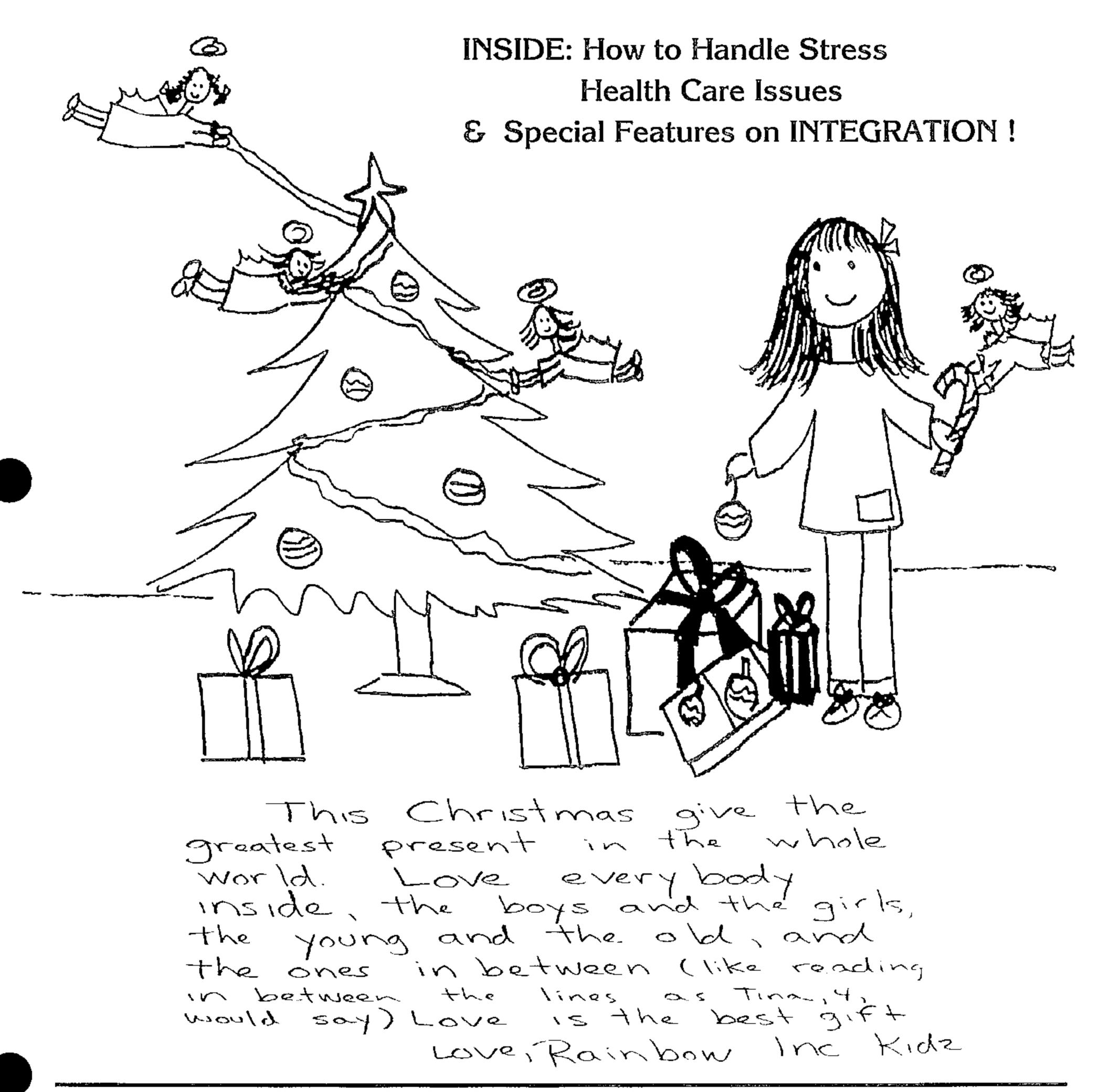
MANY WOICES

WORDS OF HOPE FOR PEOPLE RECOVERING FROM TRAUMA & DISSOCIATION

Vol VI, No.6 December 1994 ISSN1042-2277



Many Voices (ISSN1042-2277) is published bi-monthly at Cincinnati, Ohio. Copyright © 1994 by MV Co. All rights reserved. Editor/Publisher, Lynn W. Mailing address for all subscriptions, manuscripts and correspondence is P.O. Box 2639, Cincinnati, OH 45201-2639. Phone (513) 531-5415. Subscriptions in U.S., \$36 for one year. Canada,\$42US. Elsewhere, \$48US. This publication is designed as an information exchange for treatment providers, and survivors of trauma and dissociative disorders. Neither its editor nor its layperson contributors are engaged in the practice of medicine and this publication should not be construed as medical advice concerning any specific facts or circumstances. The contents are for general information purposes only. You are urged to consult with competent professionals concerning your situation and/or specific questions.

Functioning on the Job

By L.T.J.

have been in therapy for treatment of severe childhood abuse and MPD for the past eight years. As I have progressed in my recovery I am in fewer stressful situations in my personal life and am less triggered by things that used to send me into a tailspin, so I dissociate less. I protect myself against triggering by carefully avoiding scary TV programs, movies, music, and books; avoiding or leaving places that turn out to be triggering; talking with friends about what feels triggering; and keeping as friends only people who are not abusive. I divorced my abusive husband and am now in a very supportive relationship.

However, as I have gotten healthier and more self-confident, my career has also picked up. With it has come new stresses and occasional dissociation. Sometimes this has come in the form of feeling small, overwhelmed, and paralyzed. Sometimes it has been in the form of having an unrealistically powerless view of myself. Sometimes it has been in the form of blanking out — simply forgetting something important (and stress-producing) that someone has just told me, or some stressful task I need to do.

I have found several important ideas and tools for coping in the workplace. First of all, I need to put myself in a work environment which does not trigger memories of my abuse. For five years I worked as a therapist. About two-thirds of my clients were survivors of child abuse and/or in current abusive relationships. The work was very gratifying in many ways. I got to be very good at it. However, I would go home totally drained emotionally. I especially got triggered attending seminars and conferences on treating survivors, where I either dissociated or left. I have been much happier since I took a very different job. I am currently holding a very responsible job as a manager with a large staff.

In my current job I protect myself against dissociating by not using the workplace to deal with memories of my abuse. Most of the time now if a memory starts to come up I can deal with it after work. I have found that keeping my abuse history private at work protects me from triggering questions. To protect myself from triggering I discourage phone calls at work from survivor friends in distress. They call me at home. Finally, I put effort into making my environment as pleasant as possible.

To encourage my wise adult parts to stay in charge on the job I try to keep my office looking adult. I took home a bottle of bubble soap because I decided it wasn't a good idea. The kids get their time at home.

One of the keys to success on the job is the right boss. My first boss was extremely abusive. She scared my child parts and made it difficult for my adult parts to develop and demonstrate competence. Before I knew how abusive she was, and being new in recovery and having difficulty knowing how much to trust, I told her a lot about my abuse history. She used that information as ammunition in some of her more painful attacks on me. Fortunately, with help from my therapist, I was able to leave that situation gracefully and am now working with a respectful boss. (Since I left, too, my old boss was ousted, in part for her abusiveness!)

Being treated respectfully makes a huge difference in how I am able to function on the job. My current boss knows generally that I am dealing with child abuse issues (that is as much as I intend to tell him). He gives me support and coaching when I have to confront my staff and others on the

job, which is the hardest thing for me. I have grown tremendously with his encouragement.

Another key to success is organization. I have a tendency to forget things, lose things, and get overwhelmed. I know that many people have these problems, but I tend to think of them as disadvantages of having a dissociative disorder.

In my current job it is essential to keep track of tasks, appointments, files, etc. while managing many different responsibilities, constant interruptions, and crises several times a day. I have learned to protect myself from chaos by using organizational tools, including a consultation with an organizational expert.

Knowing that my memory is extremely unreliable, I write things down as much as possible. Everything l must do goes on a list organized in my appointment book by day, week, and month. (I also write down in the book where I have parked my car.) I log all my phone calls in the same book. As much as possible I take notes. I put the date on every piece of paper I write on. Tasks which have to be completed in minutes are documented on paper with the exact time the request came in. I keep appropriate files, all carefully indexed and cross-indexed. When I have to resolve a stressful dilemma, rather than just listening to the people bringing this to my attention, I write down what they are saying. That piece of paper then becomes part of a file documenting my action.

Many of these things which are new coping mechanisms on my part are just normal good office practice. I don't need to tell others at work why it is so important for me to do all this. I just let them think I'm super-organized!

"I wrote this to encourage myself, and anyone else in this "process", by writing of the joy of discovering just how much there is inside..."

Opal

Opal

Little stone

Not much to look at

At first

Small cloudy bubble

Look again

A quick wink of green

A lightning-flash of blue

More here

Than meets the eye

Intrigue

A sparkle

Invites a pause

More color glints

From another angle

One must take time

With an opal

It's more than just

Milk-white translucent

Inside

Even deeper

That small circle of fire

Ignites the center

A thousand lights

Live inside

It s not enough

Just to look once

At an opal

To find the meaning

Of true opalescence

It must be held

Just right

By Lori J.

MANY VOICES wishes to thank the following generous contributors for their help in supporting our work:

Angels:



THE CENTER FOR TRAUMA AND DISSOCIATION

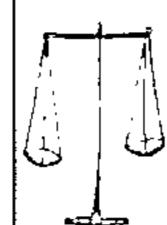
4400 East Iliff Avenue

Denver, Colorado 80222

1-800-441-6921

Dr. Nancy Cole, Clinical Director

Advocates:



NATIONAL TREATMENT CENTER for MPD and DISSOCIATION

Del Amo Hospital 23700 Camino Del Sol Torrance, CA 90505 1-800-645-3305 or 310-530-1151 Walter C. Young, M.D., Medical Director

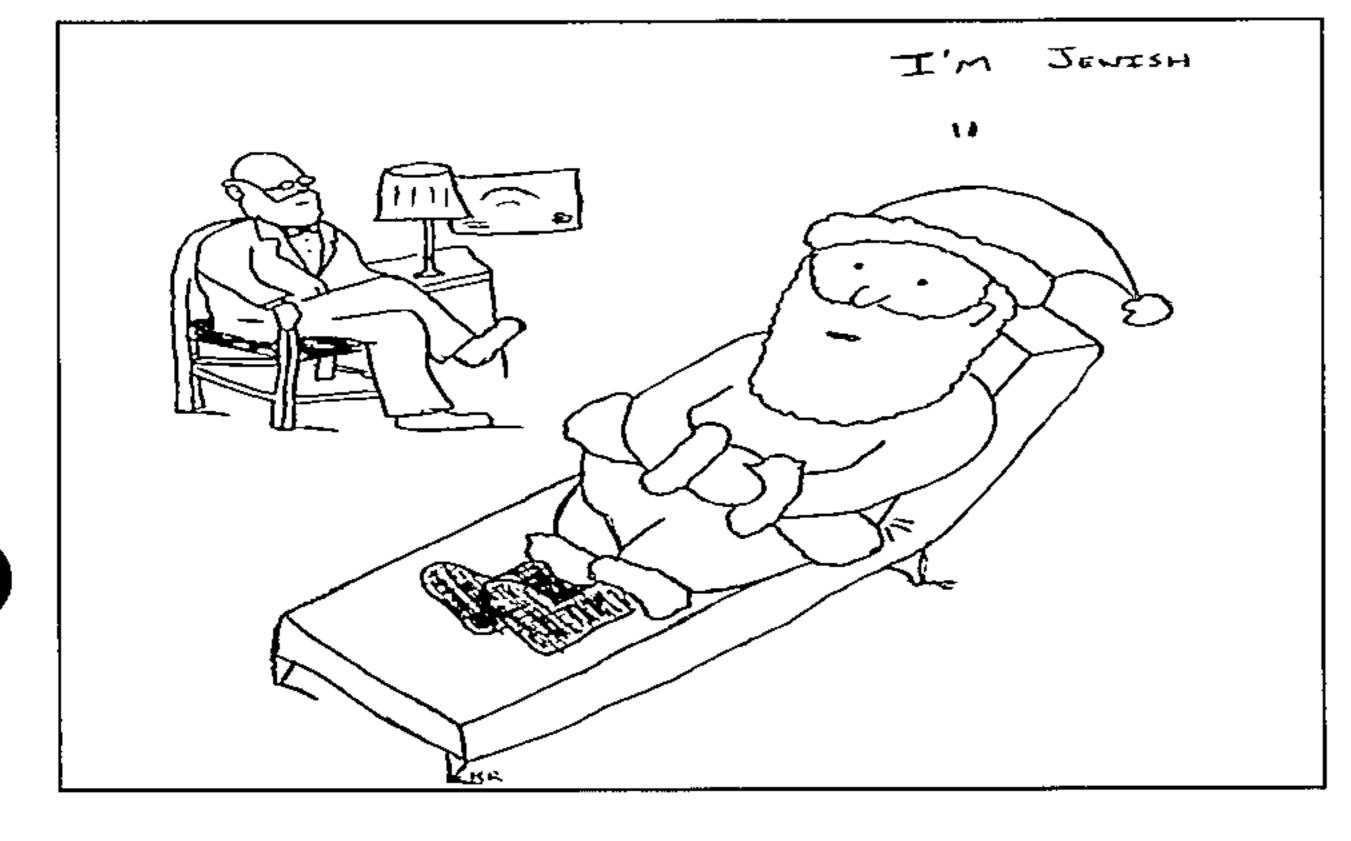
Friends:

CENTER FOR ABUSE RECOVERY & Empowerment
The Psychiatric Institute of Washington, D.C.
4228 Wisconsin Avenue N.W.
Washington, DC 20016
1-800-369-CARE
Joan A. Turkus, M.D., Medical Director

RENAISSANCE TREATMENT SERVICES for Dissociative Disorders
Green Oaks at Medical City Dallas
7808 Clodus Fields Drive
Dallas TX 75251
(214) 991-9504 Ext. 868
Rekha Pole, M.D., Medical Director

These organizations are not affiliated with nor have input to or control over the contents of this publication MANY VOICES and its staff have no influence on their operations.

<u>MV</u>



And It Is Too Damn Late To Be There Yesterday

and it is too damn late to be there yesterday

so now I have to go with today which is really

too far in the future to cope with how DID

we get to this place without going through the present

there must have been an escape clause through which

we somehow, accidentally slipped By Deborah P.

Coping With Stress and Change

You mean I have to stay here when bad stuff happens? It feels better to go away. I feel so fragile when I do not ago away, vulnerable and exposed.

It's too late; the healing has already begun. My therapist has helped me become aware of dissociation and how it feels when it happens. My favorite, secret coping mechanism is not a secret anymore.

Being aware of dissociation when it happens automatically reduces its effect. We start with easier situations (discussing parts) and comfortable, safe environments (our therapist's office). This is our training ground. From that firm base, we can learn to feel more comfortable in harder situations.

If I keep working and learning and building trust, I hope that one day it will feel better to stay.

By SQ.







Here's how I helped my inner children celebrate their/our birthday last year. I was really dreading the Big 60 birthday for some reason and had just started seeing my present therapist. It was a difficult time trying to bond with another person

I had an idea of how I could let my "inner kids" know once and for all that I truly did believe they were "inside my body" and let them know how much I loved them too. So I decided to get each one a special birthday gift.

For my infant alter, I bought another stuffed animal. I think that Wal Mart has a gigantic magnet in its toy department which draws my infant alter to it each time I go inside. She loved it, but asked Margaret, my therapist, if she could leave it there so it wouldn't get hurt. Margaret helped her see that "this is now and not then," by showing her the date on the birthday card.

I chose a more creative way to help my six-year-old. She has "bottomless pit love needs" so I bought a plastic pail (with a bottom) and made love flowers from construction paper on which I wrote the names of all of the many people who have shown me/her love through the years. I also wrote her a "love letter" in with her birthday card, so she could have Margaret read it to her if she couldn't read it herself.

Helen, my child alter, was able to read some of it, but then began crying, so Margaret finished it for her.

Each alter received what I perceived was just the right gift. It was after acknowledging each one in this way that they slowly lost their fears of a new therapist and started coming out.

After learning this worked so well to convince them that I believed in them and loved them, I chose the same way to celebrate Christmas. "They" also cooperated with each other and me to make Margaret's Christmas gifts, which Margaret loved very much.

By Jean and (Helen, Sarah Beth, Helen Imagene, Helen Jean and Imagene)







We relieve dissociation in stressful situations by doing them in a group. If we know a stressor is coming up, we plan it. If not we gather together in a hurry. It doesn't always work, but it is a big help and with practice it gets easier.

Our big example is this last month. We lost our best therapist yesterday. We had our last session with him and our new therapist. All three of us have been working together for over a month. The pain has been incredible but we had set our goal to stay out of the hospital.

We set goals, made plans of fun things to do with our friend. Having made the decision to stay out of the hospital, we dumped meds that could be used as an overdose, etc. We want to honor the five years he invested in us by cope-with-hope attitudes. We know it will hurt, but he likes our new therapist and our case manager

recommended her.

We slept after therapy to get over the shock and have kept our minds very active since. We journaled, did a portion of Bible study, sketched...all this to the calm of our favorite radio station. We saved the assignment for the after-shock to give us a mental focus. No black-outs or suicidal thoughts. Just a lost, sad melancholy that is going to stay. We are allowing our grief to not dissociate.

He taught us that allowing our feelings reduces dissociation. So we let them out in small portions and practice dealing with them. It hasn't been easy, it's been hard, because we really trust him...but the time came for a change. We decided to see this in a positive light, not a negative one. He taught us that a lot of things come down to decisions...not just waiting for things to happen. So we decided to look for all the positive things involved.

We know there are times when dissociation is there, like when a loud noise shocks us. A kid jumps out in panic — our Watch-helper method helps with that. We keep someone on watch to be aware of dangers. So when the kid pops out in terror we take them in and explain what happened.

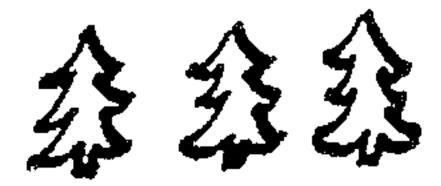
Sometimes the kid can cope better so we let them stay out and help the rest of us. It really depends on personal experiences. There are times we let ourselves dissociate, like when we have to wait forever and the adults don't want to get mad, or when we are alone and it hurts alot to be in the now. We get creative and draw on bits and pieces of different people's skills. For example, going to bed is a horror, so we have a whole regimen we do every night to cope. I believe a balance must be struck — to try not to dissociate at all would be too much stress. Learning not to, a little at a time, is the key.

By Martha



My name is Echo. It is important to talk inside to not dissociate. That's the way to stop blackouts by Sharin and to be open to another's words. It is scary at first but it is the path to healing. You'll be surprised at how you find out that you've got a friend, not an enemy. Then you are two strong, and can work being stronger.

By Echo



Well, not dissociating is at timesdifficult, but it can be tamed. It is party up to the strength of your desire and the ability to be patient with eachother. Developing a good co-concious is key. Working together to stay grounded is important. If you fight each other, you weaken your defenses to the stressors.

Taking turns is a fantastic way to cope. On a hard day, getting to therapy can be really difficult. So elect a group to get there. A teen to ride the

bus or an adult to drive, a kid to pack the toys, teddys, snacks, comforts, etc. They know a need. If shopping is the problem, ask someone to help make a list of the best comfort foods. Cooperation is a central issue. If you don't have much of a co-conscious, you can find ways around it. Make lists to remind you. Make comforting notes to yourself, like "Hey, I can do this today. It might scare me, but it will help me grow." Write notes to each other asking for response, like "Please" help me to think of a way to do this." Pen and paper are great tools. For ten years we have written our way into a mega-sized co-consciousness, into groups that cope together and protect us all. We'd be rich if we had money for all the pens and paper we've used! Give it thought and ask a friend inside to think with you!

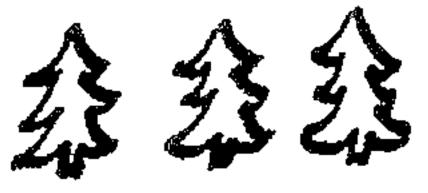
By Tina Marie



For me, faith is a huge help to not dissociate. I ask God for help to stay

grounded, and He helps. When I am out I am strong and have little fear because I know God is with me. It's fear that causes dissociation for a lot of us, so having confidence that God is there is a basic importance. He promises never to leave or forsake you. I know that is hard for a lot of people to accept, having been so abused. But He kept you alive to get help, to find hope, to see a day when the journey's battles will end. Why not look to a higher power? A strength to draw from, outside yourself. It is very comforting.

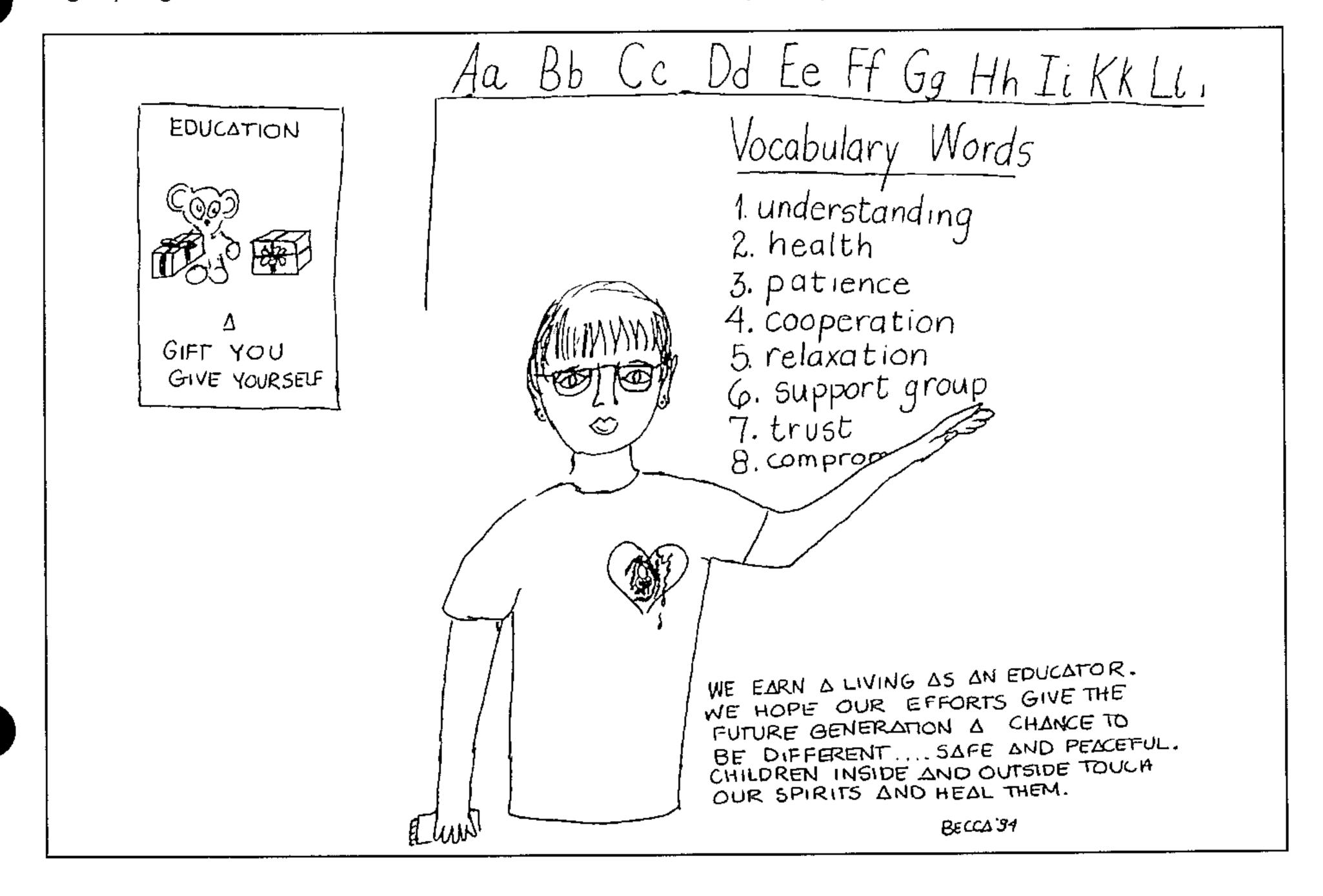
By Adam.



We have a co-conscious building game we play. It's called Three Wishes. We sit and each person draws a symbol. Anything will do, like a star, a square, a triangle or whatever. Then they write their wishes. It's fun, and you can learn a lot from it.

By Sherry.

<u>MV</u>



Therapists' Page

By Eileen A. Grellert, Psy.D., P.C.

Eileen A. Grellert, Psy.D., PC is presently studying alternative healing practices in Laramie, Wyoming. A member of ISSD, Dr. Grellert is a consultant, workshop speaker, licensed psychologist, and formerly multiple. You can reach her at (307)745-0238.

Is integration worth it? Absolutely, unequivocally, YES!!

Now thirteen years after my final and full integration (without a relapse), I look back on how my life was in 1981 and how it is now, and I can sincerely say that achieving integration was well worth the effort and anguish. There are numerous differences, some of which are very difficult to articulate because they are qualitative instead of quantitative. Perhaps the biggest pay-off is that I no longer live in fear of myself. I no longer live in a shadow of shame about being "different," and not "just a little different." I am "normal," and although there is much debate about what that means, you know what I mean. My mind works like other people's who aren't suffering from Mental Disturbance. And I discovered in graduate school and internship that integration achieved the desired effect: I could fit in with others. No one detected that I had been Multiple, there was no lingering residue, no detectable odor of illness. I could pass for normal, by God; in fact, I was normal! I had my idiosyncrasies, but most of those were due to inexperience with normal people while I was normal. They wore off.

My life continues to progress and improve. I have kept on changing, kept on looking for new and significant ways of improving myself and my lifestyle. I have achieved the "American Dream" for one: home owner, condo at the coast, car, pet, good friends, business owner, good income, money in the bank, health, hobbies, activities, and interests. I've been looking for Mr. He'll Do, but he hasn't shown up yet. Meanwhile, I am content and joyful.

I hate to imagine what my life would be like were I not integrated. (It seems so long ago and like it was a bad dream.) If I indulge in speculation I

think my life would still have an element of deep self-doubt that I no longer have. I no longer doubt my sanity, my abilities, or my consistency. I can honestly claim that I have normal control over my mind (Buddhist teaching noted,) and I can fully take responsibility for whatever I do, say, think, feel or intend and not fear that there may be another perspective lurking in the shadows of my mind. Therefore, I no longer live in fear or suspicion of myself. (Absolute intellectual and emotional honesty is necessary to understand and accept these statements.)

Moreover, whatever I experience in my mind I know is mine. I know unequivocally that I am who I am, that I am all that I am. In this self now is me, and no one else: no split-off parts that once were me, or that have learned to get along with me, but who really still hold something back. "It's just me," were the words I spoke when I realized I was integrated. I no longer live in resentment or with uncertainty toward myself. And I am now fully free to explore the inner universe as well as the outer universe. This freedom, born uniquely of individuality, is a wholeness in itself. When one's will becomes divided, there is no more freedom or serenity. Anxiety is inherent. Intentions clash and the compromise of appeasement becomes the price of peace and full satisfaction. I now have the capacity to experience total satisfaction, total joy, bliss, ecstasy, or whatever. I have the fullness and completeness I never had before. As an individual I have no conflict that does not come from me, no solution which does not serve only me. Thus I can progress rapidly.

Neither is there love toward self or other that does not emanate completely from within, from the center of my being. There is no doubt about who is loved or for what motive, no "other-me" to question,

double-check, or find. Instead I have oneness, and groundedness, a solidity and sense of myself which is unmistakable and unshaken. I can confidently and truthfully say that I know myself. I have attained an unabashed transparency towards myself and the non-self-world which is incredibly liberating. I have few, if any, secrets, except as regards those who would be hurt by their disclosure, and therefore, I have little fear of disapproval by others. I am my own standard, my own criterion. I have a certitude most people lack about themselves. I earned this certitude through the hard work of therapy and the joy of integration. Multiples can know other alters but until the alters "come within" there can be no single self that knows itself. The process of moving toward greater and greater integration is the same process of moving toward greater and greater self-love and acceptance. Aspects of self-love are respect-based trust, admiration, receptivity, care and attention, tenderness, and the absence of fear. Fear and love are mutually exclusive emotional states. We cannot fully integrate until we no longer, in any way, fear our selves.

Wholeness, Oneness, Unity. I think this is the ultimate intention of the Universe. Oneness moves toward itself. When the inner universe is whole then the outer universe will move that much closer to Wholeness. This applies to peace, justice, fairness, etc. as well. It was only after my integration that I developed a Cosmic consciousness, that is, the extension of compassion to the Universe and its elements. Until integration I was concerned, justifiably, with myself. My own world (inner and outer) was a mess, and I did not have the capacity to extend myself out to others in any consistent manner. My energy went into fending off the impact of the external world. So I had to take the time out to fix myself up. It was

essential that I devote all of my being to that process, as "selfish" or irrational as it may have appeared to others at the time.

Without that effort I would still be negatively impacting my life and the lives of others around me. This is our first duty: cause no harm to others. I was not able to not cause harm until I was in control of myself, and even then I had a lot of learning to do. Integration brought that control. Then other concerns drifted away and I was left with me, the amalgam of all-that-had-been. It took time to discover this new being, this creation that had changed in time and space, since its original inception and been transformed in integration. Who was I over time? What were the essential consistencies that comprise "me"? It took time to find out how I would react to new situations, good, bad, indifferent, how I would fare in graduate school (Psychology), what I thought, felt, believed, and how I related to all sorts of people and situations. This was an immense learning time. Finally, I settled down and began to develop a rich community of friends.

Over the period of about ten years following my integration I was increasingly able to allow others to

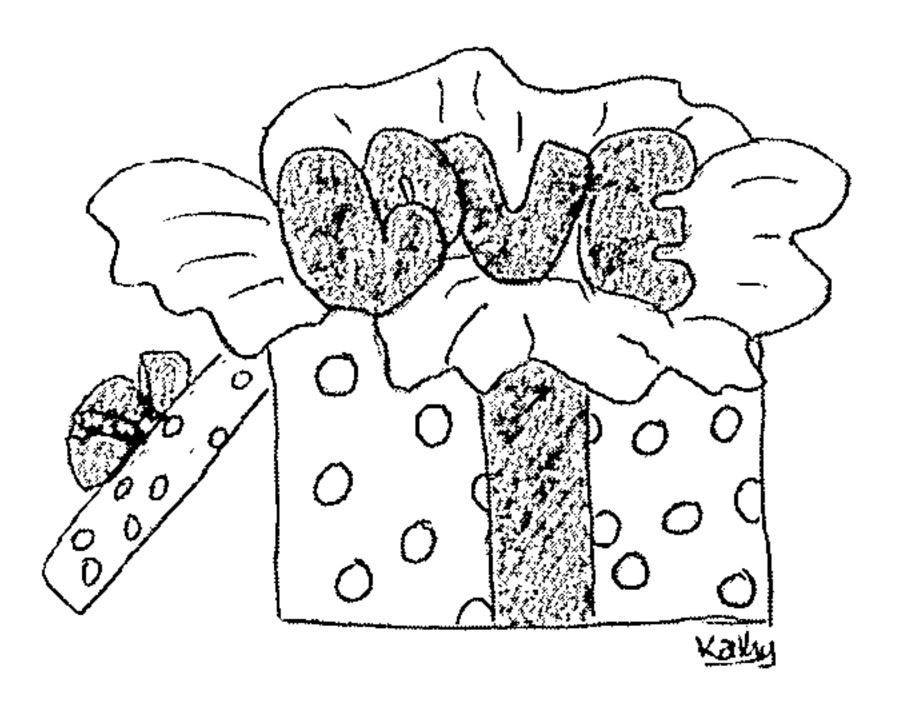
love me and to feel loved so that in 1992 I could publicly declare "I am loveable, loved and loving." I had known and felt so much hate for so many years, so little love, and so much false love, that it took all that time for me to really *feel* loving toward myself and others.

It has been a gradual process, but a continual one, that leads me farther and farther out of myself, while paradoxically, going farther and farther in myself spiritually, until the Universes meld. At this point I am simply someone who desires to grow, help others compassionately, and evolve spiritually. Life after integration has been an extension of all the lessons I learned on the path to integration. Love, self-love, growth, change, evolution, and the attainment of perfection, however the latter is defined, these are the fruits of the labors of therapy. Did I mention happiness? That also is a fruit of post-integrative life. I am happy, but mainly because I understand so much more of love, have so much more of it in my life from friends, acquaintances, colleagues, and my brother, and because I am so much more loving toward myself and others.

Anything else is unimportant.

<u>MV</u>

A GIFT I'D LIKE TO GIVE MYSELF



Hold Me A Wishful Thinking

hold me mother
in your arms
rock me coo me gently
to sleep then I know
that sleep is not death
and sunshine and love return

hold me father
in your arms
lift me and dance with me
tell me I'm beautiful
braid my hair and
kiss my knee
when I fall

hold me sister
we share blood
and tears, our germs,
our fear, our laugh
is exactly the same
I pray for your baby.

hold me brother
we share dreams
of love and acceptance, an end
to nightmares of abuse
and alcohol, shame

hold me husband let me be who I am love me for what we are changing and growing sometimes needing you less sometimes needing you more

hold me affectionate friend hold my longing for you for the blessings of your spirit for the dance of your eyes your enjoyment of my life unfolding hold me in my pain as I heal slowly into one

hold me, selves
as we walk across this bridge together
to the land where people are
touched
by God who makes us one
that land is beneath me
warming with spring
as we all discover the newness inside our earth,
waiting to be born.

By Deborah P.

Dealing With The Health Care System

Growing up in my family, I was frequently exposed to ridiculing jokes about the mental health care system. I do not know why that was. I never consciously thought about it until we moved here, to the city which is home to the specific state mental health hospital that was ridiculed. Now I think about it often. I wonder why "looney bin" jokes were so popular and hilarious in my family of origin.

I never imagined that I would experience a mental health hospital first hand, but I have and it was not at all as I had expected. The compassionate, professional care I received at a private mental services hospital was helpful to me at a time in my life when I had lost all balance and hope. I was not drugged, locked up in solitary confinement, ridiculed, or abused in any way. Instead I was listened to, respected, and treated with kindness and concern.

I met interesting people there — "real" people who had "real" problems that they acknowledged and wanted to resolve. I met smart social workers, doctors, and therapists there who could read my mind (it seemed to me) and who helped me understand what was happening to me. The nurses there were firm yet kind, and well-trained in helping people who were upset, confused, and distraught.

Now that I have first-hand experience with mental health hospitals I do not fear them. At the times in my life when I have gone there, I believe that that's exactly where I needed to be.

By B/S



I want to blast "MANAGED HEALTH CARE!" I would like to name names, but I won't.

My managed health care company does not include long-term therapists in its provider network. No, according to my managed health care company, long-term therapy is too expensive, overrated, and unnecessary. The "buzz term" instead is "Brief Therapy Model"

therapists. Now what the hell is that? How is it possible for clients who have been dissociative their entire lives, often 30+ years, to become associated briefly? I can only speak for myself, but I have been in therapy for two years and I am still highly dissociative. I can see progress, yet realize that I also have a long way to go to integration.

Thave personal experience with one "brief model" therapist who is currently our family therapist. He has a simple solution to every problem imaginable. The only trouble is his "solutions" don't work. They sound feasible in the sessions, but in day-to-day living we don't apply them correctly and/or consistently, so the chaos continues. Our family has been seeing this therapist for seven months and I don't see much improvement in the way we interact and solve our own problems.

It is unjust that an insurance company, miles away and primarily concerned with profits, dictates which therapist or doctor we can and cannot see for an alliance as delicate and balanced as the therapeutic relationship.

By Rachel



I want to share my experiences of the medical hospitalization of two patients who were MPD. I am a nurse who also is dissociative.

The experiences of these two patients were *very* different because of their decisions about disclosure. One patient told the doctors and staff — her diagnosis of MPD was on her chart. The other did not.

The patient who disclosed was treated with kid gloves — almost too much care was given to allow her privacy and to try not to trigger her. When I remember how the staff spoke of her I feel sad, because they were uncomfortable and ill informed — but they were respectful. She was given space to resolve her problems with the help of her doctor and her outside

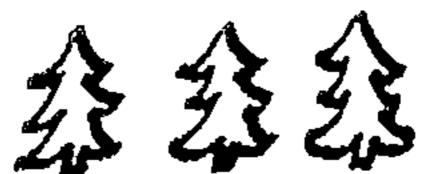
social supports. The staff did not understand and believe, but they did not press their opinions on her.

The patient who did not disclose, however, was seen as one big problem. Her behavior was not ordinary enough. She was seen as irritable, demanding, and unreliable. Her need to go outside was seen as rebelliousness and inappropriate. The staff did not understand that staying inside was triggering and intolerable to her.

Both patients used sign language part of the time. Although there was an air of disbelief about the idea that "one of her parts is deaf," there was care taken to provide alternate communication to the patient who disclosed her MPD. For the patient who did not, eventually a system of written reminders was set up to transmit staff expectations, but it was seen as extraordinary and as a response to her "poor behavior," rather than as an appropriate intervention due to her hearing and memory losses.

I can't say either patient had a smooth ride, but I am suggesting that despite the discomfort and loss of privacy one may have in disclosing to the medical profession, I still recommend telling.

By Jess



We live in a sober-living home. The overt reason is recovery from drugs; the inner reason is that we just do not do well living alone. We have tried it more than once. Several times, and the result is always the same: within two months, usually less, we are within the halls of a psych ward of some hospital again...Denni has tried to kill herself again, or Nonnie was using drugs, (or Jason was, to shut down everyone else who was suffering)...MIPS was attacking Jonathan to the point of suicidal means...and everyone who has tears was sobbing incessantly. Who was not eating? Who wouldn't sleep? Who was

MV December 1994 Page 9

running out, all hours of the night?

So we have come to understand that Living Alone is not "it" for us. And we accept that. Is there some rule that says "It is not normal to live with other adults if you are an adult."? All right, so we're "needy"...we need others around to validate that we exist. Ok and so what! We have accepted this, and the mere act of acceptance has made it Ok in our book. It is a relief to admit this. Now we can get on with things.

We have chosen an all-women house, with the men's house next door. Even tho most of our clan is guys, we do not trust outside men enough to share a house with them. Even the boys within don't want the threat of men in our house. (If a woman is on top of us in the middle of the night, we will be traumatized, but able to fight her off, hopefully; a man would shut us all down.)

Some of us guys get embarrassed at watching the women undress. And if they talk about how fat they think they are, or sex or some dumb stuff, it is horrible. We leave and make Susan do the talking. And we get mad when they call us "ladies." What a dumb word! But it is safer than living with men, so we put up with it for now.

The gender-issue is a big one for us, and it causes great feelings of

separation. We had an experience two years ago that set us way back, and we have not been able to be open about our gender issues since. So there are blockages.

But on the whole, there are some people here who seem to care about us. I don't' know if they understand that we are "we" and not "one" because after the experience two years ago, we have been much more afraid, and the children hide much more, and the adults have quit telling their own names (even I don't, anymore), instead answering to "Tony." This causes sadness and inner frustration.

But for some reason we are "taking these things in stride," and going along anyway. We have gotten very close with our two roommates and are okay with the other girls in this house. Next door is one guy we feel close to (he has a physical difference which bonds us as well) and the other guys there are not bad either. We have told one girl and one guy about our MPD, but no one else. The counselors know, of course, and we end up paging one of them a couple times a week to talk, because she knows about us.

I guess we are fortunate, because most of the clients in this program are dually-diagnosed (psych and drugs) so they are more flexible about "oddities" that crop up in one another. It is hard for us to open up to the other people when depression is rampant because we are so well-programmed to respond with "Okay!" when asked "How are you?" We are so well-trained that it is not okay to burden someone else with your down feelings, that we push people away when they ask and we're not well. It is so scary to be vulnerable, and vulnerable one is when one is not alone.

But sometimes it is worth it. It is nice to have somebody available (new for us!!) to go up and ask to walk with you to the store, and they actually say yes! Or really nice is somebody else asking me to go with them somewhere! (Like, why would they want me around?)

It is very hard work on our part to go through all of this: the paranoia or fear, the lack of ability to trust, to believe, the strong urge to run away before they all find out how awful we really are...all the feelings we go through internally are overwhelming!

And it is compounded by the fact that they don't know about our MPD, and it is painful to have nowhere to go for this. But we struggle onwards with it all, because we want so much to have a better future!

By Susan, for Tony's Clan

<u>MV</u>

The Telling

By Artworks

I snuggled beneath my electric blanket, pen and notebook in hand, submerged in rosy, cozy comfort. Sexual energy hummed and thrummed sweetly through my body, but I didn't feel like making love, I felt like making sentences and paragraphs and pages of words that would burst onto the paper in orgasms of thought, little explosions of expression that would take me gently back into the scent of sweetpea. Back to that day when a fresh bunch of flowers from Ellen's yard had quietly done its part, adding its scent and texture to the detail and depth of the memory.

Zinnia for drying, like some strange bridal bouquet, brilliant and strong, preserved now above my altar in a whimsical attempt to capture the essence of the whole bouquet, the whole day. Sweetpea for the moment, its delicate petals withered long before the memory of its scent, and Cosmos for seed. Seeds that could be bits of a beginning, tiny pieces of a new way of being, so that someday when I cast them from some window of my life I may watch the blossoms unfold and remember again the day that I harvested them, the day that I chose to open myself to my group to tell my deepest, darkest secret.

Cosmos will always remind me of Sweetpea and Zinnia now, and of Taya's look, of Gennens touch, of being surrounded by each of their expressions of love, their connection to each other, heart linked to heart, weaving a net of themselves to catch me as I fell into the telling of the most terrifying tale of my life. A net of human caring and belonging that could hold me still enough in that space of safety to look my own story in the face and find the deepest truth...that this shame imprinted at the very core of me was not mine at all, never had been, had always been a part of his hatred, his need, his greed for my little-girl innocence. That he had forced it into me with his words, just as he had shattered my psyche, and torn my body with his violence. And I saw there in the safety of the group's cradling circle that I had only been his unwilling object of focus because I was too small to have a choice.

MV December 1994

Fusion Confusion

By Anneli & the Commonwealth

guess things started falling apart after the fusions...

Earlier this year I became engaged to a wonderful man, who is the most supportive, loving individual I have ever known. He accepts each of us, with all of our faults, traumas, and gifts. Our doctor had recommended that we marry him as *one* person...he said that it would be better for our fiancé. Everyone inside seemed to accept that without hesitation: after all, wasn't E the best person to have ever come into our lives? Didn't we want to protect him from the trauma of living with a multiple?

Based on these things, our inner self-helper constructed a fusion schedule that would have us completely fused by August 15. (As we write this, the date is August 18. Hmm...) This "schedule" fused over 85 personalities within only a few months. Our doctor accepted the schedule and we began the work.

The first few fusions were fairly uneventful. I had experienced enough prior fusions to expect the disorientation, double-vision, unclear thinking, strange behavior, and other symptoms that come with them. But as we continued along. I realized that something was definitely wrong with what we were doing. I began bumping into imaginary walls from the past; one night I almost fell down the stairs because I was trapped in the one-story abuser's house. I developed severe agoraphobia. I couldn't even look out of the bedroom window of the house on my very suburban street without panic hitting every fibre of my body. I hated to go out, I refused to answer the phone, I would be laughing one second, and then sobbing the next. The memories were awful. I could not take the daddy out of my bedroom. I would leave the light on, hug every stuffed animal on my bed, and I still could not escape the overwhelming, stifling fear, the pain inside, and the feeling this is happening right now. I

am that little girl being raped again!"

Finally, I went into my doctor's office, with E., and we told him the things that had been happening. That I had been falling apart slowly. That I was losing myself and my sanity. That we had made a horrible mistake. That I needed help, or I was going to die. And I probably would have.

Fortunately, my doctor listened. He stopped the "schedule" immediately. He started spending more time with *me* in therapy, instead of with *them*. We decided it was okay to be married, and be MPD. I did some writing of my memories, and he read them. I slowly started to heal, and as I did, I experienced a bombardment of new feelings about what had happened.

For a period of time, I was angry. Thoughts went through my head: "My therapist should have known better. He almost destroyed me. I hate him! I hate all men!" I bounced from betrayal, to lack of trust, to anger, and then back to betrayal again. I was a very good victim. "He hurt me!" I would say to myself. He had hurt me. But my ISH was the one who started the whole "schedule" idea. I hadn't told my doctor we needed to stop until it was too late. I had played a part in the "hurt," too. I hadn't learned how to say, "stop!" or "This is not okay!"

I felt guilty. E. was marrying a "wounded" person. He was marrying a multiple. What would his family think? Was it fair? Was I hurting E.? Why couldn't I go on with my life, put the past behind me, and be normal like everybody else in my world? Would he be "settling" for something by marrying me? Was I good enough for him? Would he survive the trauma of the more angry alters that hated everyone? Could he still love me after having things thrown at him? People walk out on him? Some inside deliberately playing with handfuls of pills just to see his reaction? My premise became: I am not okay, and I am devastating the one that I love with my broken-ness.

I definitely had resistance in therapy. I didn't trust. I was exhausted of healing. I didn't want to get better! (I didn't think I ever would get better!) I was very, very discouraged. Immediately, I contacted a dissociation/MPD organization and asked for referrals in my area. "I want all the names you have," I said over the phone, "but please emphasize the females!" I spent a day calling all over my city trying to find a new doctor. I set up interviews. I got frustrated by answering services. I went into my normal doctor's office, and didn't mention my search. "How are you doing?" he would ask. "Fine," I would say, knowing that he knew it wasn't true, but not caring what he thought anymore. People inside complained. I complained. I stopped working at getting better, and just stagnated: I'm looking for a new therapist, and so I will postpone my healing until I find one that suits me. One that knows what they are doing. One who will never hurt me.

I interviewed one female doctor. She couldn't see me because her caseload was full of multiples. I really liked her. I interviewed a male doctor on the phone, then "forgot" about my appointment and didn't go. I played phone tag with another doctor. I set up an appointment with another female. I saw her. She seemed nice, but I was scared. "Can I really start over?" I asked myselves.

The answer was "no."

I finally had to accept that my doctor (the one who had rushed the fusions along with my self-helper) was human. I hated that. I thought he needed to be infallible. He needed to know everything about MPD, and yet not be too arrogant. He needed to be kind to the kids, and yet stern. He needed to somehow crawl inside my head and understand the things that were going on without being told. Yes, he made mistakes. Yes, he was human. No, he isn't the world's expert on MPD or dissociation. But, he is my doctor. He

is the one I have seen through two years of my life. He is the one who helped me get a restraining order against my family, and helped put my father in jail for three days. He knows more of my memories than I do. He knows most of the Commonwealth, and most of the Commonwealth really like and trust him.

As a result of this experience, I have redefined my definition of trust. Trust is not about running away when we feel hurt. It is about facing our pain, being honest with our pain, expressing our pain, and then finding within ourselves the strength to go beyond our pain. To face the one who hurt us and be vulnerable. To not run. To realize that they did not intend to hurt us, that they are sorry that they hurt us, and that they will try not to do it again. And, true trust will believe them. (True love will be sorry.)

There is no perfect therapeutic relationship; no perfect therapy. We are all human. We all make mistakes. The wonderful aspect of therapy is that we learn that our mistakes are acceptable. We are not going to be beat for doing something wrong. We are not going to be tortured for telling the secret. We are free to be human beings. Both us, and our doctors.

I decided to stay with my doctor.
Things are going well. My last few sessions have been excellent. We are going forward. And slowly, we are removing the wooden, mechanical facade around ourselves, and metamorphosing into a real person.
We are finding our humanity. It's terrifying, but it feels really, really good. I'm glad I didn't give up. I'm glad I didn't run. I am so very, very glad.

<u>MV</u>





What It Feels Like to Be A Multiple

By Danielle

I have a destination I want to get to But the car I am driving does unexpected things.

Sometimes it runs out of gas when the gauge says FULL

Then I get stuck, frozen in a traffic jam in the tunnel,

With everyone honking for me to hurry up and get fixed

So they can go on with their lives and pass me by.

Sometimes I feel like there is an invisible passenger

that appears when I least expect him or her

and they jerk the wheel taking me down a bumpy side road in poor repair, with lots of pot holes. Then I get stuck,

in the dark, alone

not knowing

how to get back

and sometimes

forgetting

where I wanted to go.

Sometimes I sail along, passing everyone by,

feeling great and making good time, until a policeman screams his car & warns his lights

"You're going too fast. There is a penalty for this."

He says, stopping us completely.

But, there was no sign posted, limiting our speed

and we weren't burting anyone

and we weren't hurting anyone, and it felt so good to finally be making progress.

Now

fine.

I am always looking over my shoulder afraid of breaking rules I can't see even if I seem to be doing just I want someone to rescue me on the side road when I am lost,

Not stop me if I am doing great and not hurting anyone else or myself.

Sometimes I think I am getting closer to my goal

and someone says over the radio AN URGENT ANNOUNCEMENT:

"How do you know you can drive? Is this a real car you are in? Can you be sure you are going in the right direction?"

And I get confused. Am I real? Are my experiences real?

Do I really know where to go?

Do I really know where to go? I pull over and get out.

I have to kick the tires, to test their solidity.

Getting going again is very slow, Because I have lost my confidence.

Sometimes I am in the back seat Strapped in and speechless, Watching someone I don't know, Drive.

Not able to tell them what to do, But afraid of what is happening. I certainly wouldn't drive this way, They could get us killed.

Sometimes I'm somewhere else and I wake up at the wheel of this car, not knowing how I got there or where I've been.

Where am I supposed to go?

I can only hope that this journey's end will be worth the trip.
And that I will get there before it's too late,
I disappear or I decide it's not worth the bother.

Can God really get us there with all those obstacles?
Will "there" be worth arriving at? Is this real?
Am I real?

Dealing with Medical Doctors:

Our Choice, Our Responsibility, Our Risk

By Jill's Inside Family

"What? Trust medical doctors? No way! Tell them we're a multiple? You've got to be kidding!"

Until recently, that was our attitude. And it felt highly justifiable, too, based as it was on experiences with medical doctors over a span of nearly 50 years in Maryland, Massachusetts, Maine, Ohio, Illinois, Texas, New Mexico, Montana, and Australia.

For most of those years, our host personality thought that the confusion, physical symptoms, forgetfulness, anger, and terror that accompanied her to every physical exam and treatment were her own inexcusable weakness. She didn't tell doctors about the abuse for the simple reason that she didn't know about it, nor did she know about us.

And no doctors asked. They didn't ask why when she was brought in at the age of three months, malnourished and with rickets. They didn't ask why when she was brought in at two years after refusing to eat anything for days. They didn't ask at age seven, when after a long string of serious illnesses she was hospitalized with rheumatic fever, unable to relate to anyone around her. They didn't ask when she was twelve, with cowering posture and vaginal infections. They didn't ask at eighteen, when they couldn't account for her chronic nausea and anxiety (although they did refer her to a psychiatrist, who didn't ask). Nor, during the adult years, did doctors ever inquire about why, in spite of the ephemeral rashes, the intractable sore throats, the inexplicable nausea, the memory loss, the anxiety and panic attacks and depression, the vaginal infections, the itching skin, the quick switches of mood and age, the terror at the word "hospital." Was it because our doctor grandfather was a dean at one of the country's top medical schools that they never asked? Was it because our

uncle was an internationally-known psychiatrist? Was it because they didn't want to think the unthinkable? Was it because it was all our fault? We trusted no doctor, and no doctor helped.

Finally, thanks to an insightful therapist who taught us to ask for ourselves, we learned to face the truth about the abuse that created our communal presence in one body. We even got a written confession of sorts from the father who hurt us, so we feel more certain now that we didn't make it all up. Then we realized that we had a choice: we didn't have to wait for medical doctors to ask; we could tell. At first, we were afraid to tell, afraid we'd be scolded, punished, kicked out, locked up for being crazy, treated like a freak. It was hard enough to master the challenge of taking several variously scared, confident, arguing people to the doctor in one physical body, let alone explain it. But then we found a nice lady family-practice doctor who seemed caring, and so we told just a little. "If I seem a little nervous, it's 'cause I was sexually abused as a child," our host stammered. "What a shame!" the doctor said. That was the first and last time she ever mentioned the subject, but we could tell she was uneasy and didn't know what to say. Worst of all, she didn't understand what influence our childhood abuse might have had on our adult medical history. So we didn't dare tell her that she was interacting with more than one patient.

When we fractured our ankle, our most capable part got us to the hospital, whereupon one of the scared children switched out and refused to cooperate. To her, the command to take off her clothes meant she was going to be abandoned there. She was too little to explain, and the emergency room personnel didn't understand. Thank heavens our therapist (a former emergency room nurse) and our husband came to help us feel safe enough to have the surgery. We never did know what they told the medical

staff, but the medical staff interacted with them rather than with us. We couldn't figure out how to explain that our 5-year-old was too little to handle the crutches, but the older ones could. Through experiences like that, we learned that just telling a medical doctor is not enough to get the help we need, because they don't understand the ramifications of what we're telling them. They simply don't have the training or the ability to conceptualize multiplicity.

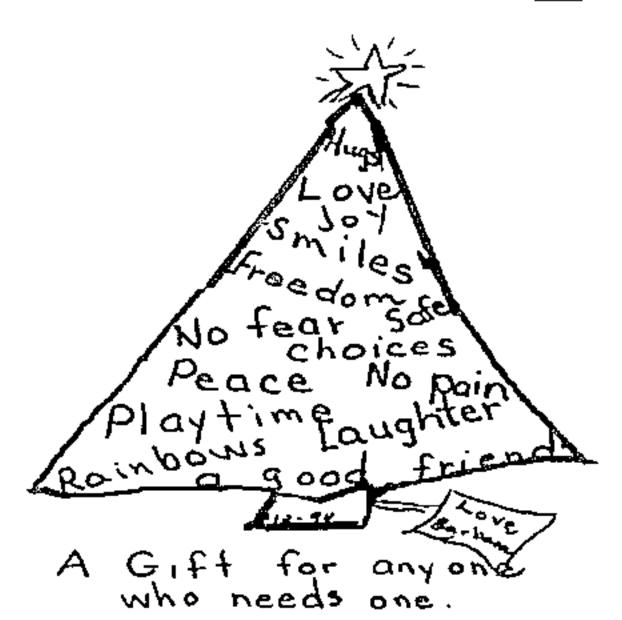
When we moved to another state, we had grown enough to take more responsibility for our own well-being: we asked for referrals to doctors who are familiar with dissociative disorders and sexual abuse survivors. What a difference that understanding has made! Now we have a marvelous gynecologist and an insightful internist who work with many multiples and are familiar with the long-term effects of childhood abuse. We feel safe enough to be real with them, to tell our confusions and get help in sorting out physical symptoms from body memories and anxiety. We don't feel ashamed when a child comes out to ask why the paper towel holder has a key, nor when a caretaker says the children have been fearful about getting undressed today, nor when a super-achiever insists on evaluating treatment options.

We feel good that we chose to tell about ourselves and that we took the responsibility of finding the right doctors to tell. But we've realized that many survivors aren't lucky enough to live in a place where they can find informed medical personnel. So we've decided — with the encouragement of both our medical doctors and the co-authorship of a fellow multiple — to write an information pamphlet for gynecologists and obstetricians, to help them identify the survivors among their patients, respond to disclosures appropriately, and recognize the long-term symptoms of sexual abuse

so that they can provide appropriate and effective treatment. We hope that survivors too will be able to use such a pamphlet to help them communicate with their physicians.

We realize that such an effort may trigger denial and resentment among some doctors who feel threatened by having patients act as instructors. Nevertheless, to us, the importance of sensitizing the medical profession to survivor issues is worth the risk. We understand now that we weren't "bad" not to trust doctors all those years — we were right! The doctors weren't ready to hear us, because they didn't believe we existed. They weren't ready to ask us why, because they feared the answers. Nor could they help us, because they did not know how.

<u>MV</u>



HEALTH REFORM INFO

As some of you may know, I have a major bias against insurance companies, brought on by experience with several in attempting to maintain medical coverage (as a self-employed individual) for anything because I have a "mental health history." (The fact that I paid for most of my therapy out of my own pocket, and functioned well throughout my treatment and post-treatment period, doesn't mean a good goddamn to most of these outfits.) I presently do have insurance...but it was like pulling Sequoia trees out by the roots to get it. Not to mention the considerable hassle for my therapist, who had to answer their idiot questionnaires... They originally wanted all records of my treatment, which, since I'm a writer and wrote a lot of material during therapy, would probably have taken several shipping cartons to deliver - if I or my therapist were foolish enough to turn them over to those nibby-nose clerks.

And if I have trouble dealing with insurers (& I've never been hospitalized) I can only begin to fathom what some of you must be enduring...especially in the profit-oriented "managed care" setting.

The fact that folks like us have been sensible enough to pursue a "normal" life through mental health treatment becomes a massive roadblock to our obtaining coverage for a broken leg if we're hit by a truck! This is patently ridiculous and needlessly discriminatory (if you ask me) and I intend to continue agitating for health care reform that will help everyone. Most preferably, a system that won't second-guess the caregivers, either. I

resent the situation that permits untrained insurance co. "administrative assistants" to question experienced clincians on their choice of medication, treatment plan, or duration of hospital care for trauma survivors. I especially resent the harrassment tactics used in managed care (repeated phone calls, repeated "losing" of documents, and slow, slow payment) that I've heard about from many treatment providers. I am not convinced that this harrassment is human error...I think it is a strategy to discourage treatment of difficult (ie, expensive) cases. It may be "cost-effective," but it's just plain wrong.

Change will only come from an informed (and determined) citizenry. Below are some listings for information on Health Reform Issues. These stress universal coverage and/or the single payer system approach... the only ideas I've heard of that might help non-insured people who need mental health coverage and are not currently on welfare, etc.

If anyone has *factual* information on alternatives, please send it along. I have yet to hear of an insurance company that willingly covers long-term therapy for abuse survivors. If there's anything positive about the current health-care setup for mental health clients...why we *shouldn't* change the system...I'm open to the information. But I'm not holding my breath expecting much from the Establishment. From what I've heard, it's just not there for us.

Hope to hear from you (therapists and clients alike). Horror stories are welcome. Maybe we'll do a book! — LW

Get Informed About Health Care!

Fiscal Analysis of Single Payer System. Clearly written. Canadian Health Insurance: Lessons for the United States. US General Accounting Office 1991. (Order one copy FREE: US General Accounting Office, PO Box 6015, Gaithersburg, MD 20877. (202) 275-6241.

Videos on the Canadian System. (I've seen these, & they're excellent — LW). "Canada's Single Payer Health System: A Model for Reform" - \$15. "Medical Practice in Canada: The Single Payer System" (for physicians) \$25. Available from Off Center Video, 1300 Shattuck Ave. Suite A, Berkeley, CA 94709. (510) 486-8010. Email: margots999@AOL.com.

Enemies of Patients, by Ruth Macklin. © 1993 Oxford University Press. \$25. (Impact of managed competition on patient's relationship with doctor. Reviewed in New Engl.J Med 1993; 329:892.)

Evaluating Health System Reform by Jim McDermott . JAMA 1994; 271:782. (By the Congressional Representative who introduced the single payer system to Congress.)

The American Health Security Act - A Single-Payer Proposal by PD Wellstone and ER Shafer. New Engl. Jrnl. Med. 1993; 328: 1489.

Insurer's Provoke Psychotherapists' Angst, by Wm.M. Bulkeley, article, Wall Street Journal 5/23/94 pg B1.

Where to get copies of legislation:

Copies of legislation can be obtained from your representative. A new congressional session will be starting, and the number assigned to the bills will change. Your representative can track down a bill number. Or, to check a bill number, call (202) 225-1772. Then to order that bill by number, call (for House bill) (202) 225-3456 or (for Senate bill) (202) 224-7860. They will mail one copy to you for free.

Helpful Organizations:

Physicians for a National Health Plan

332 S. Michigan Ave. Suite 500 Chicago, IL 60604 (312) 554-0382

This group lends substance to the debate. Regularly publish in the best peer-reviewed medical journals. Includes all health professionals — ie, nurses, practitioners, physician assistants, psychologists, etc.)

SPAN/UHCAN! 2800 Euclid Ave. Cleveland, OH 44115

(216) 248-8558; (800) 847-6611. National coalition of informed citizen groups. Excellent source of information and activities.

& Finally, Maxis Software, makers of SimCity, SimAnt and other simulation games, now has produced SimHealth. "...Design a national health care system based on your ideas and values." Then test your plan in a dynamic computer simulation. For info write to Maxis, 2 Theatre Square, Orinda, CA 94563-9907, or call (800) 336-2947.

(From the letter that accompanied this piece: "I would like to submit the enclosed prose for your December issue. My, Our, recovery is the gift I give myself, that I am giving my selves. It is my belief that this is the best gift I have to give to the world, that is, to become the whole being I was meant to be. I know it is not a drawing, but I hope it will be considered ART.")

The Give-Away

By Carolyn P. for the Family

INTACT, a turtle shell had been found.

Oh, great ancient Being that she was she had had a life on the farm. Now the meat of her body is gone transformed into the life around her a small furry creature perhaps with razor claws and sharp teeth. The shell and its beautiful covering of deep brown and sun's gold remained as perfectly as they had been created. INTACT.

This beautiful shell had caught my sister, Mary's, keen hunting eye. Mary hunts Medicine. Old, bleached-white by the sun, wind, and water, empty turtle shells have been her specialty, one of the quarries of her farm walks. But not this special day when she spied a perfectly preserved outer shell. "Oh my!" I bet she sighed, whispering, "look, a treasure, a treasure!" To the hilltop they went, this turtle shell and my oldest sister.

As I recall, the Earth Mother's great give-away, this shell, sat on the air conditioner at the farm house for years. One day it caught Little Sister's eye and heart, and darting past our guards of censor she shyly whispered "Mary, may I have this shell?"

It was a bold request, she knew that, but it was based on need and want too powerful to silence by even me. Being drawn by life and consciousness from deep within her own shell of intricate defense, Little Sister was desperate for meaningful connection. Reflection of meaning, protection not connection, the shell bull's-eyed to her being. In her moment of great risking Little Sister was planning a give-away herself, though. That is her nature.

"Yes, you may have it," Mary answered with a barely noticeable flinch of pain and a tiny moment of hesitation. Was it the loss of the shell

or the fleeting glimpse of Little Sister, in her great need, that stabbed Mary's loving heart?

The deed was done, the treasure was carried Southwest, reverently in the hands of an ailing woman, me, and the mind's eye of a child, Little Sister. A child disembodied by old, old terrors. We were not strangers to each other, the two of us, but we were disconnected in unfathomable ways or non-ways. Ah, to reconnect by sharing the shell, the awareness of shell. Who could have known its deepest meaning for us all? Only time and recovery would tell.

Years later, after there had been much healing, another give-away was planned. We sat around the kitchen table, David and me and Little Sister. More connected than before, We had come to know her name is Heather. Newly co-conscious with me, Heather was especially expectant. I was holding the turtle shell in my hands and she was soaking in its shape and texture, the pattern of lines and circles on its back. It had always felt good to hold.

"I don't think you have *let go* yet, Mom," David pronounced perceptively. "Are you sure you want to give this shell back to Aunt Mary?"

I smiled at his awareness. "Oh, I'm sure I want to make a rattle for Mary with the shell, but what I am *not* ready to do is give up the shell — I mean the wholeness of this shell. A broken shell is a terrible thing. What if it shatters when you drill the holes? What if it splits into pieces? I'm not ready for that. That scares me."

We both sat quietly and looked at each other and knew that the choice was there. I said a prayer to the spirit of Turtle that we do no harm, meaning only to honor the shell, and handed it to David. It was to become the Little Sister Rattle, a birthday present for Mary. "Life and loving are risks — let's

do it."

The drilling began and I was busy whittling away at the oak sapling that was to become the handle of the rattle. We couldn't watch the drilling. Like our recovery, it did not go smoothly or as we had hoped. The outer covering of the shell, its beautiful coloring to which Heather and I were so attached, began separating from the bone undershell. We said nothing as We watched David silently and gently remove all the intricate sections of pattern and color and then set them aside. Finally he said, perhaps pressured by Heather's imploring stare, "This will work out better, Mom, because I can glue the outer covering back on the shell. It will be more permanent and less likely to chip this way." Heather relaxed her knotted legs and my clenched fists. David was intent and soon he had a totally bare, bone-white shell in hand and a puzzle made out of brown and gold transparencies lying on the table top.

He was drilling again. Working with him was a pleasure and I was engrossed in Our whittling and began to notice snakes crawling up the handle. There was silence. The sound of no-drilling brought my eyes up and into David's. He held pieces of shattered turtle shell in his hands. Heather thought she saw a million tiny pieces before she dove into the depth of my throat. "Oh, Davie..."

I sat speechless. He, too, said nothing and only studied the ruined pieces in his big, gentle hands. Finally David spoke. "You know, a cow must have stepped on this turtle, cracking its spine. That's probably what killed it..."

Damn mean cow! A cry echoed through my ebbing awareness of Heather. "...because it did not shatter along the natural spine lines. It's as if it had some deep unnatural fault in it

caused by trauma. My hunch is that it shattered along that fault when I touched just the "right" spot with the drill."

Having known shattering from the inside-out, my own ancient despair and deep sadness welled up in me. Even though I had been diligently mending myself back together for years, months, weeks, days, the apparent defeat, that moment, seemed oppressive. It was as if brokenness was all that I knew...would ever know, as once again in her despair, Heather wrenched from me, tumbling down into the pain of her loss, Our dissociation. She was missing for days and all I could do was whittle snakes in the dry prayer stick of her absence.

David's confidence, however, was undaunted, and by the hours, into days, he mended the shell's tiny fragments with his keen eyes, patient hands, and dedicated will, back to wholeness. Seldom have I felt more connected as I watched him teach Heather what he had learned watching me heal. Patience is a lesson we are all learning well, which has much to do with this turtle shell—perhaps that is our gift—the mirror of watching David glue it all back together again, painstakingly-tedious task that it was. She is also the Humpty Dumpty Rattle. There is powerful Circle Medicine in this turtle rattle. Reconnected, Heather and I knew more than ever, that returning it to Mary was good. The Little Sister Rattle was coming into completion.

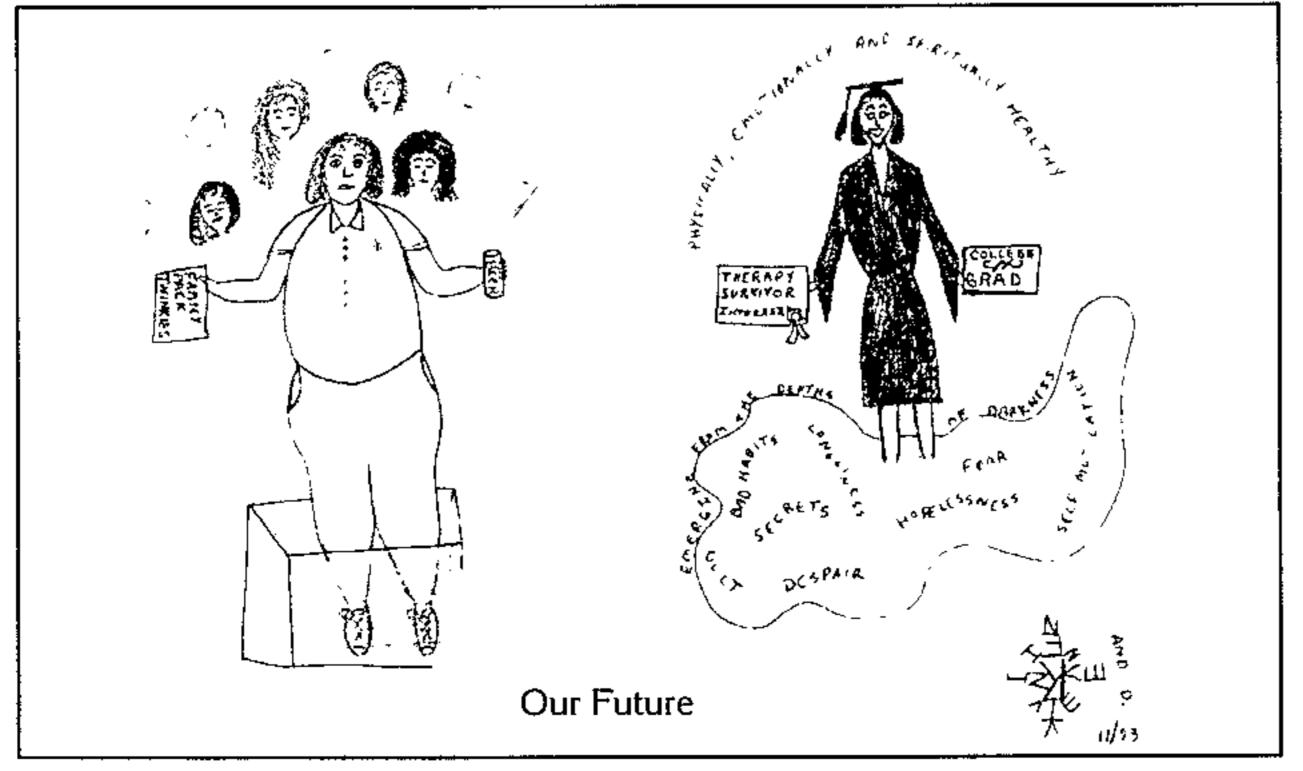
This had not always been Our Intent. The day that Heather had asked for

Mary's find she had planned to give the shell away herself. She hoped to give it to our psychiatrist, Dr. T. In his office, on the wall, an assembly of three pictures had always inspired her. It was a series of poses of a turtle emerging from its shell. A turtle's shell that looked exactly like the shell that Mary had found. With the gift of hindsight I now believe that Heather had hoped that if she gave the real living shell to Dr. T., he might wake up and notice how desperately she was struggling to emerge from her own shell called Carolyn. (That is me.) She hadn't counted on getting my attention through her great risk of asking for the shell. Or by any other means...but that is what happened and is our great healing gift. Even in the severe brokenness of those days, there was wisdom in Our system of selves and a knowledge that giving this shell away to Dr. T. would have been a great loss and more needless separation. We did not. Encased in his own hard shell of a closed mind and heart, Dr. T. could never have appreciated Our sister shell. Sisters were a construct and concept he refused to know in Us.

Little Sister's shell sat on the shelf by Our bed for years, well-loved and honored. Powerful Awareness Medicine is in this turtle rattle for those with honest, loving hearts. Beautifully complete and well-intact, the Little Sister Rattle was proudly presented to Mary. Our own gift is finding Our own completion, selves intact.

Recovery continues.

<u>MV</u>



One of Us

By Suzanne

It was Christmas time, a few months prior to my discovering internal complexity. I was doing well for me — following a list; keeping within a budget; coping with the noise, the flashing lights, and the long, boring lines — but I was developing a terrible headache and becoming increasingly more tired and disoriented, confused, overwhelmed, and frightened at my change in demeanor.

I centered myself and decided to rest and treat myself to a peaceful lunch. It was mid-afternoon as I approached the restaurant, packages in tow. The hostess looked up at me above her glasses in a snotty, superior way and asked me dryly, "How many of you?"

I answered quickly and clearly so as not to irritate her any more than I apparently had, "There will be *one* of us."

"What?" I screamed in my head. "What did you say, 'one of us'?"

My reply tickled me and caused me to giggle to myself, my nervousness vanishing as I followed this bad-assed, purse-lipped, over-splayed, over-made-up puny little creature. My answer became increasingly funnier to me.

By the time we arrived at my designated table and she pointed at it firmly with her long, bony arm and huge red claws, I was in an uncontrollable state of giggling. She was most disgusted with this forty-year-old preteen giggling for no apparent reason.

And as you might imagine, her impatience with me caused me to giggle even more...to practically roar with laughter. She abruptly turned and walked away rather briskly.

Well, my lunch was more delightful than peaceful as I watched Ms. Bad-ass-pursed-lips directing and pointing, her every jerky movement increasingly hilarious to me.

Feeling guilty and ashamed about my behavior, I gathered all the composure I could muster up and as I left the restaurant, I smiled sweetly at Ms. Bony-arm, thanked her politely and wished her a good afternoon.

"Humph! Same to you," was her icy answer.

Oh no...here comes another giggle!

 \underline{MV}

Obsession With Dying

By Rachel Rae, Etc.

o outside persons and most of the time to us "insiders," we seem to have an entrenched obsession with dying. There are times when literally that is all we think about. Recently we have begun to understand this cycle within ourselves. We feel certain our insight will help others like us.

The obsession and self-destructive behavior is triggered by a very specific condition within our system. We tried for years to connect it to specific incidents, but it didn't seem to fit anywhere. Nothing seemed to help. Then, with Jehovah God's direction, we realized the connection:

Simply put, our obsession with dying is caused by huge amounts of pain and anger that we pack inside ourselves. From things in the present and the past, we stash away bits of pain and anger. People have been amazed at how well we "cope with" horrendous things, only to try to kill ourselves over seemingly "small" things. The "small" thing was the last piece of pain and anger needed to tilt the scales. The horrendous thing we endured merely laid the foundation for the build-up. This process of collecting and storing pain and anger is totally unconscious.

We know two reasons why we developed this habit and still hold on to it. One is a terrifying and intolerable fear of losing friends, our spouse, or people in our life. Second is the incredible fear of being severely punished for expressing anger or admitting emotional pain.

When the anger build-up is completed, it triggers and empowers our main aggressively-suicidal personality. The buildup is a signal for her to do her job, and she is very loyal and brave that way. We have always been able to "feel" her coming to do this. At the same time, the gradual anger/pain buildup weakens all of our other personalities to the point where they become passive and unable to work together or intervene. Sometimes this cycle takes months. However,

lately it has been only a matter of days before it is repeated. Interestingly, this buildup creates physical seizures within our brain that brain tests are able to detect.

In an attempt to defuse this incredible amount of internalized pain/anger, dying has seemed the only solution. That's because, at that point, we are totally unaware of why the pain is so severe and what to do about it. It is *not* (as many keep telling us) a matter of us actually giving up; it is more a total inability to hold anymore...like a pressure cooker that has too much pressure and explodes.

Our internalizing is done so quickly and automatically that often we don't know something has upset us or made us mad. We never feel these feelings before they go into the collection area. It takes pretrained, patient, kind, enduring, and strong outside support persons to help us bring the buildup out. People who are willing and able to listen non-judgementally, non-critically to confused expressions of mixed-up anger and pain, and not take it personally or lose respect for us because of it. They must be able to accept that this defusing process will save our life.

We have used self-torture and self-abuse for years to defuse this pain and anger, and we need a support system of many people to help us change this process. That is the seemingly-impossible part.

It takes a very loving person to see and experience these pain/anger releases for what they are and still love and respect us. We cannot change this process or circumvent it at this point, without this help. Our life is in great danger, more than ever. Our therapist is wonderful, but cannot be our only support person. She is not always available.

How does one find others to help? Convince others that it is worth the effort on their part? Many people have stopped helping us because they are "sick of" or frustrated by our self-destructive behavior. Many seem to have given up, but we aren't supposed to get discouraged and give up. (Go figure that one!)

But finally we are learning about the process, the set-up that causes this desperate behavior. It is our earnest hope and desire that someone else like us out there will be able to realize their cycle without going through all that we have gone through, before it is too late for them. You are not alone.

And we'd like to close with a beautiful saying we read at a hospital:

"No matter what your past has been...you have a spotless future." Wow!

<u>ΜV</u>



Letters

A question for MV Readers:

Most of the time when I switch, I sneeze once just before I switch. Is this happening to anyone else? I haven't read anywhere of this before. Am I alone?

By Loretta H.

Could people please make suggestions on how to deal with abusing or formerly-abusive family members? The obvious thing to do, of course, is to avoid them. But I can't be the only person who finds this impossible. For one thing, economic circumstances have forced me to live in the same region as several relatives, and in the same city as my mother, who hurt us very badly. For another, my younger sister (who may be multiple) has a two-year-old son. My sister's husband is dying of cancer and she plans to move back here. Our mother is already allowed to babysit my nephew, although I have talked with my sister about the possibility that her son will be abused. My sister has not confronted the severity of her own abuse, and says she just doesn't

believe it will happen. It is true our mother seems to have mellowed, but I do not think she has changed — there is a difference. If my sister moves back here, Mother will have much more contact with her grandson.

Another problem is that I go into automatic guilt and obedience anytime my mother needs or wants something. My feelings and thoughts cannot seem to experience her as dangerous for me at the same time.

I do not tell you these things to ask personal advice. It has just occurred to me that I can't be the only person in the world experiencing such dilemmas. It is not my job to force my younger sister to do anything. I cannot make her do anything. But for myself, I wish I lived far away from here. And for my nephew: I wish he could be the first child in our family free of the scars of violence.

I would be interested in knowing how other survivors and in particular other multiples sort out such things, or decide to act or not act upon them.

Sincerely,

Teresa and Ann

I am MP and have been in therapy for almost two years for MPD. For 40 years I lived in a cocoon. In the last two years that cocoon has been cracking and spewing out horror, pain, rage, grief, and data. I feel as though I am coming full circle. The majority of my past has been revealed to me and I have met most of the ones living inside of me. We are completing our circle. Our reality has been survival. And now I find myself with a few hours each day with what we call non-survival time. I don't know what to do with a reality that is not limited to survival orientation. We have started creating a world inside, complete with schools and stores and all kinds of things for me and my inner family. Right now our cocoon is open and we must take the next step, only we don't know how. Our therapist will help, but if there are any multiples out there who know some ways, Help!

What is it like to live in something besides survival-mode?

By W/S and gang

MV

Integration Phase II

By Artworks

They slept in Morgan's orange bear all night, so that they could be held in teddybear guise, close to my heart. I dreamed of them as I snuggled the bear in my sleep...six little shattered pieces of the child that I had been, come back like ghosts from my past to haunt me with scent, sound, emotion and pain. They were here now, and they were desperate for me to hold them, love them, to comfort them as no adult had comforted me back then.

In the morning, I lay quietly, moving only now and then to rock this fuzzy toy, stunned into silence by the amazing sense of presence in the bear. His eyes gazed into me with a longing that made me want to cry out with the pain of separation from them. Softly, I pressed him to my chest and welcomed them back home, back to the place from which they had been torn all those years ago, like little copies of me made in wild hope that some part of me could survive, in case the original me did not. They came to me eagerly, hurrying toward the comfort of my belief in the truth about my past that they brought with them. I exhaled as they merged with me—they like little old salmon, finally back through streams and rivers of resistance to nestle safely, come full circle, back to the place of birth...and I like the wounded Earth, gathering them back where they belong, healing myself by mothering my own. It was time to stop holding my breath.

When I looked back at the teddy bear, he was flat and empty, an inanimate object, and I was full and alive and at peace with myself, at one with my own history.

January Snacks

I'm having jelly beans onion dip with chips, hot tea, and diet coke. What are you having?

Revivification: Painless Memory Retrieval

By Susan Ford, B.A.

Susan Ford is a member of ISSD, CSSMP&D and is a member of the Los Angeles Women's Task Force on Ritual Abuse. Her story will be available in bookstores soon.

Is Wholeness worth it? Absolutely!

After nearly ten years of intensive therapy I am fused! And complete integration is imminent. How does it feel? Like a sigh of relief. So much less to deal with. I no longer have to deal with clashing parts of me causing conflict in my relationships and everyday life. No longer am I plagued with very real body pain caused by unprocessed memories. I am now able to have relationships with the people I care about in which I am consistent and present. And best of all, I can be all of who I was as a multiple, every moment of every day because I have blended all the parts of me that once were separate.

Until I experienced fusion, I was really afraid to hope that I could actually become whole. I was afraid I didn't have the strength to get through the seemingly endless, painful memories. I was afraid I wouldn't know myself, wouldn't know how to act...and what if I didn't like myself once all the parts of me blended?

Now that I can look from this side of healing, I feel very fortunate that I have had the opportunity to recreate myself anew; learning new ways of managing in the world, letting go of unproductive behaviors that worked in the past but no longer got me the rewards I was looking for, and having the opportunity to incorporate all of me into one package. Fusion is a simpler way to live and I feel more organized.

The good news is that I now enjoy a peace of mind I never before thought possible to attain. I feel more stable, more substantial, more real, more consistently *me*, and even though there are still some very sad parts to my life, I am able to deal with them in a very constructive, productive and satisfyingly-creative manner.

What I can share with you is that integration is possible and attainable. I am the survivor of multi-generational ritual abuse and a Project Monarch

mind control experiment in which I was exposed at a very early age to extensive torture and high-tech programming. My emotional, physical, and sexual abuse stemmed from my grandparents on both sides, my parents and brothers, my uncles, aunts, ministers, doctors, teachers, trusted leaders, etc. etc. The list goes on and on. But with determination, and finally during the last year an easier and less-painful way of remembering, I have gone from the survivor stage to what I now like to call the "thriver" stage. Despite the fact that I am fused and deprogrammed, since my abuse was extensive and spanned nearly 40 years, I am aware that I will probably be retrieving memories for the rest of my life. With this method I can now enjoy a satisfying life and continue my memory work without constant intrusion from my past.

I'd like to share with you this method of retrieving memories that has helped me avoid experiencing the pain, terror and emotional devastation that accompanies abreaction or flashbacks. This new method is called *Revivification*. Having spent nine years trying every other form of processing memories, I can tell you from experience this one really works!

The best part about Revivification is that when I was having flashbacks and abreactions outside of therapy, or when I was triggered into a memory by something in my environment, I was able to take out my notepad (I carry one in my purse), jot down a word or two that later jogs my memory about what triggered me, and then I am free to go about whatever I was previously doing. In short, I can now have a life without having to process memories all the time. And I can organize my time so that I can process memories when it is convenient for me to do so.

Here's the process of Revivification:

- 1. Keep a notepad handy.
- 2. Write down what in your environment triggered you into a memory.
- 3. When you get into a safe place where it is conducive to process the memory, begin by referring to your list. The next part

- takes a little time to practice in order to get it just right, so be patient with yourself until you are more experience; then the process will become automatic and easy.
- 4. Visualize putting the memory up on an imaginary screen in your mind. Focus on the visual aspects of the memory, then in your mind, taste any tastes, smell any smells that were present at the time, and listen for sounds, words, and phrases that were spoken. You do not need to relive the event and you don't need to re-experience painful emotions or body sensations. You went through the experience once. Now all you're doing is reclaiming the part of you that had to go through the event. You recover the memory so you know what happened and by whom. In short, you watch the memory as if you were watching a movie on a screen, and at the same time you are documenting it for your own edification. I have a special journal that I use expressly for memory work.
- 5. A word of caution. If you begin to experience body sensations, quickly write down, "my body is trying to abreact this memory", and distance yourself through dissociation from the body-sensation portion of the memory. The same with painful emotions; you can choose to act on the emotions, but if you were abused as much as I was, I had so many painful, upsetting memories to retrieve that I literally revisited the pain and sorrow by crying. It was exhausting and depleting. Now I decide if I want to cry, but don't usually choose to do so. Instead, I simply document the information and feel grateful for the painless method of healing!

This is a helpful tool to use when you are not able to be in a therapy session each time a new memory surfaces. The added bonus is that by the physical act of writing the memory out, neuron pathways in the brain are actually opened up and rerouted so that you have more access to your own brain capabilities.

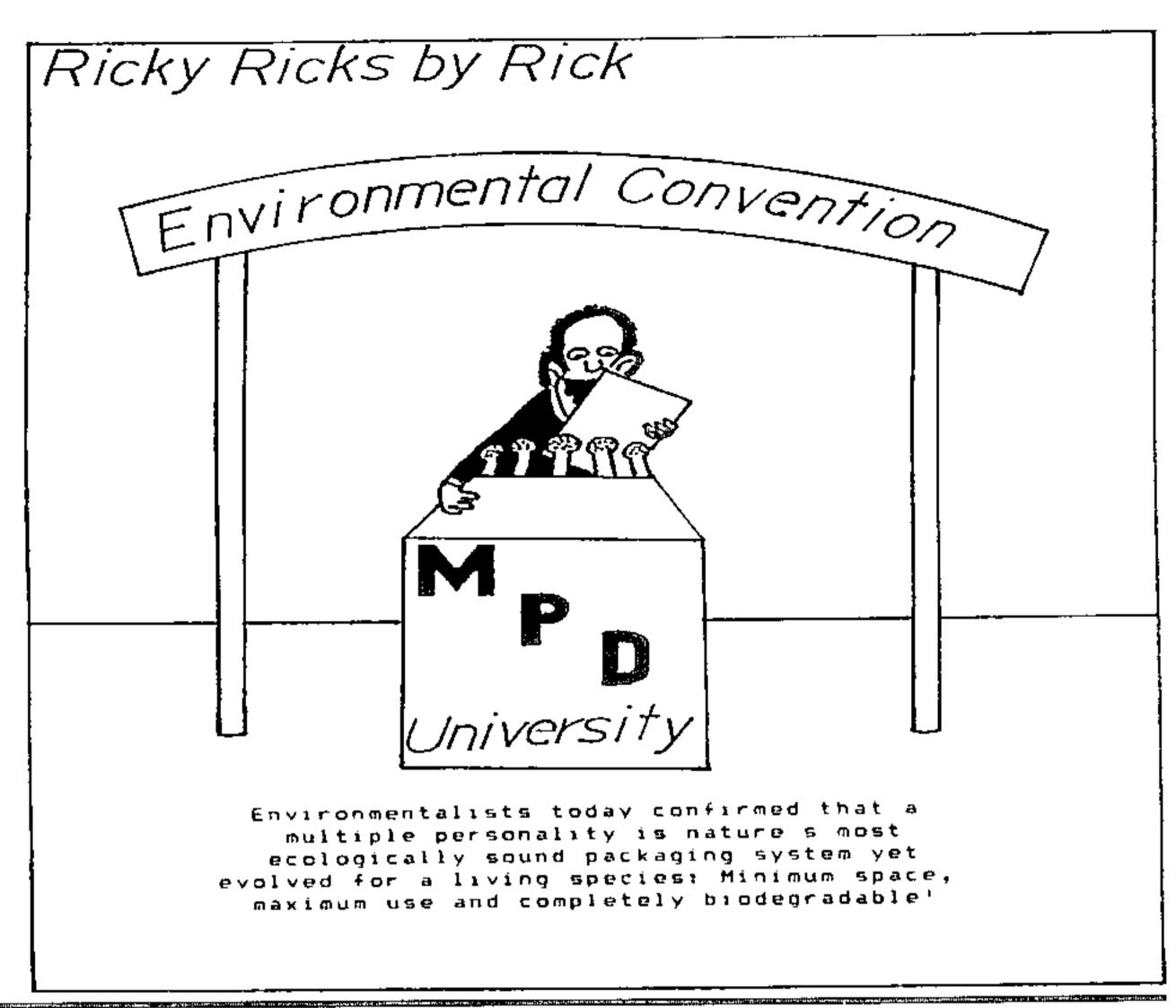
Revivification is no substitute for therapy, but certainly is the most helpful tool I've found on my journey toward wholeness and the pursuit of a well-rounded lifestyle.

I am glad I have the opportunity to use this wonderful method. I only wish I would have found it years sooner. It has made my life manageable and worth living! Maybe it can help you too!

Casa de la Vida

I need a new home. A place to stay secure, safe, and strong. One that won't fall down. I want a home where I can be, where I can think, and where I can live. A house of life is what I need — life breathing throughout the walls, floors, and windows. Where is my home, my habitation, my own den? Even foxes have holes, and birds their roost. But now I have no home.

By Linda D.



Books

The Fractured Mirror: Healing Multiple Personality Disorder

By C.W. Duncan, Ph.D.©1994 by Health Communications, Inc. Deerfield Beach, FL (800) 851-9100. 144 pgs. Softbound. \$9.95.

C. W. Duncan, Ph.D., a counseling psychologist, has written an informative, concise, and valuable book which describes MPD as a treatable disorder that can be overcome. Topics covered include the personality system, therapists and therapy, memories, shame, friends and family, neuro-chemistry, cult and ritual abuse, and common therapeutic issues. Dispersed in the book are three metaphorical stories to be read aloud to internal child alters. This book is intended for four groups of readers: people newly diagnosed or in early stages of MPD treatment; spouses and other relatives of MPD survivors; participants in various recovery programs (ACA, ACOA, and SIA); and mental health professionals and students starting their study of dissociative disorders. A brief list of additional resources and a bibliography complete the book. As Dr. Duncan says, "Let the journey into wholeness begin."

Safe Passage to Healing: A Guide for Survivors of Ritual Abuse

By Chrystine Oksana. ©1994 by HarperCollins Publishers, Inc., 10 East 53rd Street, New York, NY 10022. 388 pages. Softbound. \$15.

A survivor herself, Chrystine Oksana combines extensive reference materials and sensitive survivor accounts into a comprehensive and balanced manual containing information on understanding and healing from the effects of ritual abuse.

The book is divided into six sections, which organize the information in an accessible manner:

Preparing for the Journey: finding inner wisdom and strength, establishing internal and external safety, nurturing yourself.

About Ritual Abuse: characteristics of cults, ritual abuse, and violators; programming, indoctrination, and conditioning; destructive family systems.

Dissociation: aftereffects of abuse, finding lost parts, creating a healing environment.

Association: the Cornerstone of Recovery: safety, denial, memory, associating the experiences, beliefs,

physical sensations, and emotions; getting through the toughest moments.

Healing: relationships, sexuality, spirituality.

Resources for Healing: finding the right therapist, peer support, self-discovery tools, treatment options, resource guide, and bibliography.

This in-depth guide presents hopeful yet realistic approaches to extremely painful issue and difficult processes. Information and suggestions are provided that may benefit survivors just discovering their abuse and survivors who are further along in their recovery. Survivors are encouraged to read at their own pace and to take care of their needs. The survivor descriptions and narratives help the reader connect to the reality of abuse, the destruction from abuse, and the struggle of survivors to become whole.

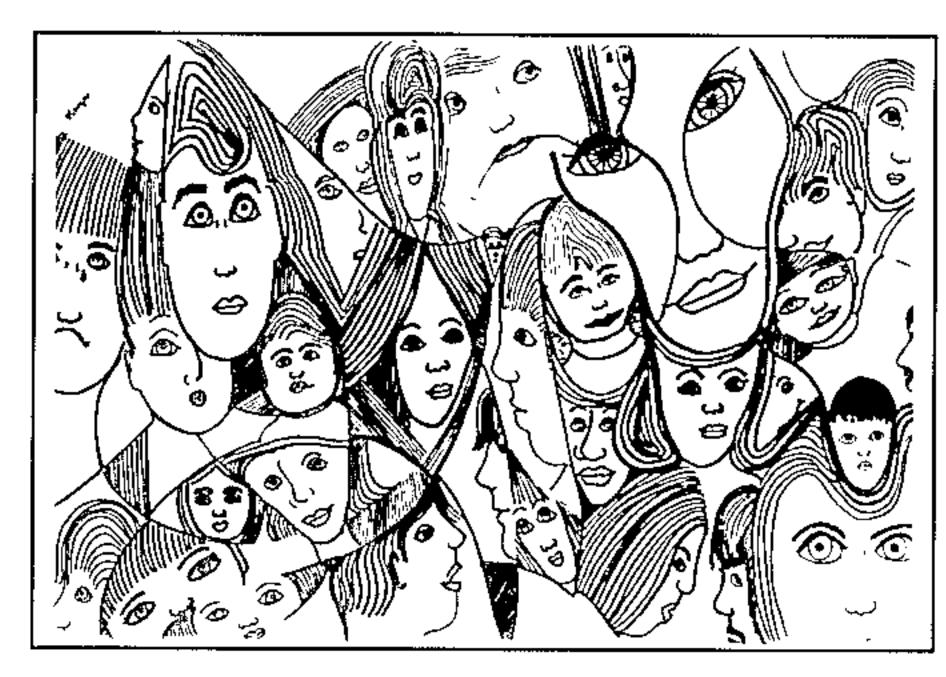
Many people will find support and understanding in Safe Passage to Healing — a welcome and helpful resource.

By A.V.

New MV Services!

MV TAPES FOR PRINT-IMPAIRED, and Back Issue indexes.

If you are not able to read MANY VOICES due to a physical disability, please get in touch with us. One reader with the same problem is having her friend make audio tapes of back issues, and we may be able to provide tapes for you. A few are already available. We can also provide indexes to back issues, Volumes I-V (1989-1993). Each index is \$1. Write to Lynn W. with your request, at MANY VOICES, PO Box 2639, Cincinnati, OH.



February 1995

What do you do when you're "tired of therapy", "don't trust", etc. Is this resistance? Denial? Or are you in unhelpful therapy? How do you tell the difference? ART: The therapeutic dance.DEADLINE: Dec. 1, 1994.

April 1995

The wide continuum of dissociation...What are your most troublesome dissociative symptoms, and what are you doing to solve them? ART: Your internal communication system.DEADLINE: Feb. 1, 1995.

June 1995

Triggers and abreactions. How you cope with sudden memories and keep flashbacks contained. Memory and doubt. ART: Draw the release & resolution of a difficult memory. DEADLINE: April 1, 1995.

August 1995

Getting to know your body. Physical awareness and healing techniques. Encouraging healthy sleep patterns. ART: Draw yourself physically connected and strong. DEADLINE: June 1, 1995.

October 1995

Grief and loss. How to ask for help and preserve hope. Can you help friends who are suicidal without being a "rescuer"? ART: Draw something you hope for. DEADLINE: August 1, 1994.

December 1995

Is wholeness worth it? Post-integration reports. (Partial-integration comments included.) ART: Treating your self(ves) with love. DEADLINE: October 1, 1994.

Share with us!

Prose, poetry, and art are accepted on upcoming issue themes, (and even on NON-themes, if it's really great.) DO send humor, cartoons, good ideas, and whatever is useful to you. Please limit prose to about 4 typed double-spaced pages. Line drawings (black on white) are best. We can't possibly print everything. Some pieces will be condensed, but we'll print as much as we can. Please enclose a self-addressed, stamped envelope for return of your originals and a note giving us permission to publish and/or edit or excerpt your work.

Subscriptions for a year (six issues) of MANY VOICES: \$36 in the U.S., \$42US in Canada, \$48US elsewhere. Enclose the form below (or a copy) with your check, and mail to MANY VOICES, P.O. Box 2639, Cincinnati, OH 45201-2639.

N	A	N	Y
V(CI	ES

Name			
Address			
City/State/ZIP			
Please check one:			
□I am a client □Professional/therapist □Relative/friend			
Subscription type: New Renewal Gift			
Start sub: Feb '89_ Feb '90_ Feb '91_ Feb '92_ Feb '93_ Feb '94_ Feb '95_			
ORDER NOW! Resource Guide - Many Voices/Multiple Choices #3. \$8 (while supplies last).			
Other			

1 year: \$36 in U.S.;\$42US in Canada; Elsewhere,\$48 in U.S. currency drawn on a U.S.bank. Make check payable & send with this form to *MANY VOICES*, P.O. Box 2639, Cincinnati, OH 45201-2639.