

Learning to “Live With Fear”

Life is nothing more than a journey.

Too often we focus on the destination and not the experience (the journey) of getting there. There are times in which during the journey a traumatic incident may have occurred. The incident may have left the individual feeling powerless, shaken and frighten to where he/she is reduced to “living in fear.”

Although we may not be able to prevent the traumatic experience from occurring, we can heal the wound that results from the trauma. In doing so we can learn to live “with fear” instead of “living in fear.”

- Dr. Micheal Kane



I have held on to intense feelings of pain, guilt, secrets and flashbacks of trauma for 50 years. Working with Dr. Kane I have learned skills in how to respond to the traumatic incidents which have impacted my life. Dr. Kane is committed, supportive and was a calming voice in my therapeutic work.

~ Beth 58, retired postal employee

It was important to develop new behaviors that were conducive to achieving both personal and professional goals in the future. Dr. Kane certainly did not disappoint. From the very beginning, his open and honest demeanor set the stage for the level of self-examination that was to occur. He has both the professional training and demeanor that allows the counseling experience to become both educational and insightful. Dr. Kane's knowledge is extensive and his practice methodology comprehensive. I would not hesitate to recommend him to a friend, family member or professional colleague.

*~ Jeffrey 35, Consultant,
organizational development*



Self-Relational Psychotherapy

Micheal Kane Psy.D, MSW, LICSW
Board Certified Diplomate (ABE)

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Post-Development Handbook: A Guide to Understanding and Coping with Readjustment Issues
(Department of Veterans Affairs, The National Center for PTSD) 2004.

*I can be changed by what happened to me.
I refused to be reduced by it.*
- Maya Angelou

RETHINKING TRAUMA:

Learning to Live with Fear



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LIVING WITH FEAR: The Importance of Active Coping

When individuals take direct action to cope with their stress reactions and trauma related problems, they place themselves in a position of empowerment and as a result start to feel less helpless:

- Active coping means recognizing and accepting the impact of trauma on your life and taking direct coping action to improve things.

LIVING WITH FEAR: Understanding the Recovery Process

Knowing how recovery can happen provide the individual with more options in managing or balancing the recovery process.

- * Recovery is an ongoing daily gradual process. It does not happen through being “suddenly cured.”
- * Some amount of continuing reaction is normal and reflects a normal body and mind. Healing doesn't mean forgetting the traumatic experience or having no emotional pain when recalling the experience.

LIVING WITH FEAR: Coping with Traumatic Stress Reactions. Ways that DO HELP

Unwanted distressing memories, images or thoughts

- Remind yourself that it's natural to have some sorts of memories of the event(s).
- Talk to someone you trust about the event.
- Remember that although reminders of trauma can feel overwhelming, they often lessen over time.

When experiencing sudden feelings of anxiety or panic, these are common parts of traumatic stress reactions. It may include sensations of a pounding heart or feeling light headed or rapid breathing. Remember the following:

- You may have frightening thoughts (“I am going to die; I am going to have a heart attack; I am going to lose control”). These thoughts are inaccurate. They are upsetting. The goal is to normalize your reactions.
- Practicing normalizing will reduce the stress reactions. Each time you process (feel and think) in positive ways about the arousal/anxious reactions, you will be helping them to occur less frequently.

Feeling like the trauma is happening again (“flashbacks”)

- Talk to yourself. Remind yourself where you are, what year you're in and that you are safe.
- Remember the trauma happened in the past. Remind yourself that you are in the present.
- Call someone you trust and tell them what is happening. If no one is available call your local 24-hour crisis line; they have staff that is available to talk to you. Remind yourself that this is a common stress reaction.
- Tell your counselor, therapist or doctor what happened to you.

Trauma-related dream or nightmare

- If you awaken from a nightmare in a “panic,” remind yourself that you are reacting to a dream or nightmare.

- Remind yourself that you are in a state of arousal/anxiety; that you are not in real danger.
- Engage in a pleasant, calming activity (e.g, listening to soothing music).
- Talk to someone if possible. If no one is available call your local 24-hour crisis line.
- Talk to your healthcare provider about the nightmares; certain medications can be helpful.

Difficulty falling or staying asleep

- Keep to a regular bedtime schedule.
- Avoid alcohol, tobacco and caffeine. These harm or interfere with the body's ability to enter into sleep.
- Do not lie in bed thinking or worrying. Get up and enjoy something soothing or pleasant (reading a calming book, drinking a glass of warm milk, engaging in a quiet hobby).

Irritability, anger and rage

- Take a “time out” to cool off or to think things over.
- Walk away from the situation.
- Remember that anger doesn't resolve the issue. It actually increases your stress and can cause health problems.
- Talk to your counselor, therapist or healthcare provider about your anger.
- If you blow up at family or friends, find time as soon as you are able to talk to them about it. Let them know how you feel, and what you are doing to cope with your reactions.

Difficulty concentrating

- Slow down. Give yourself time to “focus” on what you need to learn or do.
- Write things down. Making a “to do” list may be helpful.
- Break tasks down into small do-able parts.
- Plan a realistic number of events or tasks for each day.

Having difficulty feeling or expressing positive emotions

- Remember this is a common reaction to trauma. These feelings are normal and cannot be controlled.
- Make sure to regularly participate in activities that you enjoy or used to enjoy. Sometimes these activities can rekindle feelings of pleasure.
- Take steps to communicate to loved ones in little ways, write a card, send e-mail, or initiate a phone call and say hello.

LIVING WITH FEAR: Final Word

Experiment with these ways of coping to find which ones are helpful for you. Practice them, because like other skills they work better with practice.

Talk to your counselor, therapist or healthcare provider. Reach out to your family, friends and others in the community. Remember, you are not alone.

Micheal Kane Psy.D, MSW LICSW CTS

Dr. Kane earned his doctorate in clinical psychology from Argosy University/ Seattle Washington School of Professional Psychology in 2005. In addition, he received Masters degrees in social work from the University of Washington in 1983, clinical psychology from Argosy University/Seattle in 2002 and postgraduate studies in Traumatology from the Justice Institute of British Columbia, (Vancouver, BC) Canada. Dr. Kane is a certified trauma specialist through the Association of Traumatic Stress Specialists (ATSS) and holds two clinical Dipolmates, the Dipolmate in Clinical Social Work from the National Association of Social Workers (NASW) and Board Certified Dipolmate from the American Board of Examiners in Clinical Social Work (ABE).

Dr. Kane has served on the clinical faculties of the University of Washington, School of Medicine's Department of Psychiatry & Behavioral Sciences and the University of Washington's School of Social Work. In addition, Dr. Kane has served as the Associate Director of Training & Development, Trauma Resources Coordinator and Mental Health Therapist of Hall Health Primary Care Center of the University of Washington and as an instructor and member of the advisory board of the UW School of Social Work's Certificate Program “Psychological Trauma Effective Treatment and Practice”. Dr. Kane has served as a consultant on complex trauma and posttraumatic stress disorder to the Congressional Black Caucus Veterans Brainstrust (US House of Representatives).

Dr. Kane has maintained a private practice since 1985 working with individuals, couples and families. His theoretical framework is self-relational psychotherapy (i.e. psychological self) which is integrative and reflecting themes based on psychodynamic, reality, and cognitive-behavioral approaches. Dr. Kane's specialties include domestic violence, anger management, depression, anxiety, trauma, grief and loss, and ethnic minority mental health issues. He has experience in gay/bisexual concerns as well as biracial relationship issues. Dr. Kane's research interests are focused on the integration of trauma and domestic violence and its implications within the psychological self.

Publications:

~ Our Blood Flows Red: Trauma & African-American Men in Military Service, Clinical Implications For Working with African-American Veterans with Complex Trauma. Saarbrucken, Germany: LAP Lambert Academic Publishing. Kane, M. (2010).

~ A Review Study of the Clinical Implications for Working with African-American Veterans. (Doctoral dissertation, Argosy University-Seattle, 2005). Dissertation Abstracts International, 25, 144, Kane, M. (2005)



For additional information regarding Dr. Kane's background, please visit www.lovingtheself.com

*Heart,
Instinct,
Principles*

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