

EVALUATION OF THE HEALING EFFECT OF THE FAMILY IN TRAUMA AND STRESS-RELATED DISORDERS

Adnan Vraynko, Engin Zengin, page 147-164

ABSTRACT

In our research, the concept of trauma is defined in detail, its formation process and historical meaning are discussed, traits related to trauma are classified and divided into types. In addition to these, the effects and reflections of the trauma disorder are also investigated. The most important thing is to examine the trauma disorder on the basis of diagnostic criteria and to shed light on the treatment process. Another important concept here is the concept of anxiety. As in the concept of trauma, its diagnosis and treatment are included with definitions, features, formation process, types, effects and reflections. Another concept related to the subject is the concept of stress. In order to focus more closely on the concept of stress, which we are faced with today; It is discussed in a semantic sense, factors that cause stress, methods of protection from stress are evaluated and diseases caused by stress are analyzed. The healing effect of the family on the basis of trauma and stress-related disorders, which is expected to serve the basis of the subject; The effects of illnesses and their relationships with other illnesses, examining the healing effect of the family in trauma and stress-related disorders through examples, examining the effect of family ties on the subject and the resulting success rates are included in the research.

Keywords: Trauma, Anxiety, Stress, Stress Factors, Family, Healing Effect

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INTRODUCTION

Today, considering that every disorder affects the other or has a connection with each other, it is natural that trauma and stress-related disorders have consequences in psychological, physiological, and social terms. Therefore, studies on the subject are also considered important in terms of public health.

Especially trauma, anxiety, stress, and similar disorders have a devastating effect on societies. These problems, which have a high probability of success as more emphasis is put on them and solutions are sought over time, are in the category of disorders that are difficult to overcome without help.

Studies and research in this field are also accelerated with the increasing number of psychological disorders that develop due to trauma and stress. Identifying the factors that lead to trauma and stress is popular with various treatment methods, while the influence of the relatives of the patients is important in the mentioned disorders. Defining the family concept and analyzing the curative effect of the family against the factors that cause stress and trauma are on the agenda.

The problem of our study is described as "Does the family have a curative effect on trauma and stress-related disorders?" Here, family refers to the relatives of the patients. Here,

- Although different results have emerged in different societies for the problem of our research due to the different family perceptions between societies, it is seen that psychological diseases heal faster, and patients return to normal with the support mechanism.
- Our study will be carried out in Turkey, and we are going to analyze the family concept and the curative effect of the family within the structure of Turkish society.

- When we classify the questions related to our study;
- Do trauma and stress-related disorders affect each other?
- Do stress and trauma-related disorders lead to other psychological diseases?
- Do stress and trauma-related disorders lead to other physiological diseases?
- Does the curative effect of the family have the feature of preventing stressors? If yes, to what extent?

Today, as a result of individual and social tragedies, accidents, natural disasters, epidemics, and other events there is a great increase in both stressors and traumatic histories. Taking this under control is the responsibility of health authorities as well as the relatives of the patients. This is exactly what we want to focus on with our study. With our study, we want to shed light on the future and raise awareness on this important issue.

1. TRAUMA AND STRESS-RELATED DISORDERS

1.1. Identification and Occurrence of Trauma

The dictionary meaning of the word "trauma" is "wound that deforms the structure and shape of a tissue or organ and is formed as a result of an external mechanical reaction". Physical and mental traumas are used in two different meanings in medicine.

Trauma refers to all kinds of events that hurt and shake the individual by affecting the physical and mental existence of the person in different ways. It often appears as physical trauma.¹

It is also the situation where an individual is confronted with an event that exceeds his or her ability and causes anxiety, tension,

¹ HERMAN, J.L., *Travma ve İyileşme*, Şefik Basım ve Yayıncılık, 1997.
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depression, hopelessness, psychological conflict, and disorders in the emotional, circulatory, and nervous systems.²

When we check the historical process of Post-Traumatic Stress Disorder, psychological trauma that developed after World War II was considered to be a major psychiatric disorder and was named by DSM-I in 1952. After that, this condition is referred to as adjustment disorder in DSM-II. Studies on Vietnam War veterans yielded results in DSM-III. Thus, a new category named PTSD was created in 1980. (Yalçinkaya, 2005)

It is accepted that some situations cause psychological trauma and lead to its formation. Some of these can be listed as; (Travma Sonrası Stres Bozukluğu, 2018)

- Earthquake, fire, flood, and similar natural disasters,
- Wars, torture, and rape,
- Occupational accidents and traffic accidents,
- Unexpected death events,
- Getting serious and deadly diseases.

1.2. Characteristics and Types of Trauma

Most people experienced a traumatic event (loss of a loved one, serious illness, accident, or personal attack). Over time, the mourning period passes, the pain subsides, and life continues as normal. Most individuals recover spontaneously after the traumatic event. However, some people do not recover even after months or even years after the traumatic event and may continue to experience extreme stress or anxiety due to the trauma. These people often seem to relive the event, may have nightmares about it, and easy things such as relaxing, concentrating, or

² Hijazi, 2004.

sleeping becomes difficult for them as well as they may feel estranged from those they love. In such cases, it is possible to talk about post-traumatic stress disorder. (Travma Sonrası Stres Bozukluğu, 2015)

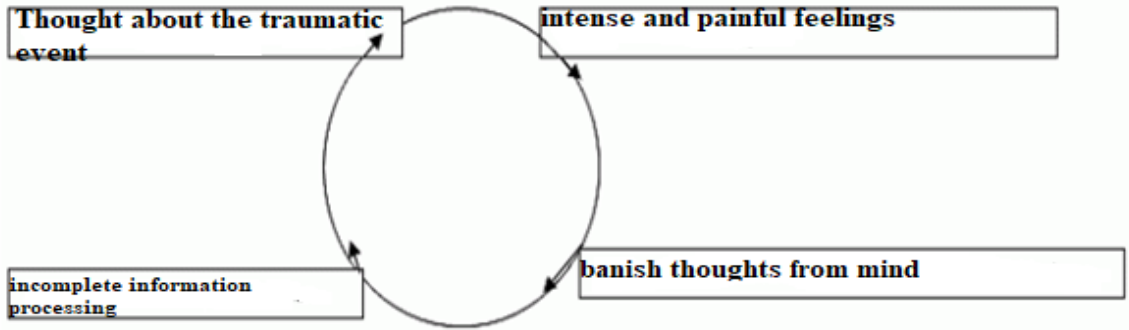


Figure 1. The Vicious Cycle of Trauma

Kaynak: EMDR, Travma Sonrası Stres Bozukluğu, 2018, "<https://www.emdr-tr.org/travma-sonrasi-stres-bozuklugu/>", (Çevrimiçi: 04.04.2021).

Types of trauma have come to the fore with many different studies in the literature. According to some experts, some of the types of trauma are; (BRIERE & SCOTT, 2016)

- Mass incidents of interpersonal violence,
- Natural disasters,
- Child abuse,
- Fires and burns,
- Large-scale transportation accidents,
- Sexual assault and rape incidents,
- Partner violence,
- Vehicle accidents,
- Wars and tortures,
- Physical attack by strangers,

- Encountering murder or witnessing someone else's suicide,
- Exposure of emergency workers to trauma

1.3. Diagnosis and Treatment of Trauma

Two factors come to the fore as a differential diagnosis in Post-Traumatic Stress Disorder;

- The first one is it is often seen together with other mental disorders. The lifetime risk of developing a comorbid psychiatric disorder in PTSD is around 70%.
 - ✓ In their comorbidity study, Doruk and Aydın found ³
 - 35.5% depression,
 - 29% phobic disorder,
 - 12.5% obsessive-compulsive disorder,
 - 6.4% panic disorder,
 - 6.4% alcohol abuse and addiction
 - PTSD can begin before or after comorbid disorders.
- The second one is PTSD symptoms have a wide spectrum. PTSD is like an intersection cluster of anxiety, depression, personality disorders, and psychotic disorders. Symptoms of these disorders come to the fore at different rates.⁴

Although many people in society experience mental trauma, only some of them (for example, 20% of those who experienced the earthquake) suffer from post-traumatic stress disease. This suggests that some people may have a predisposition to the disease, or some people are

³ DORUK, A. ve AYDIN H., Posttraumatic stress disorder and comorbidity. III. Congress of Balkan Military Medical committee Athens-Greece, Abstract book, 1998, s.141.

⁴ ÖZGEN ve AYDIN, a.g.e., s. 39.

more resistant to the disease. Knowing beforehand who will get sick or who will stay sick for a long time after mental traumas is an important issue for society as well as for individuals and their relatives. The fact that the number of people affected by disasters such as earthquakes is millions, indicates that the issue is a serious public health problem. Studies show that women are more likely to get PTSD after psychological traumas than men and regardless of the type of trauma, it has been determined that women have 2-3 times more PTSD than men. It seems that the probability of getting PTSD is more among people who have experienced other mental trauma in the past, have had a mental illness before, or have a relative with a mental illness.⁵

2. GENERAL INFORMATION ABOUT ANXIETY

2.1. Identification and Occurrence of Anxiety

Anxiety disorder is a certain psychological discomfort with the feeling of fear depending on the nervous system. Depression often accompanies these symptoms. Its relationship with other disorders is not clear. (Gürbüz, Kara, & Öngel, 2011) Anxiety is often used synonymously with boredom and concern. Anxiety is sometimes perceived as if something is going to happen and sometimes as a feeling of anxiety for an uncertain reason.⁶ Most of the time, psychological disorders that begin with the anxiety and depression types, can be the beginning of problems extending to PTSD over time.

⁵ Türkiye Psikiyatri Derneği, Travma Sonrası Stres, 2015, "<http://www.psikiyatri.org.tr/pagepublic.aspx?menu=24>", (Çevrimiçi: 16.12.2020).

⁶ SUNGUR, M., a.g.e.

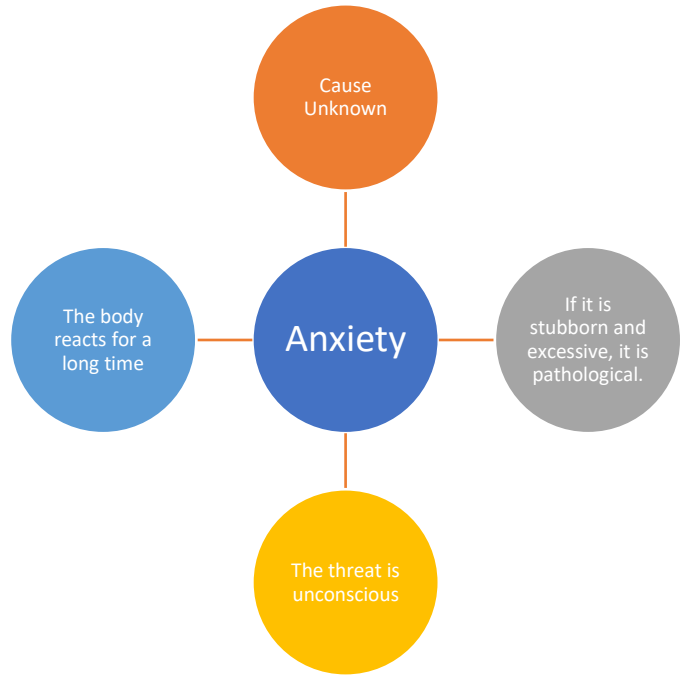


Figure 2. Anxiety

In people with Generalized Anxiety Disorder (GAD);⁷

- There is a state of constant, excessive, and inappropriate anxiety.
- Excessive anxiety negatively affects a person's daily life.
- It even prevents them from performing their usual life activities.
 - These people exhibit the following behavior in every situation:
 - They think of the worst possible outcome,
 - Everything is beyond their control,
- There is no good probability or reversal possible.
- Excessive worry and anxiety in GAD are often related to issues such as health, family, money, or work.

⁷ Yaygın Anksiyete Bozukluğu, 2014, "<http://www.psikiyatri.org.tr/pagepublic.aspx?menu=18>", (Çevrimiçi: 12.12.2020).

- Uncontrollable anxiety is present almost every day for at least six months and lasts throughout the day.
- The prevalence of GAD is 5-6%.
- In other words, 5-6 out of every 100 people may experience this disorder at any time in their lives.
- Anxiety sensitivity increases with age.
- GAD is the most common anxiety disorder in old age.⁸
- Fear and anxiety are dominant,
- It can emerge with many psychopathologies,
- Having some features similar to anger,
- However, unlike anger;
 - Passive emotions and behaviors are exhibited,
- In general, it is an emotional state that also forms the basis of the above-mentioned problems.

2.2. Characteristics and Types of Anxiety

In anxiety disorder, behavior that is inappropriate with the situation, excessive and uncontrollable, even when there is no real reason or cause, are accepted as the main symptom of the disease. Most of the time, the person is aware that his worry is excessive, but he cannot control his worry and calm down. They are described as being overly pessimistic by their circle.

When we need to classify the types depending on the severity of the anxiety disorder, some disorders are; panic attack, agoraphobia, social

⁸ RUSSELL, JA, MEHRABIAN, A. "Distinguishing anger and anxiety in terms of emotional response factors", *J Consult Clin Psychol*, 1974, S. 42, s. 79-83.

phobia, generalized anxiety disorder, obsessive-compulsive disorder, post-traumatic stress disorder.



Figure 3. Anxiety Disorder

Kaynak: SAATÇİOĞLU, Ömer, "Yaygın Anksiyete Bozukluğunun Tedavisi ve Yeni Yaklaşımlar", Bakırköy Ruh Sağlığı ve Sinir Hastalıkları Eğitim ve Araştırma Hastanesi, Klinik Psikofarmakoloji Bülteni, Cilt: 11, Sayı: 1, 2001, İstanbul.

2.3. Diagnosis and Treatment of Anxiety

The presence of certain conditions is required for the diagnosis of anxiety disorder. For example;⁹

⁹ ENGİN, Berat, Yaygın Anksiyete Bozukluğu: Nedenleri, Belirtileri, Tanısı, Tedavisi, 2014, "<http://www.xn--salk-1wa3i.net/yaygin-anksiyete-bozuklugu-nedenleri-belirtileri-tanisi-tedavisi.html>", (Çevrimiçi: 13.12.2020).

- It is observed that there is excessive anxiety and worry about many events or activities that occur almost every day for at least 6 months.
- The person has difficulty controlling his anxiety.
- Anxiety accompanies at least three of the following six symptoms.

Note: It is sufficient to have only one of these in children.

- Irritability, restlessness,
- Difficulty concentrating on a subject,
- Being overly excited or worried,
- Sleep problems,
- Muscle tension,
- Quick and easy fatigue,

The choice of drugs required for the treatment of Generalized Anxiety Disorder and the method of treatment is important. Specifically distinguishing anxiety from medical conditions or illegal substance use is important for initial treatment. For example;¹⁰

- It is important to distinguish depression, psychosis, or other psychiatric conditions in the psychiatric evaluation.
- It is important to avoid products that can increase anxiety.
- If possible, foods containing caffeine (cola, tea, coffee) and chocolate should be removed from the diet.

¹⁰ ALKIN T, ALPTEKİN K., Yaygın Anksiyete Bozukluğu, (Köroğlu E editor), Anksiyete Monografılar Serisi 4. Ankara: Medikomat Basım, 1995, s. 149-188.

3. SUICIDE AND SUICIDE ATTEMPTS

3.1. Suicide Concept

The word "stress", which is derived from Latin, has also been used in the engineering industry over time.¹¹ According to some experts, stress refers to meeting the needs of life and protecting yourself from harmful organisms. According to a different perspective, when the organism experiences stress it either reacts to harmful factors or gets sick or gets rid of it.¹² After talking about the definitions of the concept of stress, we are going to briefly discuss the factors that cause stress.

3.2. Underlying Factors

Before we talk about the factors that cause stress, it makes sense to evaluate the course of stress formation. At this point;¹³

- Alarm response: The body goes into alarm to prepare for war. If the stressful stimulus continues, there is a transition to the second phase.
- Resistance period: The alarm response is eliminated; the person adapts to the stressful environment and acts as if the organism is functioning under normal conditions.
- Exhaustion period: The person is no longer able to respond and begins to experience the reactions in the first phase. The organism gets tired and begins to lower its shields.

¹¹ BALTAŞ, A. VE BALTAŞ, Z., *Stres ve Başa Çıkma Yolları*, Remzi Kitabevi, 9. Basım, İstanbul, 1990.

¹² KÖKNEL, Ö., *Stres ve Hastalıklar*, (Ed. Nevzat Tahrán), Gri Ajans, İstanbul, 1990.

¹³ SELYE, H., *Stress Without Distress*, New York: Harper & Row. Inc., 1974.

As stress creates tension in the person, it also causes discomfort to the individual psychologically and physiologically. (Ünsal, 2012) Therefore, it is also important to analyze the factors that cause stress.

Table 1. Factors Causing Stress

Individual stress factors Stress factors arising from career development anxiety
Stress factors caused by interpersonal relationships Stress factors arising from the structure and climate of the organization
Environmental stress factors Stress factors originating from the society in which the individual lives
Stress factors arising from roles in the organization

Kaynak: Okutan, (2002).

4.EXAMINATION OF THE RELATIONSHIP BETWEEN FAMILY SELF-CONSTRUCTS AND SUICIDE ATTITUDES

4.1. Positive and Negative Reflections On Each Other

Family means mutual meetings of individuals with each other, living in a structure, and the roles of individuals are the building blocks of the social system. A family is a multifunctional unit in meeting basic needs. In this respect, the family is a historical and social identity. A family is a unit consisting of a mother, father, children, and close relatives.¹⁴

Firstly, it is accepted that families also contain different cultural and structural aspects within themselves. There are some dynamics that

¹⁴ BAL, H., İletişim Sosyolojisi. Isparta: Süleyman Demirel Üniversitesi Basımevi, 2004, s. 61.

each family has within itself. Apart from the individual, the family is most affected by the traumatic events that come to the fore in the social sense.¹⁵

4.2. The Effect of Family Ties on The Subject

In some cases, the individual has difficulty in describing the stress and trauma he is suffering. It is easier to realize that individuals who have healthy communication with their families need help. Family members who have close relationships with each other can notice some signs much easier. A person's request for help will not only be verbal, but it can also happen with nonverbal expressions.

In some cases, individuals may not be able to express the state of exhaustion they are in. On the other hand, relatives of individuals with healthy family relationships, understand the situation they are in more easily and provide both moral assistance and encourage them to get professional help. Besides these, they can help them feel more secure by making them feel important to the whole by enabling individuals who constitute an important part of society to realize this value. The importance of the family at this point has an undeniable impact.

RESULTS

The complexity and intensity of life cause stressors to be experienced more actively. Depending on many variables, phenomena such as stress and anxiety felt at different levels have reflections that vary according to the individual. As a basis of our study, we especially

¹⁵ HALLAÇ, S., ve ÖZ, F., ‘‘Aile Kavramına Kuramsal Bir Bakış’’, *Psikiyatride Güncel Yaklaşımlar*, 2014, 6(2).

discussed stress and trauma-related disorders. In this regard, it is aimed to determine the curative effect of the family.

Many physical, social, and psychological effects occur on the person after traumatic events. In some cases, the person loses his or her appetite, cuts off his relationship with his or her social circle, or gets depressed with a state of exhaustion. In the later stages of this situation, the person may also experience substance abuse and suicide attempts. First of all, it is important to recognize this situation to prevent this and similar events. Recognizing the situation easily is possible with the awareness and effective communication of individuals close to the person and most family members. The second stage is to be aware of the seriousness of the situation. It should be accepted that traumatic events sometimes last for years and cause people to develop different disorders. Despite the severity of the situation, the person experiencing the traumatic event should be referred for professional help. In this respect, the family has a great role. The family should follow the person with a non-critical, non-judgmental, listening, trying to understand, and being in a close relationship approach and gain the confidence of getting help from a professional. Ensuring peace, trust, and inclusiveness in the family contributes to making the person feel more comfortable and more cooperative in opening himself up.

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