### Praise for Reversing the Trauma of War

*Reversing the Trauma of War* is exceptional. It is not only a mustread but a must-use both by those suffering with PTSD and by practitioners who work with those who suffer from the ravages of war. I have found it useful both personally and in my practice of treating those who have experienced many forms of trauma. Because of the complex presentation of PTSD, this handbook should be considered a "tool box." It provides personal vignettes and multiple guides to manage the multitude of symptoms associated with PTSD. It has been an honor to review this work for I see it as great resource for all who suffer from and all who treat PTSD. Brian J. Masterson, MD, MPH, FACP, FACLP

Col, USAF (Ret.), MC, CFS,

FMR Commander, AF Theater Hospital, Balad, Iraq, 2006–2007, Psychiatry & Internal Medicine

What a gem of a book! *Reversing the Trauma of War* is a gift of hope for veterans and their families whose lives are compromised by trauma and PTSD. While the clear, step-by-step mental imagery exercises are very user-friendly, don't let the simplicity fool you: the practices are grounded in the most recent cutting-edge research to effectively rewire the brain and regulate the nervous system. In my work as a psychotherapist, this book is a valued resource in my practice toolbox, and for my clients.

> Leslie Davenport, MA, MS, LMFT Faculty, California Institute of Integral Studies; editor, *Transformative Imagery*

Brilliant! The book is amazingly well written, communicates effectively at the appropriate level, is well organized, and includes terrific case studies, great dialogue, and an array of practical exercises that boggle the mind in their variety, cleverness, and detail. I recommend it to everyone — laypersons, undergraduates, mental health professionals, and your next-door neighbor.

> Alan S. Kaufman, PhD Clinical Professor of Psychology, Yale University, School of Medicine, Child Study Center

What Kahaney and Epstein have achieved is unique. Weaving together an understanding of combat PTSD, personal stories, and an easily accessible guide to self-care and resolution, they offer healing through the simple and powerful tool of mental imagery. A remarkably practical book, the authors break down common themes of combat PTSD, offer simple explanations and provide mental imagery "recipes" that one can easily understand and use immediately.

> Randy Kasper, LCSW, PhD Director, School of Imagery & Health; Professor of Social Work, California State University

This book presents a novel and powerful way to access painful PTSD memories and images and to transform them. The authors provide you with simple and accessible tools to reverse and correct those images. The visualization exercises allow for the transformation to occur in natural and effortless ways. As a long-term practitioner of this method I can attest to its efficacy and quasi-miraculous healing effects. The authors' voice is gentle and

comforting and can be trusted to guide you through the different phases of your recovery.

Catherine Shainberg, PhD Author, DreamBirth: Transforming the Journey of Childbirth through Imagery

*Reversing the Trauma of War* brings the powerful tool of mental imagery to the forefront in treating PTSD. This exceptionally important book is easy to read and contains a wealth of imagery exercises.

Nicholas E. Brink, PhD Past President, American Association for the Study of Mental Imagery; author, *Grendel and His Mother* 

As part of the healing legacy of Dr. Gerald Epstein, this impressive book is a vital resource for individuals and families coping with post-traumatic stress as well as for clinicians who want to utilize the power of imagination in the therapeutic process.

> Ulas Kaplan, EdD Associate Professor, Lesley University

An extraordinarily useful and practical guide that veterans can easily use to heal from the symptoms of PTSD. Soldiers, sailors and marines can now safely move through latent trauma and come out the other side less reactive, more able to enjoy their life in the present moment.

> Anees A. Sheikh, PhD Past editor, *Journal of Mental Imagery*; Past President, American Association for the Study of Mental Imagery

## Reversing the Trauma of War

PTSD Help for Veterans, Active-Duty Personnel and Their Families

# Reversing the Trauma of War

PTSD Help for Veterans, Active-Duty Personnel and Their Families

> Phyllis Kahaney, MSW, PhD Rachel Epstein, LAc, JD



ACMI PRESS New York

#### Reversing the Trauma of War

PTSD Help for Veterans, Active-Duty Personnel and Their Families

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We are more than our past. We each contain the possibility of overcoming the effects of anything and everything — including war trauma. What follows is a proven method to reverse, in a step-by-step fashion, the difficult challenges of PTSD.

We dedicate this book to the remarkable men and women who have served in the United States military and who have sacrificed themselves for the benefit of us all.



# Contents

Foreword	zments xiii xv Ilis' Storyxix
Preface: Rac	hel's Storyxxiv
Chapter 1:	What Is Mental Imagery1
Chapter 2:	Healing As Freedom
Chapter 3:	How to Practice Mental Imagery17
Chapter 4:	Hypervigilance
Chapter 5:	Anxiety and Fear
Chapter 6:	Anger
Chapter 7:	Triggers
Chapter 8:	Isolation65
Chapter 9:	Depression
Chapter 10:	Guilt
Chapter 11:	Insomnia and Nightmares91
Chapter 12:	Loss and Grief105
Chapter 13:	Physical Pain112
Chapter 14:	Concussions and Mild Traumatic Brain Injury127

Chapter 15:	Overcoming Addiction
Chapter 16:	Military Sexual Trauma142
Chapter 17:	Life Plan and Stopping Exercises:
	Using Your Will154
Chapter 18:	For the Families of Vets159
Chapter 19:	Creating Your Own Exercises
Chapter 20:	Choosing to Live Life Well171
Chapter 21:	Notes for Healthcare Professionals: Mental Imagery
	as a Therapeutic Modality176
Chapter 22:	For Clinicians: Techniques to Reverse Nightmares,
	Flashbacks, and Intrusive Memories180

Endnotes	192
Sources of Imagery	195
References	196
Main Index	201
Index of PTSD Patient Stories	209
Index of Mental Imagery Exercises	210
About the Authors	217

## CHAPTER 2 Healing As Freedom

n a cold Thursday in November, when the waiting room at the Vet Center was almost empty, a staff member asked me to do an intake for a combat veteran from the Korean conflict who had appeared just moments before and looked so uneasy they were afraid he might not stay.

There in the corner was an exceptionally well-dressed gentleman of around 75. Most of our veterans came to the center dressed casually in jeans and a T-shirt and went by their first name, but this veteran had on a dress shirt, tie, and sport coat. When I called his name, he rose, straightened his lapels, and reached out to shake my hand, introducing himself as Mr. James.

Back in my office, Mr. James explained that yesterday "something terrible" had happened. While walking with his friend from the car to a restaurant, an airplane that was landing at a regional airport flew just over his head. Without thinking, he hit the ground, believing he was under attack. After picking himself up and glancing over at his puzzled friend, he was so embarrassed that he made an excuse to leave and didn't go through with the lunch.

Hitting the ground at the sudden sound of an airplane overhead

wasn't all that was wrong, he said. He told me that he was unable to sleep for more than two hours at a time, was always looking over his shoulder at the slightest of sounds, was easily angered, and had started having nightmares. All these symptoms were particularly bad at this time of year, he said, and because of this, he had grown to hate the holidays. His dislike of Thanksgiving and Christmas had always been a trial for his wife and three children, but in recent years it had become worse.

"What's the matter with me?" he asked. "I feel like I'm losing my mind."

This is a common story with combat veterans — they experience physical and emotional symptoms that often get worse at a particular time of year, such as around the anniversary of a battle or the death of a comrade, or the date when they were wounded. Such behavior often comes as a surprise to veterans and their families, and it makes it hard to lead an ordinary life.

Over a period of weeks, we began to explore what was happening in this veteran's life. It became clear that Mr. James' symptoms were at their worst during the winter holiday season. He experienced a great deal of shame about these symptoms and chose to hide everything from his beloved wife, whom he wanted to protect. Though he had been a fairly successful businessman, these symptoms had prevented him from achieving his full potential; and at this point the psychological toll of it all was becoming overwhelming.

What happens to a person when they are in combat is complex and unpredictable. There are so many factors to consider. Where on the ship was the person located when it was bombed? Was the veteran in charge of other sailors, Marines, or soldiers? Was the person physically wounded? Had there been other traumas in the person's life before the incident — the sudden death of a parent, for example, or a serious automobile accident? Was the traumatic event a one-time occurrence, or was that person exposed to many such incidents? Answering these questions helps to situate the way someone experiences what happened, how they think about it in the present, and how they can begin to recover.

In Mr. James' case, he had been coping for many years, but this year the symptoms were much worse. Young warriors were still serving in the war in the Middle East and because of that and his recent radiation treatments for cancer, Mr. James had begun to feel the same stress and distress as he had felt right after the war he had fought in so many years ago. His psyche was back on board ship, and he was, every day and every night, 60-plus years later, fighting for his emotional life.

#### Coming to an Understanding

The relationship between our inner beliefs and our experience of outer events was something I myself knew well, something that Mr. James was beginning to discover for himself. As he consistently practiced the mental imagery exercises every day, he began to experience his beliefs reshaping themselves. And something else became clear to him as well: a growing understanding of the holographic or global nature of the way the mind heals itself. He saw that if he worked with mental imagery on one thing — for example, patterns of anxiety — then other problems began to resolve as well, and he was getting less angry and spending less time isolating himself from others. It's as if in opening a small window, the whole house begins to be filled with light and soon the other windows and doors open on their own.

Perhaps most surprising to Mr. James was that all of this appeared to take place outside of time — that is, correcting the problem through mental imagery was enough to create its reversal so that months and years of doing this kind of therapy were not necessarily required. Some people need more time to process than others, but the process can go quickly, so that sometimes a person needs to come for only a few sessions in order for change to take place. For Mr. James, only four months were necessary. And when he was feeling better and didn't need to come anymore for treatment, he stated that he wrote down these four things on a pad on his desk so he'd remember them:

- 1. In imagination, anything can happen. This work is about sensitivity, not rules and logic.
- 2. The past doesn't dictate the future.
- 3. Healing takes place in action. Use your mind in an active way.
- 4. The mental and the physical act together as a whole.

What he came to see most profoundly is that this process of healing from combat stress is about freedom — freedom to be as we are and at the same time to be open to change. Magically, when doing this imagery work, we begin to see new possibilities for ourselves. I liken the reality of our life to an inner garden: When we engage in a regular practice of imagery, we are tending to our inner garden of thoughts, beliefs, and perceptions, planting new seeds of hope and action, and removing the unwanted weeds of our habitual post-traumatic-stress responses to everyday life situations. Mental imagery always starts from where we are; we don't deny the "is-ness" of the pain or suffering. However, once it's acknowledged and accepted, we can plant new possibilities for ourselves through the use of mental imagery. Like any gardener, we regularly water our plants, pull up the weeds, and then leave the plants to grow. We keep ourselves focused in the moment, on the action of gardening, not on the end result of the harvest. Likewise, when we practice imagery, we have an intention, aim, or desire to heal from PTSD. But we keep our attention focused in the moment doing the imagery, not on the outcome. As soon as we start focusing on the outcome, we are in the future and will start to feel anxious.

You may find, as Mr. James did, that as you practice mental imagery, you begin to develop the capacity to respond to daily life stressors in a more balanced manner. It's as if you develop the capacity to look at everything as "fact," as it is, without adding judgments or stories about how you or another *should* act or how things *should* be. I worked with a vet who was very angry; he would drink, become angrier, and blame his girlfriend, his father, his college professors, and the war for his anger. As we worked together, we looked at the anger itself rather than the *reason why* he was angry. Once he accepted the anger as a "fact," without attaching the anger to "a story" or a reason for his anger, he was able to overcome the anger. Instead of acting out, drinking, and yelling, he was able to use words and truly communicate with others. He came to understand that the less he blamed others or events, the more empowered he was to reason, to intuit, and to act for his own benefit.

We have been educated to attain and to attach to things. We attain knowledge, wealth, status, stability, material possessions, etc. We attach to our identities (who we think we are), our emotional responses, our points of view, our jobs, our homes, our bank accounts, etc. We mistake ourselves for our opinions, our feelings, and the material objects we own. *Most particularly, we attach to our past, to our life story.* When we attach to our past, we are filled with regret about what should have been. Dwelling in the past leads us to feel depressed. In the same way, attaching or thinking about the future — how it should or ought to be — leaves us feeling anxious. Often we create a story in our heads that the future will continue along the same path as the past, with no change. This storyline leads to inaction, and we feel stuck. In the practice of mental imagery, however, we stay in the moment, freed from regrets of the past and fears of what might be in the future.

When we begin to see life's events, even the most difficult ones, as "fact," without adding judgments (such as "everything is bad and will only get worse"), we facilitate our healing. We don't deny the historical fact, but we don't heap more storyline on top of it. When we shift out of emergency mode, we see what is (the "fact"), gain clarity, and can "let go" of the blame, the past regrets, and the idea that nothing can change. I call this "direct seeing." In fact, when I start working with clients, I explain to them that *the past does not exist.* I am not referring to the concrete events of our personal life history. Nor am I referring to navigating the practical world where we ground ourselves in calendar time of past, present, and future. Rather, I am referring to our inner subjective life where we access memories of the past. In truth, *the past does not exist in this moment of now, only our created memories recall the past.* Our memories are malleable, open to new interpretations and understanding, and can be remembered in a new way. Mental imagery excels at reshaping our ideas of how things were and how things will be.

The beauty of mental imagery is its adaptability to just about any difficulty we face. Here are several examples of how veterans creatively applied it constructively in their lives.

Austin was a veteran of the war in Iraq who had been unable to attend church since he returned to San Diego after completing his third tour of duty. Going to church with his family was important to him, but he found that being around so many people in the large church was too much for him. I gave him this imagery exercise to practice: Austin imagines himself arriving early to church to avoid being jostled by the crowd. He finds a seat at the end of a pew in the back of the church and takes note of the exits so he can leave easily if he wants or needs to. Then he imagines himself in church breathing deeply and fully and feeling calm and centered as the church service progresses. He sees himself filling with light as the choir sings, and then he sees himself calm and reflective while the sermon is being delivered. He sees himself feeling happy and confident as he imagines walking up the aisle to receive communion. He imagines doing this with the knowledge that at any time he can leave church if his anxiety becomes overwhelming.

Austin did this imagery exercise three times a day for the week before he attended church the following Sunday. He drove to the church and sat in his car and did some breathing exercises as the church began to fill. He had asked his brother to go on ahead to reserve the seat Austin wanted at the end of the back pew. Austin came into the church just after the service had begun. He slipped into the spot next to his brother and enjoyed the service until almost the end. At that point, he signaled his brother that he was leaving, because he didn't want to walk out in a crowd.

Over the next several weeks, Austin continued to do the imagery exercise three times a day until, after six weeks, he was able to be in church without feeling panicked. Eventually, he was able to use these skills in other social settings — parties, concerts, college classrooms — no longer feeling the need to avoid the things he had previously enjoyed before the war.

 $\diamond$ 

Amanda was a 34-year-old former gunnery sergeant who was going to school full-time, working part-time, and taking care of her 3-year-old daughter. She came into my office looking exhausted and said that she was unable to sleep.

She drank eight cups of coffee each day "to keep going," but all that caffeine made it impossible for her to sleep at night when she badly needed to rest. On top of that, she didn't schedule one minute of her day to relax — she was always doing household chores, working, or studying.

Together we came up with a plan for her to slowly reduce her intake of coffee until she had one caffeinated cup in the morning and then only decaf after that. She began to sleep. Then we worked on short breathing exercises in moments of stress as well as imagery exercises that she used on a daily basis to make long-term changes. Within a month she reported "feeling better than I have in a long time." After six weeks of working together, she said she no longer needed to come in for treatment. She was feeling "wonderful" and her life was "back on track." She said she was particularly struck by the fact that she knew how to use all these skills and that they had become a natural part of her life. She didn't need to "schedule them" and get anxious about them, because after a couple of weeks of practice, they had become second nature. With these tools, she was able to finish her last year of college and graduate, feel productive at work, and, most important of all, spend quality time with her partner and her child.

Joe, a veteran who had recently returned from serving in Afghanistan, was having trouble at work. He managed a busy store, with many people coming and going throughout the day. Being around so many people overwhelmed him. We began our work focusing on simple breathing exercises to help calm him. After two office visits, he reported he was able to take a minute or two several times throughout the day and go into a supply closet, do a breathing exercise, and then come out to the sales floor again, feeling refreshed and anxiety-free. He was able to use such moments of focused breathing at home and in social situations until, after several weeks, he felt he had control of his symptoms and was gaining control over his life in general.

Sometimes it can be enough to do breathing exercises or change simple behavior patterns, but to make permanent shifts in ourselves, I prescribe imagery exercises that include a few rounds of relaxed breathing before imaging. The whole process takes just seconds to a minute to do. Sitting with closed eyes in an upright posture and taking several rounds of relaxing breaths helps to turn our senses inward so we can make new discoveries. It is best to be in a quiet place without distracting noise or music so that our attention can stay inward. In a sense, we are giving ourselves positive triggers for change. Generally, we practice imagery three times a day for 21 days. This rhythmic repetition imprints a new way of being in ourselves, similar to the way we can fix a coding bug in a computer program.

To sum up, the benefits of imagery are many. Imagery makes us active participants in our own healing, in which we can change our attitude toward our life. This change in attitude, in turn, allows us to see more clearly and gain more control. In working with a particular issue through imagery, a holographic effect is created: By working with a part, we are healing the whole. We are empowered to become stronger, healthier, more directed, self-confident, and able to form healthy relationships. All this happens when practicing mental imagery — something that is available at any time and is quick and cost-effective, with no adverse side effects.

In working with mental imagery, our aim is to create inner freedom. So many of the symptoms of PTSD make us feel unfree

— isolation, inability to control anger impulses, suffering when in crowds, fighting nightmares while asleep...the list goes on and on. In order to create inner freedom, we practice imagery exercises that at first allow us to become more directed, more self-confident, and increasingly feel more in charge of our health.

Ultimately, this book is a manual that invites you to reconsider the way you live in the world, to create new ground rules for living your life, for being here *now*. And most of all, it provides you active combatants, veterans, and anyone who has suffered from war trauma — with a road map to let go of the past.

There are six cardinal rules in this healing method:

- 1. Having PTSD is not a sign of weakness.
- 2. There are NO judgments or worries about how you or others ought to behave, act, or be in the world.
- 3. Live in the present moment the past and future do NOT exist. The past is gone, and the future has yet to be.
- 4. There is always hope and the possibility of change.
- 5. There is always a safe haven to be found.
- 6. Be your own authority and listen to your own inner wisdom.

In the next chapters, through your own experimentation, you will learn new ways to live your life in a way that allows you to become resilient — stronger, healthier, more directed, self-confident, and whole.

# CHAPTER 4 Hypervigilance

by ustin, a 23-year-old corporal from Tulsa, comes into my office warily. I watch as he stands in front of each window in the office — there are six of them — and looks out each one as though he is scouting for enemy combatants. When I tell him he can sit anywhere he wants, he chooses the chair that is right next to the door. Throughout the intake session, he never stops scanning the office — his eyes are always in motion, and he sits on the very edge of his seat.

"How long have you been back in California?" I ask him.

"Just over four weeks, ma'am," he says, his eyes still scouting the room.

"What was your job in Iraq?"

"Team leader, ma'am. Me and my team of three men went from house to house in each village looking for insurgents."

Dustin has come to the Vet Center, he says, because his wife told him he needed to get help or the marriage was over. He said he wasn't sleeping even two hours a night; he was up all night guarding the front door of their apartment. He didn't trust anyone; he thought his wife was foolish for not being more suspicious of everyone she met. He would drift off to sleep for an hour or two around dawn, and then he would usually wake up with a start, feeling he was under attack from the enemy; and when he reflexively went to reach for his weapon and it wasn't there, he would panic.

He said he couldn't bear to be out among people. He had tried for a couple of weeks to attend college classes, but he was unable to be in the classroom with so many strangers. Now he was taking all his courses by distance learning, even though he found he couldn't focus. He only left home when he had to. Worst of all was driving, because it brought out all his wartime anxieties; drivers speeding past him might try to shoot him, bits of debris lying on the side of the road might be hiding IEDs (improvised explosive devices), people driving or walking across overpasses might try to fire on him, the trees lining the side of the street might be hiding snipers. So he drove very fast, never letting anyone get too close behind him. This constant vigilance, along with the continued lack of sleep and constant watchfulness, left him perpetually exhausted.

This young soldier, fresh from combat, showed the classic symptoms of war trauma that can later turn into PTSD. At the moment, he was struggling with hypervigilance, the constant and exhausting scanning of one's environment for potential threats. He also described feeling guilty that he wasn't still with his buddies in combat. He was unable to sleep, and when he did, he had horrible nightmares about the war. He confided that he was unable to relax, had a hair-trigger temper, and required absolute order at home.

"Well," I said to Dustin, "what do you need?"

"Ma'am," he replied, "all I really want is to be the way I was before the war."

\*

Dustin's hypervigilance is one of the most common responses to having been in combat. In order to survive the many kinds of situations combatants find themselves in, they learn to be aware of their surroundings and ready to take action at any moment. This means it is imperative for combatants to have their weapons at all times and never be off guard. While this kind of action is necessary to survive combat, it is not helpful for daily life as a civilian. For Dustin and his team, who searched buildings in an enemy zone, this intense alertness had been necessary for their safety. But as a civilian in California, it was no longer helpful or useful for Dustin to believe the enemy was everywhere and to behave as if they were.

Similarly, it is unlikely there will be snipers at the supermarket, or roadside bombs on the way to work, or assassins trying to storm the front door of our homes. But after months or even years of living with extra vigilance, it is difficult to lose the habit of watchfulness.

How can we change this entrenched behavior that has become an ingrained habit? By replacing a negative habit with a positive one. We lay down this new habit through a mental imagery exercise. I call this making a correction. In fact, most imagery is a form of correction where we replace an old habit, memory, or belief with a new one. In correcting past painful memories, we are not correcting the fact; we are correcting the *memory* of the fact. Memories are very malleable and can be written over, just like a computer writes over old unneeded code. So in rewriting our memories of the past, we do not dishonor ourselves or others. Instead, we give ourselves permission to live and adapt to this moment freely, without being caught in a loop of dysfunctional memory. Once the memory is corrected, our physical and emotional responses are quieted and no longer activated as quickly. Eventually, with practice, the habitual response is deactivated. Remember, even with the most ingrained instinctual habits, we always have the choice to make this correction.

Dustin said he wanted to change the way he responded to his environment, so we began a series of imaginal exercises. I explained that it takes 21 days to change a habit and that much of his learned behavior was habitual. Because driving was the most troubling problem he was having, he decided to begin with exercises around hypervigilance and driving his car. He did one or two exercises each day for 21 days. He then took a break for seven days. Then he chose a new set of exercises for particular issues that came up and did those for another 21 days, and so on. We worked for several months together, and by the end he had become more relaxed, was sleeping better, and was far less angry when interacting with people.

As with all imagery exercises, we began by my asking Dustin to sit in the upright position — both feet flat on the floor, arms on the chair armrests or hands resting on knees, sitting up straight and tall — and inwardly to state his intention to feel safe while driving. He then took three rounds of abdominal breaths and began the imagery.

#### IMAGERY EXERCISES FOR HYPERVIGILANCE

This first exercise takes its name from the biblical story of the exodus of the Israelites from Egypt. God separates the Red Sea into two walls of water, leaving a clear passage for the Israelites to cross through the sea safely.

## The Red Sea Parting/Safe Passage

Intention: To not feel hemmed in; to feel safe while driving.Frequency: Morning, evening, and before bed for 21 days.

Close your eyes and breathe out three times slowly. See and sense yourself driving on the road, feeling hemmed in by the other cars around you. Breathe out one time. Now, see this "Red Sea" of cars opening up around you, leaving a clear, safe path for you to drive through unharmed. Breathe out and open your eyes.

*Note:* If you become anxious while driving, take three quieting breaths (either the three magic breaths or three classic breaths). Then, WITH EYES OPEN and staying alert to the traffic, *for just a moment*, see in your mind's eye the image of the parting of the sea to remind yourself to remain calm and centered.

### The Tidal Wave

Intention: To navigate safely and calmly among crowds.Frequency: Morning, evening, and before bed for 21 days, and at other times as needed.

Close your eyes and breathe out three times slowly. See the throngs of people as a tidal wave moving toward you. Now see yourself leap, fly, or being lifted up to the crest of the wave, riding it like a pro surfer, using the wave's energy to surf freely on the waters. Sense and feel that you do *not* need to control the wave, just to flow with it and above it. Breathe out one time.

See the tidal wave gradually losing momentum and strength, ebbing away, as you ride it safely onto the beach, knowing that you and your loved ones are safe and sound. Breathe out and open your eyes.

*Note:* As you practice the exercises, you'll notice that the imagery may shift and shorten. For example, after a time, you may find yourself surfing the waves when you feel stressed without seeing the tidal wave first.

## Steel Wall

Intention: To feel protected when you sense danger.Frequency: Morning, evening, and before bed for 21 days.

Close your eyes and breathe out three times slowly. Imagine a huge 100-foot-high steel wall between you and what you perceive as dangerous. Know that this wall protects you, keeping you safe at all times. Breathe out and open your eyes.

## Ring of Fire

**Intention:** To feel protected in a threatening situation. **Frequency:** Use as often as needed.

With your eyes opened or closed, breathe out slowly three times. Put an imaginal ring of fire around you whenever you feel you are in a threatening situation. Breathe out (and open your eyes if they are closed), keeping this ring of fire around you until you are out of danger.

When the danger has passed (with eyes opened or closed), breathe out three times and imaginally remove the ring of fire.

*Note:* Remember to imaginally remove the ring of fire when you feel you are out of danger.

### The Superhero

**Intention:** To overcome anxiety when faced with a difficult situation.

Frequency: Use as often as needed.

Close your eyes and breathe out three times. Put on a white silk cape and fly above whatever is causing difficulty. As you look down, say "Shazam" and know that you can rise above anything. Breathe out and open your eyes.

### De-armoring

**Intention:** To become less hypervigilant, less guarded.

**Frequency**: Every morning for 21 days. This exercise may take a minute or more the first week then less time as you keep doing it. (You can, of course, do it twice or three times a day if you prefer.)

Close your eyes and breathe out three times slowly. See yourself standing before a gate wearing a suit of armor — the one you wear to protect yourself from the world. Breathe out one time and begin removing the armor piece by piece, beginning with the helmet, putting all the pieces behind you and seeing yourself naked.

Breathe out one time. Open the gate and enter into the garden, closing the gate behind you. Find yourself in a luxuriant garden full of birds, flowers, and trees. Listen to the birds singing and smell the fragrance of the flowers.