

CASE STUDY #1

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### Introduction

Post-traumatic stress disorder is a type of anxiety disorder. It can occur after one sees or experiences a traumatic event that involved the threat of injury or death. Treatment can help prevent PTSD from developing after a trauma. A good social support system may also help protect against PTSD. If PTSD does occur, a form of treatment called "desensitization" may be used. This treatment helps reduce symptoms by encouraging the victim to remember the traumatic event and express feelings about it. Over time, memories of the event should become less frightening. Support groups, where people who have had similar experiences share their feelings, may also be helpful.

### Stating the Case

In the Case Studies in Abnormal Psychology (Ethan E. Gorstein, Ronald J. Comer, 2002) text, Sofia's situation, diagnosis and treatment of Posttraumatic Stress Disorder is described. As explained, Sofia "lived a full and active life" and "was a regular subway rider, travelling all over the city to go to her favorite" places and to "visit her numerous friends." She handled life energetically and optimistically and had never had any psychological difficulties, although "she had certainly had her share of trauma earlier in her life." During the Nazi occupation of Poland, she "had taken pride in her skills at evading capture" and had the ability to cope with the dangers, which "instilled in her a fierce pride in her self-sufficiency, mental acuity, and physical resilience."

As Sofia immigrated to the United States and began working at the university, she "threw herself wholeheartedly into her career." Due to her concentration on her work, her family and personal life became her colleagues and students. "Sofia was a picture of emotional and physical strength – a woman of self-confidence and direction. As she was riding the subway home from a shopping trip, the train struck a stationary train that was on the track. She and the other passengers were thrown forward and the train was partially crushed. She was trapped under many other victims as she lay bleeding for a half hour "paralyzed with fear, wondering if she would be able to survive until help arrived." She was

taken to a local emergency room where she laid strapped for hours on a gurney as a “terrified woman” staring “wide-eyed at the gruesome scenes” of the emergency room. Throughout her experience in the hospital, Sofia was anxious and paranoid about her surroundings and what was going to happen to her. She wondered if she was going to be raped or killed by the medical staff, or if she was going to be infected from the people in the waiting area.

After 2 hours in the waiting room, she was informed she had no severe injuries and was released to go home. She was relieved until she realized that it was 1 o’clock in the morning and the idea of going out at that hour, in the condition she was in and in that neighborhood was terrifying. She anxiously waited for the first light of morning to come. She arrived home and collapsed from exhaustion and slept for nearly 24 hours. When Sofia awoke, she called and told what had happened to some of her close friends from the university, who were sympathetic. Sofia felt disoriented and could not answer their questions with the experience “now jumbled in her mind.”

The suggestion to see a doctor was given and she made an appointment to see a doctor. When she left her apartment, she was surprised at how noisy and confusing things were and was overwhelmed so as to be completely exhausted when she arrived at the doctor’s office. The neurologist suggested she see an orthopedist. Sofia dreaded the idea of needing more surgery and spending more time in the hospital. Over the next few weeks she continued to talk with her friends about the accident as if she hadn’t told them before and there was nothing else to talk about. Her friends started to become annoyed and avoid talking with her, dreading the conversations about the incident. Sofia became more isolated, with her fearfulness overcoming her and she stayed inside where she felt “safe.”

### **A Comparison**

As this case described, Sofia had a traumatic event that caused her to have overwhelming feelings of fear and terror that caused her to be “paralyzed,” isolated, and restricting her once “full and

active life.” A close friend of mine had a similar experience, though not involving personal physical injury. Matt, as a strong swimmer and enjoying being around the water, became a lifeguard as soon as he was old enough. He always enjoyed coming to work, taking extra shifts whenever they were available. He worked long hours, but even with the extreme heat and busy pool of the summer, Matt never complained. He was a fantastic lifeguard, being vigilant in his duty of watching the swimmers at the pool. Working at a wave pool, he often needed to enter the water to rescue swimmers, responding quickly and appropriately each time. Most lifeguards at the facility had to rescue people as they struggled in the water, mainly during a waves session. The experience of jumping in for a struggling patron became a regular, almost daily occurrence. In fact, many days, some lifeguards, including Matt, would rescue five patrons. They trained many hours for such situations and were ready to respond.

These situations, though stressful, made the job more enjoyable for Matt and other lifeguards. Each incident brought the reward of being trained and able to help in an emergency. Each rescue allowed the lifeguards to become ever more confident in their skills and abilities. Just as Sofia “had taken pride in her skills” which “instilled in her a fierce pride in her self-sufficiency, mental acuity, and physical resilience,” so did these occurrences. The patrons were safely extracted from the water, reports were completed and Matt would promptly return to his duties of surveying the pool and swimmers. At the end of each day, Matt felt satisfied and pride in his work and made many friends on the staff.

One hot, sunny summer day, as the pool began to fill with scores of swimmers, Matt was again at his station when a swimmer ventured out further into deeper water than he was capable of swimming in. The swimmer suddenly fell off the tube he had been perched on and after struggling for only a few short seconds, slipped under water. Matt, seeing the patron at the bottom of the pool, entered the water quickly, yet safely. As he entered, he alerted the other lifeguards on staff of the situation as the guards had been trained to do. Matt swam rapidly over to the area where he had seen

the swimmer last, and plugged to the bottom of the pool to grab the sunken swimmer, again just as he had been taught. The rescuer, aided by others, brought the now unconscious patron to the shallow end of the pool. Matt, being the first to respond was in charge of the situation. He swiftly moved into action to care for the unconscious person and organized the other staff members. Matt's abilities and professionalism was on full display as the guards worked together to revive to the swimmer using their CPR skills. The patron was soon able to begin breathing on his own. As protocol demands, emergency medical personnel were called in. Matt fully described the events to the paramedics. The patron was transported by helicopter down to a trauma center to receive advanced treatment.

The lifeguards back at the pool followed the correct steps after such an incident. After the practiced principles and procedures, Matt began to feel overwhelmed. His mind started racing and the commotion of the events started to flood his mind. He started to back away from others and went to a quiet, secluded room in the facility. As people would enter and ask how he was doing, he didn't know how to respond. He started dreading talking with anyone. He went home and isolated himself in his room for hours. When his family came home and realized he was there, they came to talk to him as they had many times before. He would not discuss any of what happened with them, but was abrupt in the conversation. Again, as Sofia, Matt "felt disoriented and could not answer their questions with the experience "now jumbled in her mind."

His parents were alarmed and called the facility and found out what had taken place. They alerted Matt's manager. The manager, along with Matt's swim coach and lifeguard trainer, came to visit Matt. He was becoming more distant, thinking over the situation in his mind continuously. He had begun convincing himself that, even though he did everything as he had been trained to do, he should have done more or responded quicker. The two visitors listened and tried to help Matt see that this was an

erroneous way to see the incident. The patron had been revived, and was in stable condition at the hospital and they reassured Matt that he had performed amazingly, saving the life of the swimmers.

It took many weeks and the effort of many people to help him overcome his feelings of despair, confusion and desire to be left alone. The staff at the pool rallied around Matt. They held group discussions to understand what happened. These debriefings were conducted in a way that was not meant to point blame, but was used as a coping mechanism and as a training tool for all involved. Matt progressed slowly, as did Sofia, in being able to talk about the situation and feel comfortable enough to return to the facility. Eventually, after months of discussions and being in social gatherings with close friends, Matt was able to return to work as a lifeguard.

### **Bringing it All Together**

Matt was later able to describe what had made him so overwhelmed with fear and made him become isolated and unresponsive to others. He said that he began thinking if he were so well-trained for a situation like the one he was involved in and was so powerless to control the situation, how would he be any more prepared to manage other difficult or tense circumstances. Matt was feeling a general loss of control over all situations based on this single incident. "People who generally view life's negative events as beyond their control seem more prone to develop a stress disorder when confronted with a traumatic event (Regehr et al., 1999). Even those with great attitudes and strong personalities, may experience a stress disorder. As in the case with Matt, some people that experience a stress disorder can benefit from group therapy or discussions where they can converse with others that have been through similar situations and have comparable feelings of guilt, frustration, or anger. The sessions allow them to discuss the impact of the traumatic events on their lives. One of the most helpful treatment for Post-Traumatic Stress Disorder (PTSD) is to talk about what happened during the event, and to share your feelings with another person.