Mental Health, Trauma, and Healing
Contents

Talking about Mental Health and Trauma
• Labeling Emotions
• I am versus I Feel

What is Trauma?
• Types of Trauma
• PTSD (Post-Traumatic Stress Disorder)
• Myths and Misconceptions about Trauma
• What are Triggers?

Addressing Trauma

Tools to Help Calm Yourself
• Mindful Breathing
• Grounding

Talking about Trauma
• Window of Tolerance
• Attention Switching
• Locking up Negative Memories
• Other Ways of Addressing Trauma
• Laughter for Trauma Healing in Cameroon

Helping Someone Who Experienced Trauma

Resources for Caregivers
• Additional Resources

Community and youth leaders meet to discuss the impact of hate speech. Photo by Shillie Paul
Mental Health and Trauma

It is common for people to have experienced stressful and upsetting events. Even if those events happened to them a long time ago, those events can still affect how a person thinks and feels today. Things that happen to us can affect how we react to other people and situations many years later.

Trauma is the person’s experience of a situation – and how they think and feel about it afterwards. No two people will have the exact same reaction to a given situation and no reaction is wrong or shameful.

Lynn A. Kovich

Talking About Mental Health and Trauma

Let us begin this chapter on mental health and trauma by making this statement: almost everyone has experienced some form of trauma in their life. Any stressful or upsetting event can lead to trauma, and we have all experienced stressful and upsetting events.

Very often, when we hear the word trauma or think about mental health, we think only about those people who are already on the brink of breaking or who no longer function within society. But that is a very narrow understanding of mental health.

Much like we all have a certain level of physical health that changes from season to season, we all have a level of mental health that changes with time and experiences.

Physical and mental health work together to create our overall health and well-being.

There is a spectrum of mental health.

There is ideal mental health, where everything feels effortless and we are free of pain.

There are small traumas that we might not even notice, except that we feel angry or irritated or sad.

There are large traumas that disrupt our sleep, make it hard to concentrate, and make us very sad.

And there are major traumas that make living very hard.

With both mental and physical health, many of us often ignore our bodies. We still go to work when sick. We feel pain in our body, but push on. Something is broken, but we don’t have time or money to tend to it. But this often only makes the injury worse or delays healing.

We also often hide the effects of trauma, even from ourselves. We ignore the sense of anger or irritation or blame others’ actions for it. We ignore the lack of energy or sadness. We go about our days, we work, we do what has to be done.

But the question is: how much better would we feel if we were open to talking about our emotions and past traumas? How much more joy and peace could it bring to us and our communities if we took better
care of our mental health? How much more peaceful could life be if we addressed the source of our anger and sadness?

That is what the focus of this chapter will be. We will begin by discussing mental health and trauma. And we will then talk about effective ways to begin to move towards greater health and well-being.

This material is designed to be used by anyone. Read it. Share what you learn.

And let us work towards increasing our resilience and bringing more joy and peace into our lives and the lives of those in our community.

Working towards healing is good for individuals. But it is also good for communities and important in the context of peacebuilding. Unaddressed trauma can show up in violence and carelessness towards other people.

So the more we learn to address emotions in a helpful way, the easier it is to show compassion, form connections, and work together to mitigate hate speech and build a peaceful society. So let’s begin!

**QUESTIONS TO CONSIDER**

- Growing up, were emotions and mental health talked about?
- Who do you talk to when you need to talk about hard things?
- What small action could you take to make talking about mental health more acceptable in your community or home?

---

**Labeling Emotions**

Most people find it hard to talk about their feelings and emotions.

Many of us grew up in families and cultures that taught us to not share our emotions too much. Some people have an easy time sharing positive emotions, like joy or excitement, but are uncomfortable sharing negative emotions, like fear or anger.

Many have been taught that it is okay for women to talk about emotions, but not for men. And many of us have a hard time naming and understanding what we are feeling, even if we try.

But the good news is that labeling and talking about our emotions is a skill we can learn. And the more we practice it, the better we get.

Why is this an important skill to have? Because talking about emotions has many positive benefits.

It helps us think and reflect on our situation more clearly.
It helps us communicate more accurately.
It increases self-control.
It is good for our physical health.

So how do we start gaining all of these benefits?

Let’s start by creating a list of all possible feelings. How many can we name? Maybe happy, sad, angry? That’s a good start.

What other feelings are there? Maybe calm? Upset, worried, or nervous? Confused, lonely, left out? Peaceful, excited?

The more words we have to describe emotions, the better we will be at analyzing what we are feeling. This is not a test of vocabulary.

Instead, it helps us notice the small differences between feelings. For example, what is the difference between calm and happy? Having different words helps us notice these differences more.

The next step is to read the signals your body is giving you.

Do your muscles feel tight?
Is your back sore?
Are your hands sweaty?
Is your heart racing?
Do you have a lot of energy? Low energy?
Are you colder than usual? Hotter than usual?

The last step is to reflect on your current situation and see which feelings from your list fit your present reality.

For example, imagine your arms and hands feel tight, your heart is beating faster than usual, and your breathing is fast. What is happening? These signals could be a sign of fear. Maybe you see something that signals danger. But these signals could also mean that you are excited, because someone you have not seen in a long time is about to walk through the door. Same signal, different emotion.
Labeling emotions means knowing how to read the signals from our body, reflecting on the situation we are in, and drawing from our list of emotions to then put this information into words, even if we only say to ourselves, “I am feeling (emotion) because (situation).”

Here are some examples:

A friend is very late to a meeting and our first thought is that we are angry. But if we think about the situation more, we notice that we are actually feeling worried, because they aren’t usually this late and we don’t know if something happened to them on the way to the meeting. If we take the time to reflect, we can more accurately tell them we were worried and now are relieved to see them, and not accidentally spread anger.

Our family is being very loud and we are trying to study. We notice how tense our body is and at first think we are angry. But if we think about all of the elements of the situation, we notice that we are actually nervous and anxious about our upcoming test and that this feeling of being tense has nothing to do with the family being loud. So we can then tell them that we are nervous and ask for help in studying instead of yelling at them to be more quiet.

**QUESTIONS TO CONSIDER**

- How many different emotions can you name? Write them all down and try to think about how you would describe that feeling. Compare your list with others and add any to your list that feel important.
- Which emotion words do you often use to describe how you are feeling? Which words do you rarely use?
- Think over situations you experienced in the last weeks and try to label what you were feeling in those moments.
- Do you more often talk with friends and family about your positive or negative emotions? Why?

**I am versus I feel**

It is easy to let our emotions, especially negative ones, take over and fuel conflict.

Very often, this is because we do not take the time to reflect on our emotions or we over-identify with them. How often have we said something like, “I am so angry!” to someone else. But the problem with this statement is that we are letting anger define our identity. We become the person who is angry and angry people act out in negative ways.

But if we change the sentence to “I am feeling so angry!” now we are people with complex identities who also feel things, including anger.

Admitting we are feeling something helps us analyze what is going on, whether anger is actually the best word to describe what we are feeling, and we can work to come up with more healthy ways to address this anger.

I FEEL leaves us in control of our feelings. I AM puts the emotion in control.

It might be a small shift, but the more we can apply this idea to negative emotions, the more we can work to find peaceful ways to address our feelings.

I FEEL lets the emotion be acknowledged, but also allows it to move on and not become part of our identity.

**QUESTIONS TO CONSIDER**

- How might this idea of changing a sentence from I AM to I FEEL be helpful in dealing with hard emotions?
- What other situations could this be helpful in? Here are some examples to discuss:
  - I am sick versus I am feeling sick
  - I can’t go on versus I feel like I can’t go on
  - I am always scared versus I often feel scared
  - I am unemployed versus I am a person who is unemployed
  - I am disabled versus I am a person with a disability
What is Trauma?

Trauma is your body’s emotional response to a terrible event.

These terrible events are called traumatic events, because they cause emotional trauma.

Another way to say it is that trauma is any event that severely threatens your physical survival or safety or sense of emotional and psychological safety and integrity.

Traumatic events are marked by a sense of helplessness, fear of injury or death, and loss of innocence. Trauma often splits the world into a before-and-after view of the world and of ourselves. We see ourselves as one person before the event and another afterwards.

It is important to note that trauma is a natural response. It is your mind and body’s way of reacting to these traumatic situations and trying its best to process what happened.

Trauma lives both in the mind and the body.

In the mind, it can often lead to trouble sleeping, difficulty feeling calm, sadness, anger, fear, anxiety, difficulty connecting with others emotionally, panic, disordered eating, and depression.

In the body, unresolved trauma can lead to physical illnesses, such as stomach troubles, headaches, muscle tensions in your neck and back, rashes, and other symptoms. (Please note that these can also be symptoms of other illnesses and when in doubt, you should go see a doctor if you can.)

Types of Trauma

There are then different ways to think about trauma.

One way psychologists think about trauma is in terms of capital-T Trauma (as in, big Trauma) and little-T trauma (smaller trauma).

The horrific events that often lead to big Trauma are:

- war and combat experiences
- death of a loved one, such as a parent or child
- experiencing a serious injury or disease, like cancer or HIV/AIDS
- death threats
- kidnappings
- being strip searched
- burning of property
- IED explosions
- imprisonment
- physical abuse, including any violence, slaps, or beating
- sexual abuse, including unwanted touching, rape, and incest
- emotional abuse, including being put down, mocked, belittled, and silenced
- childhood neglect, including hunger, forced separation, or emotionally unstable parents
- natural disasters, such as earthquakes, fires, floods, and hurricanes

These tend to be the events most people think about when we talk about trauma.

But importantly, smaller trauma can also be caused by things we don’t often even think of as trauma, such as:

- being bullied
- growing up in a family that argues a lot
- being made fun of and/or excluded, especially in childhood
- infidelity in a relationship
- getting divorced
- having constant financial worries
- undergoing medical procedures
- being stopped and searched

These are all less intense events, but especially if they continue over a long period of time, they are perceived as a traumatic event by the mind and body.

Here is the important part to note: when your body is reacting to trauma, it doesn’t know the difference between big trauma and little trauma. It just knows it is experiencing something disturbing and reacts accordingly.

Because of this, it doesn’t make sense to compare trauma.

What was very traumatic for one person, might not be as traumatic for another person.

We are all different and we all react to situations differently. Even people experiencing the same traumatic event will be traumatized differently.
The important thing to understand is that all trauma is valid. Even if something doesn’t seem like a big deal to one person, it can be traumatic for another.

We need to be compassionate and let people tell their own stories and decide for themselves which events were traumatic. We should not judge. Trauma is trauma.

**QUESTIONS TO CONSIDER**

- Can you describe the difference between “big” and “little” trauma in your own words?
- Looking at the list of things that can cause trauma, which ones are the most likely to be causes of trauma to you and in your community?
- When people in your community or around you talk about trauma, do they include the “little” traumas or only include the “big” trauma? Why do you think that is?
- Is it freeing or scary to realize that we have all experienced trauma in our life? Why?

**PTSD (Post-Traumatic Stress Disorder)**

Trauma often manifests shortly after the traumatic event. Sometimes within hours, sometimes within a few weeks or months. At times, the effects of trauma don’t appear until many years later.

However, with proper help and treatment, we can work through trauma and arrive at a place of healing. Healing means that the trauma is incorporated into our life story, but the event doesn’t hold the power to harm us any longer.

Yet for some people, their trauma doesn’t leave them. These people are often diagnosed with PTSD – Post-Traumatic Stress Disorder.

What are the symptoms of PTSD – Post-Traumatic Stress Disorder?

People with PTSD often have intense, disturbing thoughts and feelings related to their experience that last long after the traumatic event has ended. They may relive the event through flashbacks or nightmares; they may feel sadness, fear or anger; and they may feel detached or estranged from other people.

People with PTSD are more likely to engage in self-harming behaviors and/or die of suicide.

As with all mental health, PTSD exists on a spectrum from mild to severe symptoms.

**PTSD is real and has a very real impact on people’s everyday life.**

Trauma that is the result of interpersonal violence, such as rape, is more likely to lead to PTSD than non-violent trauma, such as a natural disaster. Traumatic events involving death are also very likely to lead to PTSD, especially if these events are not properly addressed in a supportive, healing environment.

While PTSD is harder to treat than other forms of trauma, with proper treatment, PTSD can become less severe or all together go away.

While all trauma often leaves people feeling helpless, the good news is that you do have control over your healing.

You can take active steps to feel better and by doing so, regain your sense of control. We will discuss some of these steps later in the chapter.

**QUESTIONS TO CONSIDER**

- Do you know anyone who has been affected by PTSD? How has it impacted their lives and the lives of their families and loved ones?
- What actions could you take to help support people with PTSD?

**Myths and Misconceptions about Trauma**

Here are some common myths and misconceptions that we would like to dispel.

**Only very severe events lead to trauma.**

As mentioned earlier, there is a wide range of events that can be traumatic, depending on the person and the situation. Often, especially if many smaller traumatic events are present, our bodies respond very similarly to how we would respond to a larger traumatic event.

**Everyone experiences PTSD (Post-Traumatic Stress Disorder).**

No, PTSD is a specific form of trauma. Many factors need to be considered before one is diagnosed with PTSD.

**Trauma symptoms manifest immediately after a traumatic even.**
No, for many people, the first reactions after trauma are shock or denial. It usually takes a few months before trauma symptoms are noticeable and at times, if the trauma is repressed enough, it can take years.

Anyone suffering from trauma is unstable and violent.
No, angry outbursts and violence don’t always occur. How a person reacts to a traumatic event varies from person to person. But feelings of anger are also a normal part of the healing process. The important part is to distinguish between feeling anger and acting upon anger.

Trauma is limited to a specific age group.
No, all age groups are affected by trauma. Children are often especially vulnerable to trauma, because they do not yet have the mental capacity to make sense of the world and often assume that they are to blame for the trauma they are experiencing. They often internalize trauma and suffer from a sense of low self-worth. Children can also suffer from PTSD, with most showing symptoms only several years after the traumatic event happened.

Recovery is impossible.
Absolutely not! With the right systems in place, including creating a social support system, learning to use coping mechanisms, and working through your trauma, healing is possible for any and everyone.

➡️ QUESTIONS TO CONSIDER ➡️
- How many of these myths have you heard?
- What could you do to help spread the truth and dispel these myths?

What are Triggers?
You might have heard people talking about things that “trigger” them. What do they mean by that?

Triggers are anything that make you suddenly recall a previous traumatic experience and put your body and mind into a state of alert and fear.

For example, someone who has experienced gun trauma may feel fine until they hear a car backfire loudly, and this sound triggers them, bringing back (consciously or subconsciously) the memory of the traumatic event and putting their body into high alert.

There are many things that can trigger us. Here is a list:

PEOPLE
- Seeing either the actual perpetrator or a person who looks similar to the perpetrator. Clothing (such as a uniform), scents, a voice, or something similar can all be triggers.

THOUGHTS
- Consciously thinking about the traumatic event can also trigger you. This is why it is important to only address trauma in a safe environment and only once you have learned methods to calm yourself down when triggered.
- Other emotions can also be triggers, such as feeling lonely.

THINGS
- Buildings or places, especially dark spaces or dark streets or places tied to the traumatic event.
- Signs, posters, songs, poetry, etc.

SCENTS
- Fuel (Petrol or Kerosene)
- Perfumes
- Human waste
- The smell of nature (warm winds, smell of water, etc.)

SHOWS, NEWS, MOVIES
- Watching a combat movie
- Documentaries about abuse
- Any movie, book, poem, song that addresses either the trauma directly or is tied to the scene of trauma.

SITUATIONS
- Loneliness
- Being told to do something and not feeling in control
- Conflicts in relationships
- Abuse situations
- Additional traumatic events
- Lack of power and control

It is important to note that while the list above details many negative things, positive things can also be triggers. The birth of a child can be a trigger for example. Other otherwise positive triggers could be seeing other people laughing, enjoying themselves, lovely music, a couple in love, beautiful scenery, or similar things.

The takeaway: your triggers are unique to you and your situation. What triggers one person will not necessarily be a trigger for someone else. So learn to listen to your body: when do you feel yourself suddenly feeling panicked or scared? Or tense? Or suddenly very sad?
Try to find out what your triggers might be, so that you can be more proactive in telling others about it and finding ways to avoid being triggered as much as possible.

**QUESTIONS TO CONSIDER**

- All of us have triggers, the results are just more or less intense for each of us. Can you think of what your triggers might be? Are there things (sounds, scents, spaces, people) that instantly make you feel uneasy, even if these things don’t seem to bother anyone else?
- What steps could you take to try to avoid triggers or to calm yourself down in these situations?
- What could you do to let other people know it is okay to talk about their triggers?

## Addressing Trauma

We began this chapter by stating that everyone has experienced some form of trauma, then talked about the types of trauma and triggers.

Now that we all have a better understanding of trauma, how do we begin to address it?

### Tools to Help Calm Yourself

#### Mindful Breathing

We all know that when we get scared, we tend to either hold our breath or start breathing too quickly and too shallowly. So one very effective way to calm yourself down in any situation is to intentionally focus on your breathing. This sends signals to your brain that you are safe, which in turn sends out chemicals to calm the body.

**HOW TO BREATHE**

A note on breathing: In order to get the full benefit, you want to breathe deep into your lungs. When you breathe in, you want to feel your stomach rising up. If your chest puffs out instead, it is a sign that you are breathing too shallowly.

Start by placing a hand on your stomach, right above your belly button. Now try to breathe in and push against the hand. Do you see your hand rising up as your stomach expands? Great! Then you are breathing deeply. This is the type of breathing you should use for all of the following exercises.

**8–4–8–4 BREATHING**

Begin by breathing in for 8 seconds, feeling the space above your belly button expand. Hold your breath for 4 seconds.

Exhale for 8 seconds, trying to push out all remaining air at the end. Your stomach should be pulling in when you exhale.

Hold your breath for 4 seconds.

Repeat as many times as you like. One minute can already make a big difference.

This breathing practice can be used to calm yourself down when triggered or in a difficult situation. It can also be done before or after a difficult task or interaction.

You can vary how long the inhales are. Feel free to do what works for you, just make sure your exhale is as long (or longer) than your inhale.

This exercise can be done anywhere, at any time.

If possible, sit somewhere comfortable. Notice the contact your body makes with the floor or the chair and how nice it feels. You can close your eyes, if that feels good, or keep them open, looking but not focusing on anything in particular.

**More options**

This 8–4–8–4 breathing exercise can be done when you are in a situation that is making you anxious.
But it is also very helpful to do it daily, when calm, to practice it. That way, you will feel more ready and skilled at using this breath when you are anxious and needing to calm down.

So take 5 minutes a day and sit and breathe.

When breathing, you can choose to only focus on counting.

Or you can focus on your breath and thinking In-Hold-Out-Hold.

Or you can focus on repeating a word, like strong or calm.

You can also let your mind wander. Whenever a thought or feeling comes up, just notice it, name it, and let it go. Do not engage with the thoughts, but just note them. You can say to yourself, "Oh! A thought!" or "Ah! An emotion!" and then let it pass on. This technique is called Noting. It teaches you to see that you do not have to engage with every thought or emotion, but rather that you are in control of when you want to think about something and when you do not want to think about it.

Smell a food, drink, flower, or other item.

Take a sip of tea or coffee and truly taste it. Try to name all of the flavors.

Splash water on your face or put your hands in a bowl of water and feel how they feel.

Take a few steps and feel your feet making contact with the ground.

Focus your attention on sounds, first those near you, then those further away. Try to pick out all of the sounds you hear, from the quietest bird to the loudest motor.

**QUESTIONS TO CONSIDER**
- Which of your senses do you connect with the most? Sight? Smell? Sound? Touch? Taste?
- What are some of your favorite things that would work to ground you? Is there a particular smell? Or something you could look at?

**Grounding**

Another technique that is useful when you’re feeling overwhelmed or triggered is called Grounding.

The idea is that trauma often takes you back to a past event and out of the present moment in which you are safer. So grounding is a way to remind your mind and body that you are in the present moment.

Grounding uses your sense of smell, touch, taste, sight, and sound to do that.

Here are some options:

For a few seconds, look around and name all of the objects you can see around you.

Focus on the contact your body makes with your chair and/or the floor.

Hold a hot or cold drink in both hands and fully feel the hot or cold temperature.
Talking about Trauma

How Trauma Can Affect Your Window of Tolerance

**HYPERAROUSAL**
Anxious, Angry, Out of Control, Overwhelmed
Your body wants to fight or run away. It's not something you choose – these reactions just take over.

When stress and trauma shrink your window of tolerance, it doesn't take much to throw you off balance.

**HYPOAROUSAL**
Spacy, Zoned Out, Numb, Frozen
Your body wants to shut down. It's not something you choose – these reactions just take over.

Working with a practitioner can help expand your window of tolerance so that you are more able to cope with challenges.

© 2019 The National Institute for the Clinical Application of Behavioral Medicine
Window of Tolerance

Research shows that we begin to heal our trauma by talking about it with a supportive person, whether that be a friend, family member, or therapist.

If we do not have someone who feels safe to talk to, we can also begin to address the trauma on our own, working it through in our mind or journaling about it. Although talking about a traumatic event is hard, in the long run, it is worth it.

There is something in psychology called the Window of Tolerance. Your window of tolerance is the mindset in which you feel you can effectively deal with life and the problems and daily tasks you are faced with.

If you exceed your window of tolerance, you quickly lose your ability to reason or easily complete tasks that would otherwise not be difficult. You are also not able to work through past traumatic events if you are not in your window of tolerance.

The problem is that traumatic events shrink your window of tolerance. It often does not take much for a traumatized person to leave this window. But the good news is that the more you work to address and heal, the more your window of tolerance will again grow larger.

Whether in talking to someone or working on memories by yourself, one way to safely approach memories of trauma without leaving your window of tolerance is through a technique called Attention Switching.

Attention Switching

How does Attention Switching work? Start by bringing to mind an image that makes you feel safe, connected or protected. Perhaps the image is of being embraced by someone you love or of sitting together with a friend drinking tea. It can be anything that brings up a feeling of being safe and cared for.

Then consciously let go of that image and move to engage with an image of the traumatic event you are struggling with, knowing that you can switch back to your safe image at any point if you feel yourself leaving your window of tolerance. If it feels too much or too heavy, it is.

Leave that thought and return to your happy place.

Then, when you are ready, you can again go back to the negative image, and use this method to switch back and forth.

Make it a conscious process as you switch between the image and the one you are struggling with. Talk to yourself as you switch. Remember this is not an exercise to block out your experience, but rather to exert control over it.

In the beginning, you might only be able to engage with the negative image for a few seconds. That is absolutely fine. Healing takes time.

And gradually, you will be able to stay within your window of tolerance while addressing trauma for longer periods.

It is important to take it slowly.

Questions to Consider

- What image could you create in your mind that makes you feel safe and loved and protected?
- Does the idea of Attention Switching make sense to you? What is the benefit of using this technique?

Locking Up Negative Memories

Another technique that can help in feeling safe while also addressing trauma is to create an image in your mind of a place where you can lock up the memories of your bad experiences.

You can then put the painful memories in there and only open it when you want to. This also helps you gain control, not over the past event, but how you choose to interact with it in the here and now.

Questions to Consider

- What image could you create in your mind that would be a place to lock up negative memories?

Other Ways of Addressing Trauma

Here are other ways to help feel in control while working through trauma.

- Give yourself time to grieve and accept that something traumatic happened.
- Affirm your resilience. You are strong and survived
the traumatic event and you have the inner strength that it will take to heal from the trauma.

- You can repeat phrases to yourself like:
  - I am safe right now.
  - I am no longer in that situation.
  - I can get through this.
  - I can do hard things.
  - This too will pass.
  - That was a painful experience, but I am not living it now.

- For some, religion and getting to talk to God helps.
- Feeling physically strong can help, so when possible, eat well and try to move your body by exercising.
- Find something that brings you joy, whether it is watching the sunset, drawing, singing, or any other activity that lets you lose yourself in that activity.
- Spend time with people who make you feel cared for as often as possible.
- Find a support group, if possible.

Know that regardless of what sort of trauma you have experienced, it was not your fault. And you cannot change what happened, so spending time thinking about what you could have done differently to avoid the trauma is often more harmful than helpful. We cannot change the past, we can only learn to incorporate it into our life and find strength in being survivors.

The more that we can identify limiting beliefs (I shouldn’t have been out walking, I should have known better, I shouldn’t have asked more questions, I should have been able to rescue them...) and work to reframe them (bad people do bad things, but they do not have power over me any longer or hard things happen, but I am strong and will be able to cope with this), the more your journey will move towards healing.

 QUESTIONS TO CONSIDER

- Which of these ideas about addressing trauma feel like they might work best for you?
- Could you imagine joining or creating a group in which people could come to talk about their trauma?
- What makes you feel strong?
- Who (or what image) can you turn to when you need to feel protected?

---

Laughter for Trauma Healing in Cameroon

by Amindeh Blaise Atabong

YAOUNDE, CAMEROON – For Canisia, a woman traumatized by the conflict in the English-speaking part of Cameroon, May 26 was a day of laughter, the first in 18 months.

“This event has wiped out my sorrow and given me the impetus to move on. But I still feel for the thousands of other Anglophone refugees and internally displaced persons who have not had this experience,” Canisia added, bursting into laughter as she watched another comedian perform on stage.

Canisia is one of thousands of English-speaking Cameroonians displaced by a drawn-out conflict in the North West and South West regions. She, like many others, has benefited from a local initiative that offers psychological services to address the trauma of the conflict.

Like many displaced people, Canisia has been traumatized by her experiences. But getting psycho-social care is a difficult thing when the priority is often on providing food and shelter to displaced people. Comedians like Senior Pastor are stepping in with a local initiative to fill the gap.

Laughter Therapy

The ‘Laughter Heals’ comedy performance is a show created to build cohesion among people and provide an avenue for the psychological healing of broken hearts in Cameroon’s fractured community. The host of the show, Senior Pastor, an award-winning Cameroonian comedian, said it was his own small contribution to counter hate speech and bringing relief to victims.

“We gave them hope, laughter, and sadness left [while attending the show],” Senior Pastor said. He notes that the show was six hours long when staged in Yaounde and will be performed in other towns as means allow.

Ntui Olga, an internally displaced person from Kumba who attended the show, said it was awesome. “[For the first time] in a very long time, I could feel like we are in peacetime.” The comedians joked and touched a bit on the conflict in order to make survivors laugh about it. But they did so without any form of prejudice. The ‘Laughter Heals’ comedy show was inspired by a project carried out last year by a local organization - Local Youth Corner Cameroon (LOYOC).
Helping Someone Who Experienced Trauma

If someone you know has experienced trauma, the most important thing you can do is listen. Here are some guidelines you can commit to.

THE SAFE LISTENER’S PROMISE:
- I will listen to understand.
- I will keep what you share private.
- I will not minimize your pain.
- I will not compare your pain with my own.
- I will not give quick solutions.
- I will listen again when you want to share more.

Here are some ways to go about providing initial care:

MAKE CONTACT
- Establish contact with a trauma survivor by introducing yourself and offering assistance.

REDUCE ANXIETY
- Try to create a calm atmosphere.
- If available, make sure they are physically comfortable. Offer a blanket or a cup of tea.

LISTEN
- Make the survivor feel heard and understood.
- Listen well. Simply listening can ease the pain.
- Let them say or not say anything they want to without questioning them or adding comments.
- Let them express any and all emotions without censoring them.
- Listening is more important than asking questions.

LIFT THEM UP
- Be a voice of support. Encourage them through words of affirmation, reminding them that they are strong and can cultivate skills to work through this trauma.

INTERPERSONAL RESOURCES
- Encourage and help the survivor to lean on networks of friends, family members, church members, and community members for support, as applicable.

ADDITIONAL RESOURCES
- Mobilize all available medical, financial, and educational resources.

ENCOURAGE ACTION
- If the situation is one in which it would help to report the violation, or confront a person/family member, etc., discuss the options, weighing the risk.
- Be sure to let them decide on the course of action. Do not push them to do anything they are uncomfortable with.

FOLLOW UP
- Keep in contact.
- Make contact on the anniversary of the event. This lets them know they are not the only ones carrying the memory of the pain.
- Understand that the period of post-trauma will have highs and lows. Someone might be doing much better one month, and much worse later on. Coping and healing is not a straight path.

REFERRAL
- If trauma services are available, help them access counseling services.

QUESTIONS TO CONSIDER
- Can you imagine helping to bring a comedy show to your community?
- Do you think a comedy show would help with trauma?
- What other events or entertainment might be helpful to those needing encouragement?
- What other events or entertainment might be helpful to those needing encouragement?
Resources for Caregivers

This final section offers resources for caregivers and other humanitarian workers who are working with survivors of traumatic events.

Vicarious trauma, also known as compassion fatigue, is a stress reaction that may be experienced by those consistently being exposed to stories of trauma. That is why it is important to create rituals and routines that help those hearing of trauma to process what they hear.

As with those experiencing trauma firsthand, you are encouraged to pay attention to your:

PHYSICAL WELLBEING
- Get as much sleep as needed (8-9 hrs)
- Eat healthily
- Build in times of rest throughout the week
- Exercise or get some movement
- Practice mindful breathing
- Journal about your day
- Check in with your body and mind at the end of the day and see where you are holding tension. Work to relieve that.

NUTURE YOUR SOCIAL SUPPORT SYSTEMS
- Check in with friends or family regularly, if those interactions renew your energy.
- Create boundaries around work and home life.
- Spend time with people who are supportive and caring.

On a daily or weekly basis, there are also some questions you can ask yourself to think about how you are using your time and energy.

PACE
- How fast am I going? Am I rushing through the day? Do I have any time for my own needs?
- Can I keep up this level of intensity?
- Where can I build in time for reflection and recharging?

ENERGY
- What are my energy patterns? Do I have more energy in the morning, afternoon, or evening?
- Can I structure my interactions with others around the times I feel most energetic?
- Am I able to organize my day so that I can approach my most challenging tasks when my energy is higher?

- Am I listening to my body when my energy is lower?
- What can I do now to take care of myself and my energy so that I can be more resilient in the long run?

CHOICE
- Where can I choose to focus my attention?
- What can I choose to let go of, either for now or all together?
- What do I want to ask for in terms of support or help?

QUESTIONS TO CONSIDER
- These resources are useful not only for caregivers, but offer good advice for everyone. Looking over the list, which of these tips could you try to include in your life to help support your mental well-being?
- What are some ways we could learn to support each other in taking better care of our well-being?
Additional Resources

SHORT FILM:
Jal Tekädä, The Journey of My Life (5 Minutes)
https://youtu.be/Xpf1s664Pns

Jal Tekädä, The Journey of My Life is a short film produced and performed by internally displaced persons (IDPs) at the UN protection of civilians (PoC) site in Bentiu, South Sudan, a town that witnessed some of the most brutal fighting of the conflict. The film tells the story of young IDPs’ journeys to seek forgiveness and healing.

Trauma Healing For Refugees
Platform Africa: Training of Trainers (VIDEO)
https://youtu.be/7hooaj94PeM

On the Benefits of Journaling
https://www.apa.org/research/action/writing

South Sudan War | Refugees Trauma Healing Program
Platform Africa: Introduction by Kigezo (VIDEO)
https://youtu.be/aB8mi9XRX70

First Draft News: Vicarious Trauma Guide
https://firstdraftnews.org/articles/vicarious-trauma-guide/

Trauma First Aid

Conflict is #solvable Podcast
A podcast by Victor Ochen, Founder and Executive Director for the African Youth Initiative Network (AYINET), about why we need to train local peacebuilders instead of only doing so after trauma has occurred.
https://www.rockefellerfoundation.org/podcast/conflict-is-solvable/

Note: The original version of this chapter was put together by psychologist Sharlotte Ainebyooona Kigezo and we are grateful for her insights and the work she has done together with Platform Africa in bringing mental health services to the refugee communities in Uganda.
Events that often lead to Trauma

ABUSE
- physical
- sexual
- emotional
- being strip searched
- IED explosions
- imprisonment

VIOLENCE
- war and combat experiences
- being stopped and searched
- death threats
- shooting of a loved one
- being shot

EMOTIONAL TRAUMA
- witnessing others being harmed
- financial worries
- property damage

SEXUAL ABUSE
- undergoing medical procedures
- kidnappings

PHYSICAL ABUSE
- burning of property
- in the community
Events that often lead to trauma:

- Physical abuse
- Sexual abuse
- Emotional abuse
  - Being strip searched in the community

VIOLENCE

- War and combat experiences
- Kidnappings
- IED explosions
- Financial worries
- Witnessing others being harmed
- Being stopped and searched
- Death threats
- Burning of property
- Undergoing medical procedures

Abuse

- Witnessing others being harmed
- Imprisonment
- Physical threats