

Family involvement in post-traumatic growth: missed opportunities from living vicariously with PTSD

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Funders: The Road Home, DVA



Reflecting on a journey of research & experience

- Living with PTSD in family of ESFRs
- Working with families in MHS (1996+)
- Becoming a mental health 'carer' (2002+)
- The Bond We Share (2010)
- The Importance of Relationship (2014)
- The Lived Experience of Caring (2016)
- Literature Review (2017)
- Living Vicariously with PTSD (2017-2018)
- Inpatient Clinicians' & Carers' Perspectives of Collaboration (2018-19)
- Current & Next Steps



The Issues

What older spouses told us:

- Early years challenges of managing anger & emotional detachment, social isolation & blaming themselves
- Reaching resigned acceptance, suppressing feelings
- Keeping the peace, avoiding conflict, holding the tongue, being invisible
- Intense commitment, pride & protectiveness
- Vigilance, filtering & managing the environment for triggers
- Deep & intense grief, anger & sometimes resentment
- Disconnection & non-disclosure in the community
- Regaining some control over their own lives, becoming stoic
- Concern for younger spouses



The Issues: Vicarious Trauma continues for families despite the lessons from history

What younger spouses told us:

- Focus on protecting the family, ensuring wellbeing of others, becoming 'carers'
- Intimacy & recovery
- Grieving and rebuilding relationship, learning to cope
- Changing roles/responsibilities

- Support needs – physical & emotional (social, information, education, financial)
- Barriers to support
 - Lack of recognition/understanding by service/support providers
 - Stigma (self & organisational)
 - Access
 - System complexities
 - Important navigators though continue to be shut out

How services can recognise, include and support families of veterans & first responders

- Formal recognition of impact on families
- Services ready for families (more & earlier)
- Don't assume mental health literacy
- Learning from peers, valuing 'lived experience'
- Early intervention in primary care – 'whole of family' lens
- Family in the whole continuum – start of career onwards
- Don't leave intimacy issues 'unspoken' (conflict, grief & loss). They are sources of rebuilding identity, connection, resilience & recovery from PTSD
- Wellbeing doesn't occur in a vacuum ('illness' narratives need to be challenged)

Not a case of inviting families in; they are already there!

So why not bring people together for the benefit of all.

Thank you for listening



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