

Post Traumatic Grace  
Overcoming emotional trauma with God's grace  
The journey through trauma with Daniel

Objectives:

- ☐ To understand how to \_\_\_\_\_ traumatic stress that occurs in our lives.
- ☐ To study the Biblical character of Daniel and make personal \_\_\_\_\_ to us.
- ☐ To notice the different types of \_\_\_\_\_ that one person can suffer without becoming "disordered."
- ☐ To grasp the \_\_\_\_\_ of the grace of God and its impact on us today.

Introduction:

The book of Daniel, in the Hebrew Bible, is listed in the \_\_\_\_\_ (ketubim) and not in the Prophets. Being considered more apocalyptic than prophetic, some have mentioned the \_\_\_\_\_ ridicule that pities the book of Daniel as being "the record of fantasies of a people too much oppressed." (Old Testament Survey, 2<sup>nd</sup> Edition, pg. 566, Lasor, Hubbard and Bush, 1982)

Website for the American Psychological Association defines Trauma as "an \_\_\_\_\_ response to a terrible event like an accident, rape, or natural disaster. Immediately after the event, shock and denial are typical. Longer term reactions include unpredictable emotions, flashbacks, strained relationships, and even physical symptoms like headaches or nausea. While these feelings are \_\_\_\_\_, some people have difficulty moving on with their lives. Psychologists can help them find constructive ways of \_\_\_\_\_ their emotions. *Adapted from Recovering emotionally from disaster.*"<sup>1</sup>

"Recovering emotionally from disaster" lists some common responses to disaster to include intense or unpredictable feelings, changes to thoughts and behavioral patterns, sensitivity to environmental factors, strained interpersonal relationships, and even stress-related \_\_\_\_\_ symptoms. The recommendations to cope include giving yourself \_\_\_\_\_ to adjust, asking for support from people who \_\_\_\_\_ and will listen and empathize, \_\_\_\_\_ your experience, find \_\_\_\_\_ from trained professionals, \_\_\_\_\_ in healthy behaviors, establish, or reestablish \_\_\_\_\_ and avoid making major life decisions.<sup>2</sup>

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<sup>1</sup> <https://www.apa.org/topics/trauma>

<sup>2</sup> <https://www.apa.org/topics/disasters-response/recovering>

Discuss WebMD document – “What are the treatments for PTSD?”<sup>3</sup>

Seek the Lord – a case study of Asa, king of Judah; 1Kngs 15:9-14; 2Chron. 16:12

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<sup>3</sup> <https://www.webmd.com/mental-health/what-are-treatments-for-posttraumatic-stress-disorder>

# What Are the Treatments for PTSD?

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Written by [WebMD Editorial Contributors](#)

- Therapy
- Cognitive Processing Therapy
- Prolonged Exposure Therapy
- Eye Movement Desensitization and Reprocessing
- Stress Inoculation Training

4 min read

**Posttraumatic stress disorder** (PTSD), a type of **anxiety disorder**, can happen after a deeply threatening or scary event. Even if you weren't directly involved, the shock of what happened can be so great that you have a hard time living a normal life.

People with PTSD can have **insomnia**, flashbacks, low self-esteem, and a lot of painful or unpleasant emotions. You might constantly relive the event -- or lose your memory of it altogether.

When you have PTSD, it might feel like you'll never get your life back. But it can be treated. Short- and long-term **psychotherapy** and **medications** can work very well. Often, the two kinds of treatment are more effective together.

## Therapy

PTSD **therapy** has three main goals:

- Improve your symptoms
- Teach you skills to deal with it
- Restore your self-esteem

Most PTSD therapies fall under the umbrella of cognitive behavioral therapy (CBT). The idea is to change the thought patterns that are disturbing your life. This might happen through talking about your trauma or concentrating on where your fears come from.



Depending on your situation, group or [family therapy](#) might be a good choice for you instead of individual sessions.

## **Cognitive Processing Therapy**

CPT is a 12-week course of treatment, with weekly sessions of 60-90 minutes.

At first, you'll talk about the traumatic event with your therapist and how your thoughts related to it have affected your life. Then you'll write in detail about what happened. This process helps you examine how you think about your trauma and figure out new ways to live with it.

For example, maybe you've been blaming yourself for something. Your therapist will help you take into account all the things that were beyond your control, so you can move forward, understanding and accepting that, deep down, it wasn't your fault, despite things you did or didn't do.

## **Prolonged Exposure Therapy**

If you've been avoiding things that remind you of the traumatic event, PE will help you confront them. It involves eight to 15 sessions, usually 90 minutes each.

Early on in treatment, your therapist will teach you [breathing](#) techniques to ease your [anxiety](#) when you think about what happened. Later, you'll make a list of the things you've been avoiding and learn how to face them, one by one. In another session, you'll recount the traumatic experience to your therapist, then go home and listen to a recording of yourself.

Doing this as "homework" over time may help ease your symptoms.

## **Eye Movement Desensitization and Reprocessing**

With EMDR, you might not have to tell your therapist about your experience. Instead, you concentrate on it while you watch or listen to something they're doing -- maybe moving a [hand](#), flashing a light, or making a sound.

The goal is to be able to think about something positive while you remember your trauma. It takes about 3 months of weekly sessions.



## Stress Inoculation Training

SIT is a type of CBT. You can do it by yourself or in a group. You won't have to go into detail about what happened. The focus is more on changing how you deal with the [stress](#) from the event.

You might learn [massage](#) and breathing techniques and other ways to stop negative thoughts by relaxing your mind and body. After about 3 months, you should have the skills to release the added [stress](#) from your life.

## Medications

The brains of people with PTSD process "threats" differently, in part because the balance of chemicals called neurotransmitters is out of whack. They have an easily triggered "fight or flight" response, which is what makes you jumpy and on-edge. Constantly trying to shut that down could lead to feeling emotionally cold and removed.

Medications help you stop thinking about and reacting to what happened, including having [nightmares](#) and flashbacks. They can also help you have a more positive outlook on life and feel more "normal" again.

Several types of drugs affect the chemistry in your [brain](#) related to fear and anxiety. Doctors will usually start with medications that affect the neurotransmitters serotonin or norepinephrine (SSRIs and SNRIs), including:

- [Fluoxetine \(Prozac\)](#)
- [Paroxetine \(Paxil\)](#)
- [Sertraline \(Zoloft\)](#)
- [Venlafaxine \(Effexor\)](#)

The FDA has approved only paroxetine and sertraline for [treating PTSD](#).

Because people respond differently to medications, and not everyone's PTSD is the same, your doctor may prescribe other medicines "off label," too. (That means the manufacturer didn't ask the FDA to review studies of the drug showing that it's effective specifically for PTSD.) These may include:

- [Antidepressants](#)

- ❑ Monoamine oxidase inhibitors (MAOIs)
- ❑ Antipsychotics or second generation antipsychotics (SGAs)
- ❑ Beta-blockers
- ❑ Benzodiazepines

It's OK for you to use a medicine off-label if your doctor thinks there's a reason to.

Medications might help you with specific symptoms or related issues, such as [prazosin \(Minipress\)](#) for [insomnia](#) and nightmares.

Which one or combination of meds is likely to work best for you depends in part on the kinds of trouble you're having in your life, what the side effects are like, and whether you also have anxiety, [depression](#), [bipolar disorder](#), or substance abuse problems.

It takes time to get the dosage of some medications right. With certain medications, you might need to have regular tests -- for example, to see how your [liver](#) is working -- or check in with your doctor because of possible side effects.

Medications probably won't get rid of your symptoms, but they can make them less intense and more manageable.

[Hide Sources](#)

#### SOURCES:

Mayo Clinic: "Post-traumatic Stress Disorder."

Cleveland Clinic: "Anxiety Disorders."

U.S. Department of Veterans Affairs: "Treatment of PTSD," "Clinician's Guide to Medications for PTSD," "Medications for PTSD."

UpToDate: "Pharmacotherapy for posttraumatic stress disorder in adults."

Society of Clinical Psychology: "Stress Inoculation Training for Post-Traumatic Stress Disorder."

Medscape: "Posttraumatic Stress Disorder Medication."