTSD) after a traumatic event. PTSD involves four main types of problems:
  - Re-living the traumatic event
  - Feeling wound up
  - Avoiding reminders of the event
  - Having a lot of negative thoughts or feelings
- People with PTSD often experience other problems like depression or anxiety, or use drugs or alcohol to try and cope. Physical symptoms like frequent headaches, digestive problems or pain can also be a sign you need help.
- Effective treatment for PTSD involves talking about and making sense of the memory of the trauma as well as associated thoughts and beliefs. Medication is not the first choice of treatment but can be useful in many cases. Medication will not necessarily prevent you from working. This should be discussed with your GP.
- It's never too late to get help for PTSD or other mental health problems.
- It's your treatment, and it's OK to ask questions.
- If something is not working, tell your GP or counsellor and, if necessary, ask them to make some changes.
- Your local GP or agency support service is a good place to start if you need help.

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## Where can I find more information?

### Where can I find more information and start getting help?

**Your GP is a good starting point when seeking help.** They can help confirm what is going wrong and refer you to the right organisations and practitioners.

**For immediate assistance call Lifeline** on 13 11 14 for confidential 24-hour counselling and referrals.

Your agency support services can also provide support.

These supports differ from agency to agency. Please contact your agency directly for more information.

Useful information and resources are also available through the following organisations

### Emergency Services Foundation

Emergency Services Foundation (ESF) provides information, training and useful resources to help protect and support the mental health and wellbeing of Victorian emergency service members, at [www.esf.com.au](http://www.esf.com.au).

### Trauma and posttraumatic mental health

Phoenix Australia – Centre for Posttraumatic Mental Health provides downloadable information and free useful resources about posttraumatic mental health, for practitioners and people directly affected, at [www.phoenixaustralia.org](http://www.phoenixaustralia.org).

### Depression and anxiety

Several organisations offer access to free information, resources and services (via phone, text and online), including:

- Beyondblue [www.beyondblue.org.au](http://www.beyondblue.org.au)
- SANE Australia [www.sane.org](http://www.sane.org)
- Black Dog Institute [www.blackdoginstitute.org.au](http://www.blackdoginstitute.org.au)
- Clinical Research Unit for Anxiety and Depression [www.crufad.org](http://www.crufad.org)

### Alcohol and other drugs

The Alcohol and Drug Foundation gives comprehensive information and a list of resources available across Australia at [www.adf.org.au](http://www.adf.org.au)

### Psychologists

The Australian Psychological Society has a register of psychologists and lists their speciality at [www.psychology.org.au](http://www.psychology.org.au) or call 1800 333 497. The Australian Clinical Psychology Association has a clinical psychologist directory at [www.acpa.org.au](http://www.acpa.org.au), and the Australian Association of Psychologists Inc has a directory at [aapi.org.au](http://aapi.org.au). A mental health treatment plan or similar referral from a General Practitioner allows you to access a limited number of psychology appointments at a reduced cost.

### Safety and wellbeing at your agency

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There are resources available on workplace bullying, harassment (including sexual and gender-based harassment), violence, and aggression at [www.safeworkaustralia.gov.au](http://www.safeworkaustralia.gov.au) and [www.worksafe.vic.gov.au](http://www.worksafe.vic.gov.au).

## **Families and carers**

Relationships Australia provides counselling and information on healthy relationships at [www.relationships.org.au](http://www.relationships.org.au) or call 1300 364 277

Carers Australia offers information, resources and access to support groups at [www.carersaustralia.com.au](http://www.carersaustralia.com.au) or call 1800 422 737

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# My plan for recovery and managing trauma

## BEWARE

Are there signs that I need help? .....

Have the people who care about me told me that they are worried about me? .....

## PREPARE

### Things I need to do to help myself

Things I need to do more of (e.g. go for walks, talk to my friends) .....

Things I need to do less of (e.g. drink, staying away from people) .....

## REPAIR

### Who do I need to ask help from?

Family & friends: .....

Work: .....

Volunteer agency: .....

Health professionals: .....

### Crisis contacts

In a crisis, I will contact these people or this service: .....