

# **“Into The Light”**

## **Helping Service Members Recover from Post Traumatic Stress**

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# Goals for Seminar

- Understand more about PTSD
  - Normalize what and why it is happening
  - Brain Dynamics
- Understand Treatment
  - Reduce confusion and anxiety
  - Start treatment sooner
  - Stay in treatment
- Give real hope of recovery
  - Sign Up for Information & Support



# PTSD: A Natural Reaction to a Most Unnatural Event

“In World War II and before, only 15-20% of soldiers fired their weapons at enemy soldiers in view, even if their own lives were endangered.”

“Throughout history the majority of men on the battlefield would not attempt to kill the enemy, even to save their own lives.” (p. 4).

*On Killing: The psychological cost of learning to kill in war and society. Lt. Col. Dave Grossman. Back Bay Books: Little, Brown, [1995, hb] rev. ed. 2009. 377 pp., pb, ISBN 978-0-316-04093-8.*



# What Causes PTSD?

## DSM-V Criteria A for Posttraumatic Stress Disorder

- A. Stressor: Exposure to actual or threatened death, serious injury, or sexual violence in one (or more) of the following ways:
1. Directly experiencing the event
  2. Witnessing the event(s) in person
  3. Learning event(s) that occurred to a close family member or close friend. In cases of actual or threatened death of a family member or friend, the event(s) must have been violent or accidental.
  4. Experiencing repeated/extreme exposure to aversive details of the event(s) (e.g., first responders collecting human remains; police repeatedly exposed to details of child abuse).



# What are the Major PTSD Symptoms?

Intrusive Symptoms – Nightmares, Flashbacks

Hyperarousal – Hypervigilant Anxiety, Moments of Intense Panic

Intense Negative Beliefs about themselves and the world

Intense Negative Emotional Reactions

Avoidance Behavior – External & Internal (Dissociation)



# What is going on in the Brain when we react to Trauma?

A. Fight or Flight Response

B. Increased Sensory Registration and Storage

C. Heightened Emotional Response

D. Reduced Cortical Functioning

Sum: Result is Raw High Speed Registration of Data with Primitive Autonomic Responses to Situations and little ability to rationalize



# What is happening when we Recall a Trauma?

**The Goal: Your Brain is trying to do two basic things:**

- 1. Protect you from harm again - Flashbacks**
- 2. Work out the pain and distress - Nightmares**

**The Problems: PTSD overloads and overwhelms normal systems.**

- 1. To protect you it causes you to panic with cues which mostly aren't dangerous**
- 2. It recalls or recreates events you are trying to forget.**
- 3. Flashbacks make people overreact and nightmares wake us up.**
- 4. Exhaustion ensues**
- 5. Depression and Problematic coping strategies follow without help**





# Redeployment and the Attempts to find “The New Normal”

- **The Return Home is filled with Mixed Emotions**
  - **Relief and Excitement:** “I’m supposed to be happy now but...”
  - **Sorrow Guilt and Anger**
  - **Many Fears**
- **Fears for Himself**
  - **Why am I scared back here?**
  - **Why cant I stop remembering?**
  - **Why wont these dreams stop, will I ever sleep?**
- **Fears for His family, career, life**
  - **“Daddy’s Different”, “Mommy’s Different”**
    - **Do I even belong here anymore?**
    - **Why are they scared of me?**
    - **If they knew would they hate me?**
- **Old Problems are Still there and New Ones may have arisen**
  - **What if I cant cut it**
  - **What if I lose everything**



# Impact if PTSD goes Untreated

- Pressure Increases
- Nightmares Flashbacks Hypervigilance continue
  - Self Concept worsens
  - Anxiety Increases, Negative moods deepen
  - Sleep is avoided, becomes shallow, worsens
  - Physical health is degraded, fatigue increases.
- Depression or Mood Swings are present and worsen
  - Begins to impact coping ability in its own right
- Behavior problems ensue – reduced productivity, increased family conflict, drug and alcohol abuse



# So Where is the Hope?

- There is Hope because God Cares
  - All through Scripture God offers help
  - EMDR uses God's design to help
- There is Hope because Your Family Cares
  - Stress does not mean love has gone away
  - They want to help and will when they know what to do.
- There is Hope because Your Community Cares
  - More Resources now than any time in history
- There is Hope because We can treat PTSD now.
  - Speed to Treatment Improves results
  - We intervene broadly now with you and your family
  - EMDR treats the symptoms directly
  - Medications work quick until treatment is complete



# The Hope in Treatment



# Treatment for the Service Member with PTSD

## Eye Movement Desensitization and Reprocessing – EMDR



# Overview of Treatment Process

- **Phase 1 - In Depth Assessment**
- Phase 2 – Stabilization & Preparation for Treatment
- Phase 3 – Identify Targeted Memories to Treat
- **Phase 4 – Desensitization**
- **Phase 5 – Correcting Reality (Installation)**
- **Phase 6 – Body Scan**
- **Phase 7 – Closure**
- **Phase 8 - Reevaluation**



# Phase 1 Clinical Assessment –

- Symptoms
  - Create detailed diagnosis to prioritize and make a map
- Risk factors
  - Physical Health
  - Danger to Self or Others
  - Destructive Coping Patterns
- Initial Intervention for Acute Symptoms and Safety Issues
  - Just want you to survive therapy
- Referrals
  - Medicine for Sleep, Severe Panic, Major Moods, Prior Trauma, Psychosis
  - Drug and Alcohol to CRADC
  - PCP for Untreated pain or for Labs
  - Concurrent Therapy – Marriage, Parenting, Teens, Children



# Phase 2 Preparation for therapy and Stabilization of symptoms

Length – **One to Three Sessions**

Goal is “**State Change**” - Service member will learn skills to increase confidence in his ability to:

- Be able to create and maintain a Sense of Safety & Relaxation
- Tools to manage symptoms including Nightmares, Flashbacks, Panic and Hyperarousal
- Develop alternatives for negative coping behaviors





# Phase 3 Target Assessment

**Goal:** Defining the Map of Memories to Target

**Length:** One to Two Sessions

**List Events to Target for Memory work each having**  
**Image (or other sensory input)**  
**Negative Belief**  
**Emotional Content**  
**Body Tension**



# Phase 4 Desensitization

## “Erase the Chalkboard”

**Goal:** Reduce Distress of each Targeted Memory to Zero

Memory – Image, Belief, Emotion, Body Tension

“Let the Movie Play”



# Phase 4 Desensitization

## “Make the Video into a Book”

**Goal:** Reduce Distress of each Targeted Memory to Zero

Memory – Image, Belief, Emotion, Body Tension

“Let the Movie Play”



# Phases 5 to 8

**Phase 5 Installation:** Correct the self concept and the meaning of the memory or event

**Phase 6 Body Scan:** Body Tension Identifies remaining aspects of trauma to work on.

**Phase 7 Closure:** Packaging the Memory in a way to limit its impact through the week.

**Phase 8 Reevaluation:** Continuous review of the memories week to week to make sure they are cleared out.



# Conclusion: Trauma Recovery is Doable

- Service Members recover
- Families Recover
- You are not alone



# Alpha Omega Christian Counseling PC

AOCC is a Faith-Based Multi-Disciplinary Team providing:

- Psychiatric Services
- Psychological Assessment
- EMDR Certified Therapists and Consultants
- Licensed Professional Counselors
- Pastoral Counselors
- Licensed Clinical Social Workers

## AOCC Locations

- Satellite Office - Right Here at Faith Family
- Main Office - Tesson Ferry Road St Louis
- Other Locations – Maryville IL, Edwardsville IL, Farmington MO, New Melle MO

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# Alpha Omega Christian Counseling PC

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