

They came home









Warzone Related Stress Reactions (PTSD, Acute Stress, Depression, Homelessness, Substance Abuse, Suicide, Broken Homes)



PTSD and other reactions to Trauma

PTSD is just one of the effects of Warzone Related Stress. Some of the problems after experiencing trauma in a war zone that challenge military men and women:

- Acute Stress Disorder
- Chronic Pain and PTSD
- Criminal Behavior and PTSD
- Depression
- PTSD and Problems with Alcohol Abuse
- Self Harm
- Suicide and PTSD
- Traumatic Brain Injury

<u>It's very common for other conditions to occur along with PTSD.</u> Conditions such as depression, anxiety or substance abuse. More than half of males with PTSD also have problems with alcohol. The next most common co-occurring problems are depression, conduct disorder and drugs. Almost half of females with PTSD also experience depression, then social anxiety and problems with alcohol.

Persons with PTSD often have problems functioning in society, resulting in more unemployment, divorce or separation, spousal abuse, homelessness, substance abuse and suicide than people without PTSD.



What is PTSD?

Posttraumatic Stress Disorder is an anxiety disorder that can occur following the experience or witnessing of a traumatic event. PTSD affects men and women in all walks of life, including the military. Most survivors return to normal given a little time. However, some people will have stress reactions that don't go away on their own, or may even get worse over time. These individuals may develop PTSD.

People with PTSD experience three different kinds of symptoms.

The **first** set of symptoms involves reliving the trauma in some way when confronted with a traumatic reminder.

The **second** set of symptoms involves either staying away from places or people that remind them of the trauma, isolating from other people or feeling numb.

The **third** set of symptoms includes such things as feeling on guard, irritable or startling easily.

In addition to these symptoms, we now know that there are clear biological changes associated with PTSD. PTSD is complicated by the fact that persons with PTSD often may develop additional disorders such as depression, suicide, substance abuse, problems of memory and cognition and other problems of physical and mental health. These problems may lead to impairment of the person's ability to function in social or family life, including occupational instability, marital and family problems.

PTSD can be treated. Early treatment is important and may help reduce long-term symptoms. Unfortunately, many people do not know that they have PTSD or do not seek treatment.



There is Help for Trauma & PTSD Sufferers

- To learn to deal with the stress and the memories.
- To overcome the fear
- To cope with the anger and frustration
- To build trusting relationships with their family and friends
- To function in a stable environment
- To understand what's happened and what they can do about it
- To realize that they aren't alone
- To return to a full and satisfying life



Treatment of PTSD

Today, there are effective treatments available for PTSD.

Cognitive-behavioral Therapy (CBT) is one type of counseling. According to the National Center for PTSD, it appears to be the most effective type of counseling for PTSD. There are different types of cognitive-behavioral therapy that have proven effective, providing tools to deal with differing degrees of trauma and unique needs of the individuals suffering from PTSD symptoms.

- Cognitive Behavioral Therapy
- Exposure Therapy
- Group Therapy
- Family Therapy



Cognitive Behavioral Therapy

Cognitive Therapy

In **cognitive therapy** the therapist helps the person to understand and change how they think about the trauma and it's aftermath. The goal is to understand how certain thoughts about the trauma cause stress and make the symptoms worse.

Persons with PTSD learn to identify thoughts about the world and themselves that are making them afraid or upset. With help they learn to replace these thoughts with more accurate and less distressing thoughts. They learn to cope with feelings such as anger, guilt and fear.

After a traumatic event, some blame themselves for things they couldn't have changed. Cognitive therapy helps them understand that the traumatic event they lived through is not their fault.

Exposure Therapy

In **exposure therapy** the goal is to have less fear about painful memories. It's based on the idea that people learn to fear thoughts, feelings and situations that remind them of a past traumatic event. By talking about the trauma repeatedly they can learn to gain control of their thoughts and feelings about that trauma. They learn not to be afraid of their memories and how to change how they react to stressful thoughts.

This technique is often referred to as "desensitization".



Group Therapy

Many people who have PTSD want to talk about their trauma with others who have had similar experiences.

In **group therapy** they talk with a group of people who also have been through a trauma and who have PTSD. Sharing their story with others can help them feel more comfortable and can help them cope with symptoms, memories and other parts of their lives.

Group therapy also helps build relationships with others who can understand what the person with PTSD has been through. They learn to deal with emotions such as shame, guilt, anger, rage and fear. Sharing with a group helps build self confidence and trust, and helps to learn to focus on the present rather than feeling overwhelmed by the past.

Family Therapy

Family therapy is a type of counseling that involves the entire family, because PTSD can, and often does, impact other members of the family. They may not understand the anger or the stress. They may feel scared, guilty or even angry about the condition. Family therapy helps the family communicate, maintain good relationships and cope with the tough emotions. The family can learn more about PTSD and how it is treated.



Assessment for PTSD

A certain pattern of symptoms is involved in PTSD, so determining if someone has PTSD can involve several steps. There are different types of measuring tools and protocols used in PTSD evaluations.

Structured Interviews

A structured interview is a standard set of questions that an interviewer asks and records answers to. Responses are evaluated on a pre-determined scale to assess the probability for PTSD.

Self-Report Questionnaire

A self-report questionnaire is a set of questions, usually printed out, that the person being evaluated answers on their own. They can then score their responses to measure their amount of distress based on a pre-determined scale and act accordingly to seek professional help.

P-300 Instrument

Currently there is a device in beta testing, developed by Dr. Jay Holder of the American College of Addictionology and Compulsive Disorders, that can actually measure brain wave activity and confirm with a high degree of accuracy the occurrence of Trauma including PTSD, Closed Head Injury and Brain Injury.

Screens for PTSD	# of items	Time to Admin. (in min.)	Allows Multiple Trauma	Corresponds to DSM-IV Criteria
BAI-PC	7	3	Yes	N/A
Primary Care PTSD Screen (PC-PTSD)	4	2	Yes	N/A
Short Form of the PTSD Checklist	6	2	Yes	N/A
Short Screening Scale for PTSD	7	3	Yes	N/A
SPAN	4	2	Yes	N/A
SPRINT	8	3	Yes	N/A
Trauma Screening Questionnaire (TSQ)	10	4	Yes	N/A



KFWI Re-entry Program for Veterans / Trauma Victims



The Empowerment Program

...for veterans encompasses three logical phases of treatment and guidance, **Institution**, **Transition and Sustaining.** The total program addresses what extensive research has established to be the three dimensions of stress, **Physical**, **Bio-Chemical and Psychological**. (Mind, Body and Spirit). It provides a solid foundation, a carefully constructed precursor for future therapy and ultimate re-integration into a normal and healthy social and family environment.

Empowerment Program

PHASEI: INSTITUTION PHASE II: TRANSITION PHASEIII: SUSTAIN 1. Selection of eligible participants 1. Identification of Stress Elements Continued support of community and community-based 2 Needs assessments; Develop 2 Revision and modification of organizations (including faithplan for all three phases of the Plan by transition team and based groups) Veteran reintegration process 2 Continued involvement of relevant 3. Transition team outlines their support services to address 3. Implementation of Phase I of duties of the Plan specific needs (i.e., PTSD, substance Plan Categories 4. Veteran and transition team (a) Basic needs-medical, food, shelter develop a schedule for daily reconnection 3. Encouraged contact with their dothing and subsistence (b) Education, employment, Support personal social support network; Mental Health, Substance Abuse 5. Program Directors for mailze plan with Ongoing community support Treatment, Legal Issues, Veteran . team and Monitoring Compliance service providers 6. Ongoing assessment: Team reviews and modifies Phase II of Plan as needed 7. Program Director regularly reviews Veterans progress and compliance and responds accordingly 8. Adjustment and review of Phase III of Plan



The Methods and Topics

...covered in the program provide the basic, and essential real world skills that each veteran must re-affirm and master in order to regain and retain his/her equilibrium and enjoy a full and satisfying life. These are **fundamental life skills** that will reinforce their Mind, Body and Spirit, and become the attitudes and habits that ensure they will be able to cope, overcome and sustain their transition to a life without unwarranted fear and/or unhealthy dependency.

Physical Dimension	Bio-Chemical Dimension	Psychological Dimension	
Sleep Habits	Portion Size	Organization	
Strength	Water Intake	Finances	
Health Conditions	Meals/Planning/Timing	Self Control	
	Processed vs Whole Foods	Healthy Relationships	
	Smoking	Relaxation Techniques	
	Alcohol	Living with Purpose	
	Fruits & Vegetables	Creating a Health Family	
	Fast Food vs Balanced Food	Elminating Anxiety	
	Food Addicitons	Self Esteem	
Substance Education	Core Concepts	Social Skills	
Stimulants	Listening & Sharing	Abuse or Addicition	
Depressants	Things About Me	Coping skills	
Opioids	Personal Inventory	Living with Others	
Cannabinoids	Faulty Beliefs	My Values	
Hallucinogens	Responsible Thinking	20.5 CHR-0.7CM1	
Inhalants	Signs & Symptoms		
	Conducting Treatment		
Mind	Body	Spirit	
Individual & Group Lifestyle Health & Wellness Education Series	Nutrition and Nutriceuticals	Tai-Chi	
Cognitive-Emotional-Behavioral Therapy	Auriculotherapy	Qi Gong	
	Torque Release Technique (Chiropractic)	Seeking Safety Philosophy	
	Massage Therapy	A state at well being it attained when there is a farmenic balance between	



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