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## After the tragedy: Vent? Not necessarily

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Francine Orr / Los Angeles Times

MOURNING: After a student killed dozens at Virginia Tech in April 2007, a campus ceremony marks the loss. Immediately discussing such a trauma may not be beneficial, a study finds.

**On the heels of events such as terrorist attacks, say researchers, some people do better to leave things unsaid for a while.**

By Susan Brink, Los Angeles Times Staff Writer  
July 28, 2008

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"THE MORE [Virginia Tech students] can talk about what they've lived through, the more that they can be encouraged to emote . . . that gives them some security and insulation against burying those feelings and then having them surprise them later in life."

In the aftermath of the April 16, 2007, fatal shootings of 32 students and faculty at Virginia Tech, Ablow was simply voicing post-Freudian conventional wisdom: When something horrible happens, vent.

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"The common assumption is that in order to successfully cope with a traumatic or disturbing event, people need to talk about it, to express their feelings," says Mark Seery, psychologist at the University of Buffalo. "And if they don't, they're suppressing true feelings and that will cause problems down the road."

But hold on a minute. That has simply not been proved true for all people in all circumstances, Seery says. His most recent research, in the June issue of Journal of Consulting and Clinical Psychology, shows that after a large-scale traumatic event, such as the terrorist attacks of

Sept. 11, 2001, quickly talking about one's emotions isn't necessarily for the best.

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"In the immediate aftermath of a collective trauma, it's perfectly healthy to not want to express your thoughts and feelings," he says.

In fact, it can do more harm than good. Some people have periods of what psychologists call "healthy denial." Like Scarlet O'Hara, they cope by promising themselves to think about it tomorrow. Being pushed to give voice to their worst reactions too soon could embed the worst of it in memory and cause them to dwell on the tragedy. And if they can't or won't talk, urging them to act against their instincts could make them think that something is wrong with them.

The new study is in line with other mental health research that suggests some things are better left temporarily unsaid -- at least for some people. Those who immediately talk about the trauma of an attack or a hurricane can find, as often as not, that airing it doesn't change the memory and fails to bring relief. Seery found that those who responded quickly to prompts to write online about the attacks had higher levels of stress two weeks later. Months later, they were more likely to have symptoms of post-traumatic stress disorder.

In his bereavement research, James Pennebaker, chair of psychology at the University of Texas at Austin, found that choosing not to express feelings in the face of a death reflected resilience, rather than vulnerability. Pennebaker's research examines expressive emoting, and research results on bereavement and trauma often overlap.

None of this negates the value of talk therapy or of expressing thoughts and emotions when it feels right. But the new research suggests that widespread use of clinical techniques that are proved to help some situations -- like a couple in marital trouble or a depressed person exploring emotions with a therapist -- has gotten ahead of the evidence on the best course of mental healthcare after a disaster.

"Rubbing people's noses in their miserable experiences immediately after is probably bad for a significant number of people," Pennebaker says.

**Debriefers at the scene**

Despite a lack of proof that expressing feelings right away is good, the United States has an industry of people, called critical incident stress debriefers, whose job it is to converge on disaster sites and get people to talk about their feelings.

Not necessarily mental health experts, debriefers sent by city or county health, fire or police departments have had training in what to say to encourage emoting after a disaster. They head to scenes of death and destruction caused by Hurricane Katrina, floods in Iowa or fires throughout California, not to mention human-made horrors like the Sept. 11 attack on the World Trade Center or the Columbine or Virginia Tech school shootings.

Yet a 2006 review of studies on such debriefings in the Review of General Psychology found, in general, either no benefit or worse outcomes from the interventions.

"If it's immediately after an upheaval, it's completely foolish to do that," Pennebaker says. "Some people naturally talk and listen to others. If they don't want to talk about it, they don't. If they do, they do. They may need help in two months, but they may not want help then."

Seery's study confirmed the foolishness of requiring instant emoting from witnesses to a disaster. Focusing on responses to the Sept. 11 terrorist attacks, he surveyed 2,138 people online at intervals over two years. Part of an existing marketing panel, the volunteers were asked on Sept. 12, 2001, if they wanted to talk about the attacks. About 25%, or 579 people, chose not to respond to the e-mail prompt. Follow-up surveys by Seery and his team at two weeks, then every six months for two years, found that those who had nothing to say online after the attacks had better psychological functioning over the next two years. "In particular, they had lower risk of symptoms of PTSD," Seery says. "Not wanting to talk didn't predict any negative effects or delayed reaction."

Those who did want to talk about it right away had a variety of things to say. Some merely said something like, "This is terrible." Others went on for paragraphs. "We found that when people had more to say, that predicted worse psychological function and worse physical health over time."

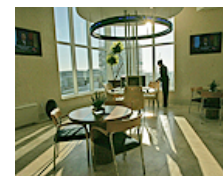
It could be that those who needed to talk about it were more deeply affected, he says, and would need more help in coping over a longer time. But it's also possible that being immediately asked to describe in detail what happened can add to the trauma. "If I go to a therapy session and people are telling me that I should want to talk about it, and I don't want to talk about it, and then I'm told that's an unhealthy response . . . well, that's one plausible route to creating harm," he says.

If there are two kinds of people, those who want to talk and those who don't, then

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pushing the latter into talking might lock the trauma in memory, causing them to dwell on it. Those who don't feel a need to vent may be more resilient and have better coping skills, Seery says, and those who feel compelled to talk may be naturally more distressed by it and will continue to be deeply affected.

In any case, neither type should be asked to do what doesn't come naturally. "I come from a pretty stoic Kansas farm family," says Denver psychologist Shawn Smith. "I was taught to suck it up, and shown ways to do it, like humor. If somebody sat me down and made me relive it over and over again, or describe things in detail -- things that I'd heard and smelled -- I'd be going against what I was taught, and not equipped to do it."

Seery found that those who didn't want to talk about the trauma remained healthy, no doubt using a variety of coping skills -- spit-shining the house, working around the clock or heading to the shopping mall or golf course to get their minds off it. They may be doing more than distracting themselves. They may be putting pain on hold until they muster up more strength or gain perspective.

A concern about mental health overreaction led a group of 19 psychologists to pen a letter to the American Psychological Assn. after the World Trade Center and Pentagon terrorist attacks. "In times like these, it is imperative that we refrain from the urge to intervene in ways that -- however well-intentioned -- have the potential to make matters worse. . . . Psychologists can be of most help by supporting the community structures that people naturally call upon in times of grief and suffering. Let us do whatever we can, while being careful not to get in the way," they wrote.

Smith, who posted the letter on his psychology blog, IronShrink.com, has been moved by public tragedies as much as anyone. "But in regard to my own mental health, I'd like to pause for a moment, take a breath and assess the situation," says Smith, who teaches crisis intervention at the University of Denver's Graduate School of Professional Psychology. "Do I really need a counselor today? Probably not."

#### Talkers need listeners

It's after the dust of the initial shock has settled that talking about it can help. Taking pen to paper, to explore feelings, can be an equally good outlet, especially when people find themselves thinking obsessively about a trauma.

But it helps only if thoughts go forward, not round and round. "Thinking can become rumination, going from A to B and back to A to B," says Sonja Lyubomirsky, psychologist at UC Riverside and author of "The How of Happiness." "People ruminate about negative things, and they get more pessimistic."

"All things being equal, talking can be as good or better than writing if the person you're talking to is all accepting, is not hurt by what you say and is not judgmental," says Pennebaker.

And there's the rub -- finding a tolerant listener. "All of us have had an experience where we watch a look of horror wash across someone's face," Pennebaker says. "If people talk about something really personal, and the other person does not validate them, they're likely to be worse off than if they hadn't said anything."

Whatever the form, it's most helpful to mental healing when the words create a meaningful story. Such a story can move someone from the event, through insight and toward acceptance or a solution. "There has to be growth. There has to be change," Pennebaker says. "Otherwise, it's not therapy. It's theater."

Most of the hundreds of people he has studied who have been through a traumatic experience are able to speak or write themselves toward a deeper understanding of what happened. "What I've loved about this work is that I think people are naturally their own best therapists," he says.

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Does talking about your feelings in the wake of a tragedy (public or private) help you emotionally? If not, how do you go forward?



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1. Great article. To me, when the tragedy of Virginia Tech occurred, it seemed as tho we, the public , were being pushed down the aisle of getting thru the event. There was an immediate shrine set up. A memorial service darn near the next day. Felt contrived and like it was being pushed down our throats by politicians eager to stifle our sense of outrage by saying, "ssshhhhh ! There's a Memorial going on. Be quiet. Do not think, just sing the hymn."

Submitted by: Lee  
9:14 AM PDT, Jul 26, 2008

2. This analysis will be flowed becasue it is using the 9/11 attacks as an example for your analysis which is the only horror you have seen as "civilians", but you should expand your surveys to include other human beings to come up with a better analysis, for example asking Japanese on Hiroshima, Nagazaki, attacks in 1945, or Palestinians for the daily horror they are getting by F-16s, or other, you might see that retaliations and other reactions or also possible, especially when there are continuous unfairness, or double standards.

Submitted by: An Arab  
2:57 AM PDT, Jul 26, 2008

3. I wonder if this isn't the beginning of an end for traditional 'post-Freudian' approaches to psychology. Obviously, up to recent times there hasn't been an effective way to study an individual without asking questions, but asking a person to reveal their inner thoughts is stripping away a layer of their armor. Even when far removed from any tragedy or threat, this may be unsettling or even traumatic. If we assume that brain scans (and similar) could develop to the point of automated diagnosis, ethical and legal implications will present barriers to abandoning personal dialogue with a professional.

Submitted by: Edwin Herdman  
11:15 PM PDT, Jul 25, 2008

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