

## MEDIA RELEASE/Interview opportunity

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7 July 2017

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**When** Wednesday 12 July 11am – 1.30pm

**Where:** Peepul Enterprise, Orchardson Avenue, Leicester LE4 6DP.

### Event aims to improve awareness of the effects of trauma

#### From Conflict to Care: Supporting people affected by depression, trauma and PTSD

NHS organisations and partners in Leicester, Leicestershire and Rutland are spearheading a new drive aimed at improving awareness of the effects of trauma.

They will host an event at the Peepul Enterprise Centre in Leicester on Wednesday 12 July to encourage discussions and launch a leaflet encouraging people troubled by events they have witnessed – either first hand or indirectly, to recognise the signs of depression and post-traumatic stress disorder (PTSD).

The leaflet '[Don't Be Haunted by the Horrors of a Conflict Zone](#)', is the first of its kind nationally.

It has been developed jointly by Leicestershire Partnership NHS Trust and Leicester, Leicestershire and Rutland's three clinical commissioning groups.

It is thought hundreds of people could be experiencing significant psychological and physiological problems because of their exposure to conflict and trauma, either at first hand or remotely.



The aim of the event, where service users will share their personal experience of PTSD, is to raise awareness of the signs and symptoms and to encourage people who are affected to seek out support or treatment, where needed, before they reach crisis.

Event co-ordinator Leon Herbert, from Leicestershire Partnership NHS Trust, said: "We know from our partnerships with local services, including primary care providers and community outreach services, that significant numbers of people are feeling the impact of exposure to conflict and trauma.

"Some might be suffering post-traumatic stress disorder after returning home from serving in the armed forces, travelling to war zones, arriving here as asylum seekers or witnessing

serious incidents. The national spike in hate crimes post-Brexit can aggravate already significant issues and it is important that we safeguard our communities from harm.

“We must also recognise that it is not just people who have experienced trauma directly who are being impacted. People are being exposed to graphic images in the media and online that can impact on their mental health. We know of cases where children as young as eight are suffering from symptoms of PTSD after watching violent videos online, because this material is so readily available.”

Dr Graeme Whitfield (pictured), a consultant in cognitive behavioural therapy with LPT, is one of the speakers at the launch.

He said: “Triggers for PTSD can be anything from a single traumatic event such as a car crash to people who have witnessed numerous life-threatening incidents both in childhood and in later life.



“We have worked with ex-service personnel who have witnessed death and dying abroad, terrorist victims, people who have been assaulted sexually or physically, refugees escaping conflict abroad and people who have endured domestic violence.

“Some people can be managed by their GP but very often it can be a hidden issue. People become used to the symptoms being part of their lives and start avoiding things that trigger them. We use NICE-recommended talking therapies and people generally respond well.

Tim Colman manages an adult community mental health team for LPT in Leicester City and says they have seen a rise in cases of post traumatic stress disorder.

He said; “Many of the people affected have come here to escape conflict abroad and we work closely with the Red Cross and the Assist project in Leicester to support them.

“We have worked with people who have been forced into being boy soldiers, women who have been sexually abused and fallen into the hands of sex traffickers, people who have fled corrupt societies and young people who have arrived in the UK unaccompanied.”

Other speakers at the event include Eric Nkundumbano from the British Red Cross in Leicestershire, Leicester City Council public health programme manager Mark Wheatley and Jim Bosworth from East Leicestershire and Rutland Clinical Commissioning Group

**From Conflict to Care** will be opened by Rachel Bilsborough, director of community health services for Leicestershire Partnership NHS Trust.

- The leaflet is being distributed to GP surgeries across Leicester, Leicestershire and Rutland and is available in its original and translated formats on request from [leon.herbert@leicspart.nhs.uk](mailto:leon.herbert@leicspart.nhs.uk)
- **About PTSD**

Tim Coleman explains:

“There are three components that help us to recognise PTSD. The first is intrusions, or flashbacks, which can happen any time of day or night and can evoke the sights, sounds and sometimes even the smells of the original trauma.

“The second is hyper-arousal, which leaves people so on edge they can experience very intense reactions – such as anger or tearfulness - very quickly. And the third is avoidance where their fear and anxiety become so great that, to escape it, they lock themselves away from day-to-day life.”

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### **Callum’s\* story:**

“I work in a role which involves attending incidents and some years ago I attended a fatal road traffic accident affecting multiple occupants of a vehicle. It was a terrible scene, the worst I have ever seen.

“It wasn’t until I returned home afterwards that I discovered that one of the people killed was someone I knew very well and that knocked me for six.

“It kept playing on my mind and I started having nightmares and flashbacks. I said nothing to my family. I thought I was a strong person and had always coped but this flipped my life and left me confused. I didn’t realise it was PTSD.

“I went to my GP and asked for help. I was referred to the IAPT service for therapy but when they assessed me they realised I needed more specialist therapy.”

**\*Not his real name**

### **Kyle’s story\***

Three separate traumatic experiences shaped years of mental ill health that Kyle says saw him ‘desensitised and dehumanised’, unable to hold down a job or maintain relationships.

At school he suffered bullying at the hands of groups of pupils, only to return home to beatings from his father who physically abused him until he was 15.

At the age of 24 he was subjected to a shocking and violent attack at the hands of would-be burglars after locking up at his place of work and refusing to hand over the keys. The trauma was so severe he was left in a ‘fugue’ state with no memory of the incident, who he was or where he had been and unable to recognise his own family. His experiences, he says, left him feeling guilt-ridden and worthless and when, at the age of 32, he witnessed the attempt on a stranger’s life by men armed with a gun, he stepped in and stopped them. But after discovering later that both the victim and attacker had died in separate tit-for-tat attacks Kyle felt full of guilt that he was responsible for the loss of two lives.

He says: “For years I had no therapeutic input at all. My thinking became very black and white and I suppressed all the traumatic memories. I learned to cope and if I felt threatened I would stand and fight, even something like someone joking could trigger a reaction from me that seemed completely over the top. People see you smile, they

think you are OK, but they don't know what is happening inside your head.

"I was very untrusting of people, I couldn't hold down a job and it wrecked two marriages. I self-harmed, had multiple hospital admissions and attempted to take my life a number of times. I was diagnosed, incorrectly, with borderline personality disorder and it took 17 years before I was correctly diagnosed with PTSD.

"I am being treated now with eye movement desensitization and reprocessing (EMDR) therapy. I've experienced only one crisis over the last five years and I feel this treatment is the torch that's shining the light at the end of the tunnel for me."

**\*Not his real name**

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