In This Issue:

Feelings in Therapy - Love or Anger?
Hospitalization...and more

Love of My Therapist

You have walked beside me
On this otherwise solo journey
Over mountains of sorrow and despair
Raging underground rivers of anger
Witnessed versions of horror
Endured nightmares
You never would have had
If you not walked beside me
On this trek of healing.

As we walk further apart
And I go on alone
I know you will be watching
And I will turn around
Every now and then
to make sure
you are still there.

Although my journey is still long
Know that I now feel the sunsets
That I truly smell the flowers
I hear the sounds of birds in my heart
The smile on my face is not a mask
And I now know what unconditional love is.

By JC

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Hospitalization Questions

By N. C.

The treatment that most people with mental illnesses receive is lacking in humanity anyway.

I think it is time that the whole field of mental health should be looked at and re-evaluated. Most people who suffer a disorder or have a mental illness are also financially strapped. They have lost their jobs, or are on a leave of absence, or are on assistance. They have had to pay exorbitant rates for years of treatments that may or may not have helped them. Try to get an insurance policy that is affordable in this day and age! It is hard enough when you have a good health record.

Those who have been lucky enough to have insurance already in place still have to pay the deductible first, and then the rest of the percentage insurance won’t cover. Twenty percent of $30,000 or $40,000 for a stay in the hospital is still $6,000 or $7,000. If the insurance company deems it to be a necessary stay, they pay their part eventually. If they say it is not necessary and you are already there, even against your will, you are then saddled with the whole bill.

That is just the hospital part. There are separate bills that the salaried doctors send, including the bills from crisis intervention, etc. To be stuck with these bills and feel re-abused does not seem to me to be right.

I thank God that I have not been stuck with too high a bill although they are starting to add up and pile up. However, after ten years of seeking help and only just recently being diagnosed as possibly MPD/DD, I’m told it may be years more before I’m well. No wonder I don’t have a positive view of the mental health field or the “helpers.”

If I could have back the money I have already put out to not be helped I could pay cash to go to the out-of-state hospital, buy a new car that runs, and afford the therapy I am being told will now help me because they finally know what the problem is. I would hope that my experience was rare, but I am afraid it is all too common, and has been worse for a lot of MPD/DD’s. The cost for little-to-no help is ‘way too high. Somewhere, someone should have to be held accountable for this.

But then, perpetrators are rarely held accountable for anything. Why should the pattern change now?

Yes, I am angry. I have a right to be. I learned that in therapy.

My Therapist and Me

We see our therapist every other week.

She is very good to us. At the end of every session, one (or more) of my child alters says “I love you,” to her.

The therapist always says “I love you, too – all of you.”

She hugs us and she brings the children a treat. (Usually 3 or 4 saltine crackers.)

I sometimes get angry in therapy. My alter, 14-year-old Jordan, punches his fist in his other fist and says “Bang.”

My therapist encourages him to express anger harmlessly.

Most of us love our therapist. When one of the Littles says, “I love you” to our therapist, and our therapist says, “I love you—all of you”... that really matters to us. Because our therapist really means it.

By Sally B.
5 Moments of Light

In these moments of darkness all is not well.

No one can console for they don’t understand.

And explanations are outdone and dried up.

In these moments of darkness I’m so sad and misunderstood.

And I just wish people would be Empathetic.

Sympathetic.

Not hateful, jealous, envious, petty.

I think to myself. “Man, am I destined to have these moments of darkness my entire life?”

Then I realize that for every moment of darkness there are 5 moments of light. Once I pass through the darkness to the light I realize that I couldn’t have gotten to that light without going through that darkness. Then I say, “It was worth it,” and I smile and sing.

By Dominique

MANY THANKS TO OUR FRIENDS!

Del Amo Hospital - Torrance, CA
Call Francis Galura: (310) 784-2289 or (800) 533-5266

River Oaks Hospital - New Orleans, LA
Call Martha Bujanda: (504) 734-1740 or (800) 366-1740

Sheppard Pratt Health System - Baltimore, MD
Call Kimberly Colbert: (410) 938-5078 or (800) 627-0330 x5078

Timberlawn Mental Health System - Dallas, TX
Call Tamara Jones: (214) 381-7181 or (800) 426-4944

Two Rivers Psychiatric Hospital - Kansas City, MO
Call David Tate: (816) 356-5688 or (800) 225-8577

Women’s Institute for Incorporation Therapy - Hollywood, FL
Call Larry Spinosi: (800) 437-5478

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If you know of clinics or conferences that need flyers, please call us!

We appreciate your support! —Lynn W., Editor

Affection Deficit

By Alya AKA Donna Holzem

Now I can see clearly that not only is there a deficit of affection in my life, but I am in tune with the part of me, “my insatiable one,” and all of me that needs and deserves affection. But I am sad to say that I am at a loss to know what more I can do about it. I have become polished at providing what affection I can muster for myself, but the kind of affection that comes from other human contact, the kind that mothers have to give, the kind children have for their mothers, the kind siblings have to offer and close dear friends can afford, is for some reason just beyond my reach. It is frustrating; I get such a minimal dose that it leaves me wanting more.

When I expressed this out loud I found myself speaking loudly, demanding that “I deserve affection! I’m entitled to affection just like everyone else! and I didn’t get it as a child, and I’m not getting it now, at least, not enough.”

I have often wondered if I could ever get enough. I give myself music; acoustic medicine. I call it. Native American flute, classical, music in a wide range of affections. I hold myself, a bear, or a small and large pillow, whichever suits my need. and then I rock, and rock some more. I think I could rock forever and it would never be enough.

The void that is my affection haunts me. If I were to name a fear, it is that I will take that void to my grave. I'd be best off cremated, my ashes left to fly high and far, and dance on a silo. Left to find a resting place scattered far and wide in the countryside, between farms and fields and brooks and rivers. To lay to rest and sink roots, or to soar on a delicate breeze, and be pulverized in a gusty gale until every little morsel of me is extinguished.

MV
Perception—Just a Difference of View

By Katrina, of Kat & the Girls

I thought I would write about a concept that once it was brought into focus really made a huge difference for us in functioning. It took time to put the pieces together, to realize how it worked. I am speaking of “perception”. And actually in my opinion, more people—multiples, singletons, even those persons that we call “normal & healthy”—would benefit from learning about it, and accepting it.

Take the example of the above image. When you look at this image: do you see a vase or 2 faces? If one person sees the vase, and another sees the faces, does it make one person right and the other wrong? NO. It just means that is how each person “perceives” the picture. Period. In my opinion this is a very important part of this concept. It just is.

If I perceive a situation one way, very likely it has some of my past experiences influencing me. This is one area that persons with DIDs can work on in therapy: if you find yourself having repeat situations, maybe it is how you are perceiving what the other person is doing, and that person may see it totally different.

A Mars and Venus Example

I will give a personal experience to show an example. I have a very good friend—happens to be a guy.

One time we were having an argument. We were outside. He told me to “Just go into the house!”

Ha! Ha! An “order” such as that will hit my “rebellious part” — being ordered to go into the house, NO WAY! I stayed right there, being stubborn, I do NOT take orders like that! That was MY perception of the situation.

Where his perception was totally different. He was feeling crowded, and I wasn’t giving him the “space” he felt he needed. In fact he felt I was even harassing him since I wouldn’t leave. (Of course if he had said I need space, I would have seen the situation differently...)

Ok, so that is an example of how two people can both be in the same situation and perceive it completely differently. I will also add at this point what I said earlier......it doesn’t mean one is right and the other is wrong, it just was. (Imagine the harmony that could be if people actually embraced this concept?)

So how does this pertain to a person with DID?

About 10 years ago, after being diagnosed, I kept having a similar situation happening that confused everyone, including my doctor and my therapist. Dr. Y was a very accepting Osteopathic doctor. He did what is referred to as OMT, or Osteopathic Manipulation, a very physical body work which can bring up body memories, and open up energy blocks created by traumas. I hope to write more about this type of work in the future, as well as they type of therapy my therapist Armin does, called Bioenergetics by Alexander Loewen.

They actually work well together if you have gifted & skilled persons as I was blessed to have.

One of our alters, Katie, a 6 year old, made her first co-conscious appearance at Dr. Y’s office. She became very connected to him, and at the end of our OMT session, Dr. Y always had to give Katie a few minutes and a good hug. Her feelings would be hurt if this didn’t happen.

Also, she was very sensitive to him. She would “perceive” that he was mad at her, and the anxiety, scared, and basically unpleasant feelings would be left for everyone to feel. No matter what we tried, we just couldn’t get that “icky” feeling to dissipate. It became such a problem, that Armin would call Dr. Y and see if he had any clue what was happening. Dr. Y wasn’t the only person this occurred with, but it was a place to try and focus to see what was happening within our system.

Finally someone realized that Katie was perceiving situations as ANY 6 YEAR OLD would! Despite the fact Katie lived in an adult size body, she had only developed to a 6 yr old’s progress! We looked up on the internet what a normal child’s development would be at age 6. (I never had any children physically so I felt at a loss to know what their development would be.) A few things were: “finds criticism or failure difficult to handle,” “views things as black and white, right or wrong, wonderful or terrible, with very little middle ground.” Also once they have perceived a situation a certain way, they tend to be very determined this is how it was.

So at least finally there was an answer to why this was occurring, which was a big part toward finding the solution. Armin worked with Katie on her development level, and Dr. Y did what he could to reassure Katie that all was fine. As time went on, we had fewer of these situations.

We have also made a conscious decision to do our own “perception” check when we feel very uncomfortable. It doesn’t mean that our perception is off—not at all. Being raised in a home with a father who was a “rageaholic” we had to always check the energy to “know if a violent storm was about to explode.” That has made us more sensitive to other people’s feelings and emotions. It was a matter of staying alive.

All these years later, it seems to irritate people because we feel stuff
before it happens, or when they try to hide things. It is just how our system works.

"It is up to each of us to get very still and say, 'This is who I am'. No one else defines your life. Only you do."

I think that is a very powerful quote, especially for someone of us who have lived through what we have. I read this in a little book by Oprah of a collection of her columns of "What I Know for Sure" in her magazine. This one she was discussing her dilemma about why she was going through a certain situation. Finally she realized as she said, "no one else defines your life." Many of us with D.I.D., became what we had to, in order to survive in our childhoods. Following this principle, I finally was able to stand up and say, to some very harsh govt. persons, "THIS IS WHO I AM, not who some have tried to say I am." Let me explain:


Over the last 5 years I have been dealing with 2 different major govt agencies. The first one lasted close to 3 years. My "housing specialist" was very cruel, very close to abusive. She did everything she could to make my life difficult. When I had to move, she made it so my options were extremely limited and I had to move to a very bad neighborhood. She continued to push me to the wall. Because of her abusive personality I was intimidated to the point I almost lost my housing, ended up paying 60% of my total income for a crap house full of mold, bad plumbing and police cars outside all the time. I almost died...due to all the stress my Crohn's was bad, and I got very ill with a dangerously low potassium level. I ended up in the hospital wearing a heart monitor.

But, it was the beginning of my really learning to stand up to one of the most difficult housing authorities in the country.

I finally got my disability status for a 2nd bedroom back. And I was finally able to get out of a house that made me & my cats very ill from mold and bad plumbing. I was starting to get over what the mold had caused—mainly asthma. I had a new "housing specialist" and a house back in my old neighborhood, very much like the one I had lived in for 14 years. Then after being ill with a virus for several weeks...I had another battle on my hands!

This time it was with the State Medicaid (OHCA). They were going to cut one of my most important medicines. They put me through an emotional hell for over 18 months.

I have a serious level of Narcolepsy, a sleep disorder, and have been on a high dosage of medication for many years. The stress of not knowing if I would have the medicine which enables me to wake up, be alert and basically have any quality of life, made my Narcolepsy symptoms worse than they have been in 20+ years.

The struggle went on and on. Letter after letter. Two of my doctors wrote excellent letters stating the seriousness of my need, as did my therapist. I followed all the procedures, did all the right stuff, laws quoted, right up to the State Secretary of Health. I was so frustrated. I couldn't understand why I had to keep fighting on and on for my basic needs. I went through all my savings, borrowed, begged, and cried. As my symptoms increased, I knew without my prescribed dosage of my medicine, I would just sleep 20 hours or more a day until I ended up in a nursing home! I also have diabetes, and now have early kidney damage due to the intense stress, and extra sleeping.

I couldn't get those in power to understand what this meant to my life and health. They were too busy coming up with "hoops" for me to jump through! (I actually have a taped message of their lawyer admitting to making me jump through hoops!) The last "thing" that really got to me was a letter to a State Representative who had been doing a lot to help me. I was made to sound like a drug addict.

I had fought this all my life. This letter also made statements about their concerns about me being on this dosage (which they had covered for 10 years,)They listed all these crazy symptoms I would develop which weren't true, and finally "potential for abuse... addiction... and the potential for drug diversion..." All these statements to make it sound like I didn't need what they had been providing to me for 10 years. They were NOT doctors, nor even had a full picture of my total medical situation.

Finally I reached the "Board Certified Neurologist." I had to travel about 4 hours total (another hoop) for the State to consider giving me the dosage MY OWN DOCTOR prescribes for me. Amazingly, this doctor took my evaluation seriously, and totally agreed with my doctor!

When I sent out the fax of that doctor's letter I finally was able to stand up and say, to some very harsh govt. persons, "THIS IS WHO I AM, not who some have tried to say I am." It felt good to finally boldly say my truth. However, I went through all of my savings, a good part of my mom's savings and more because they refused to give me my civil rights.
Setting Boundaries with Kid Parts

By ANC

I dreaded Thursday nights. Working as a full-time babysitter was wonderful. I had money for rent, food and, more importantly, for therapy. I had two emotionally healthy children to spend time with, and, more importantly, two nurturing parents to observe.

Thursday was the only glitch.

It was date night. Meg’s mom and Dad went out for dinner or the theater and I spent some extra evening hours with seven-year-old Meg and three-year-old Daniel. Daniel liked it. He had a particular fondness for the Chinese food we always ordered. But Meg was another story.

When separation time came, she’d burst into tears and cling to her parents and beg, “Don’t go. Please. Don’t go. Why do you have to leave me?”

They would give her extra hugs and kisses, but would eventually walk out the door.

Then all hell would break loose. Meg would start sobbing hysterically and would fling herself on a sofa and pound the pillows. If I approached her, she would turn on me and snarl. I gave her a wide berth. I didn’t want to shut down her feelings. On the other hand, her outbursts made the evening very unpleasant for Daniel and me.

I decided it was time to bring the issue up with Meg’s mother. I enjoyed the extra money, but was it worth it?

“Meg is trying to tell us something,” I said. “She doesn’t like you to go out on Thursday nights. Maybe we have to listen to that.”

Meg’s mom nodded. “I’ll talk to her. Thank you for bringing it up.”

The next Thursday night, there was a transformation. A calm Meg hugged her Dad. Then she was enfolds in her mother’s arms.

“Remember what we talked about.” Meg smiled. “I remember.”

She waved them out the door and turned to me.

“Can we order moo shoo pork?”

I was amazed. I couldn’t contain my curiosity.

“What did you and your mom talk about?”

“She said that crying and screaming wasn’t appropriate and that I wasn’t allowed to do it anymore.”

Was that it? All it took was to tell her to stop?

“Mom said that there was an appropriate way to miss somebody.” She took a piece of paper out of her pocket. It had a phone number on it. “Mom told me that if I missed her a lot, I could call her cell phone and she’d try to come home early. She’s going to the theater tonight so she won’t pick up, but I can leave her a message.”

And that was how it went. Before going to bed, Meg asked me to help her dial the phone and then whispered urgently into it while I waited at a discreet distance.

“Wake me up when you get home,” I heard. “And give me a hug and a kiss. Make sure you wake me up.”

This episode kept running through my mind. I had never seen anything like it in my own childhood. There, when kids misbehaved, they were bullied or beaten into silence. It made me want to champion kids, both inner and outer, to express themselves without fear of censure. But Meg hadn’t been bullied by her mother. Nor had she been manipulated. She had simply been directed towards more appropriate behavior. I wondered if it would work with inner kids too. It wasn’t long until I got a chance to find out.

I got triggered. I got in too deep describing some abuse at the end of a therapy session and found myself walking out the door swamped by a kid part in agony. As usual when dealing with kid parts in distress, I resisted the urge to dissociate and switch and gave her as much time and attention as I could. I went straight home to let her cry in safety. I let her be miserable in the background while I went about work the next day. I spoke kindly and gently to her, but things weren’t shifting. In fact, I found myself occupying a smaller and smaller corner of consciousness. All the rest was her pain. I hoped it would pass soon.

Four, five days went by. My hold on consciousness was shrinking. I made it to therapy and delivered the kid to my therapist. The session was just a rerun. Too much pain to be expressed in just an hour. When I got home, I thought about how unfair it was. All of my other parts were trapped behind this kid, deprived of their usual body time. I felt indignant for them. But more than that, I felt my own burden. I literally wouldn’t be able to make it through another week of work under these conditions. The situation was unbearable. It wasn’t doing anybody any good. I thought about Thursday evenings with Meg. I thought about Meg’s mom.

“This isn’t appropriate,” I said. “It has to stop.”

I paused to gauge her reaction. She was listening.

“I’m not telling you that you can’t be who you are. I’m not telling you that you can’t feel sad. I’m just saying that you can’t express it so hugely. Blowing out everyone else. If you do that, there won’t be anyone around to help you.” I remembered Meg whispering into the cellphone. I had to offer this kid another alternative. “But instead you can...”

I didn’t know what to say. Meg had been given the option to call her mother. I didn’t know what would appease this kid.
“You can express your pain another way. One that doesn’t take up all our resources. What would work?”

I didn’t expect an answer, but an image came directly into my mind. Smashing, ripping, all-out tearing destruction. Behind it was a vigorous anger.

“You want to rip stuff up?”

Clear assent.

“We can arrange that.”

And amazingly, all it took was one very thoroughly prepared and vigorously executed cardboard-box-destroying session. The next day I felt light and clear-headed. We were back. I didn’t want to lose this clarity, so I checked with the kid if she wanted another ripping session, but she didn’t seem to need any more.

It was the beginning of my new parenting style. I realized that my kid parts couldn’t be left floating in space with all of their pain; they needed structure and guidance on how to fit into a healthy family system. They needed a parent who reacted reasonably to what they did. The only parenting reactions they’d experienced before were being ignored or being terrorized. They needed a new parent who could give them the experience of being seen and reacted to in a healthy way. I, apparently, was that new parent.

After that, I took on a kid part who injected constant critical thoughts into my consciousness. Things like, You’re doing it wrong. You shouldn’t have bought that shirt, we couldn’t afford it. Don’t say that, you sound stupid.

I told her that she had to express her feelings differently. That she couldn’t make judgments from the sideline. She could take over whatever task she thought I was doing so badly. Or she could make appropriate comments. Those comments would solely consist of I statement about her own feelings. Needless to say, she didn’t take over much work. But with a lot of reminding, she learned to name her real feelings. Many of her statements came out, “I’m afraid.” “I’m tired.” “I’m anxious.”

It was a bit overwhelming at first to realize that I would have had to deal with a constant stream of emotional need. But all it took was for me to roll up my sleeves and apply some extra care and gentleness and naps. The payoff in serenity was more than worth the investment.

I have set boundaries with many, many parts since then. It takes presence and love and a flexible spirit to know how to handle each situation. However, here are some guidelines that you may find helpful:

1. Setting boundaries with a kid means that you have to step up and be a parent. Finding positive parenting role models in your daily life, in books, movies or therapy can really help. Meditate on what positive aspects of parenting you are ready to embody for your system.

2. Boundaries are best set in a calm and reasonable tone. When faced with a kid part who is ruining everything, it can bring up a lot of anger. A level-headed talk about concrete changes, however, is the best way to get results.

3. If you close down one avenue of expression for a kid, you have to open another. It has to be one that works for them. It might be convenient for you to have them write in your journal, but what they might need is a phone call to your therapist.

4. Get ready to meet some needs. Inappropriate kid behavior is often a mask for unmet needs. If you take away the behavior, you have to be willing to meet the need that’s uncovered. It can be hard work at first, but once you figure it out, the need is met and things get a lot more peaceful in your system.

Paths to Recovery

On this fifteen year long journey I have been down as many paths. Sometimes the paths seemed like dead ends, sometimes I repeated them until I had a well worn path, and coping skills to match. Paths became a common theme in my collages, each path another tour of my recovery. When will I find the final path? How will I know where the path will take me, or where the path will end? There have been so many paths already. Each path a new direction. Some dark and dirty, some well-maintained. Some like the yellow brick road; abruptly ending, but no ruby slippers and hopefully no place like home. The paths enlighten me, they just keep showing up in my work. The paths are my journey, my recovery.

By Donna Holzem
Speaking Out

By Ellen, for Keepers

It was 5:20pm on Friday December 02, 2005 and Keepers were at the art gallery all decked out and ready for our opening reception of our work. It was such a special feeling to see people who had promised to come actually show up to be with us on this night. It broke our hearts that others who promised to be there were busy with other things. But it was okay because we had the chance to speak with old friends and new friends and long lost relatives about the meanings of our pieces. The entire experience gave all Keepers a sense of worth and ability that we had never had before. We truly thought these were feelings no one would ever be able to take from Keepers. However, Keepers were so very wrong.

Tonight is the 17th of December in the year 2005. Just barely 4 weeks since our gallery opening reception and only three days since I called our state's Division of Children and Family Services to report a relative of mine as a child sexual abuser within my family, which is an issue that came to light shortly after our opening. The man we had to report is the son of Keepers' own perpetrator, who was a huge catalyst in our coming to live in multiplicity.

What actually happened was a cousin of Keepers saw our artwork and contacted me to tell me that her father (our uncle) had confided in her on his deathbed the horrible sexual abuse Keepers had endured early on in our lives. We were so thankful to hear that someone had spoken out on our behalf but we questioned why it took this cousin nine long years to contact Keepers about this deathbed confession. This heartwarming conversation led to others where this same cousin began confiding in Keepers that the son of our perpetrator was successfully carrying on his father's tradition with teenagers who are members of this family. When I began to speak of reporting this because she was giving me exact information and I was getting similar information from other family members, she pleaded with me to keep quiet about the situation as it would be difficult for the family to handle the truth coming out. I thought about her words carefully and knew it had to be reported, for the sake of the children in this family.

So, the report was made with the help and support of many people that Keepers love and respect.

Keepers are now in the repercussion phase of having reported the sexual abuse going on within this group called a family. A multitude of phone calls from angry relatives now haunt our waking—and even sleeping—moments. A nephew who loved Keepers now seems to hate us. Once again, our world seems so twisted and turned. In fact, if it were not for loving people like our SO John Michael and our old friend, Mike, and our spiritual advisor, Rev. Marigene, the repercussions would have so easily driven Keepers over the edge. That plummet to some unknown end truly seemed like it would be a welcome relief as we were the ones who opened up to the state this Pandora's box.

The truth is that in 1950 horrible sexual abuse was occurring within my family and the adults thought it more important to protect the perpetrators than the children who were enduring this plight. The year is now 2005 and the same sexual abuse is still occurring with another generation of adults protecting those causing harm at the expense of the children having to live through it.

Even though it has brought Keepers great emotional pain and soiled our one night where our gifts were meant to shine, no Keepers—big or little—is one bit sorry that we were told the truth of what is happening in today or that we took this information directly to the appropriate authorities. At least, we have hope that today's children in this family will be protected in ways that Keepers never were.

Keepers spent days trying to find the courage to make the report and we went through our own abreactions getting ready to make the initial phone call. After the report was made it only took hours for our family to begin beating us down with what we had done. The first night was a night from hell and we were blessed because people hung with us through those life and death hours. I can say that Keepers are so thankful that we did not know when we made the report how horrible the repercussions to us would be.

Still, Keepers know that all of this unfolded the way it did for a reason. The truth came to light only at a moment when we were strong enough to handle it and do something about it. Those who love us were there to stand by us but most of all Keepers found our own sense of empowerment as we did the report with the state agent. Not only are the children of today no longer victims but Keepers will no longer be victims either because we put the truth into action. This was the greatest Christmas Gift God has ever given any Keeper.

MV
Anger, Hurt and Fear

New therapy office - get me out of here

<table>
<thead>
<tr>
<th>Politician's office</th>
<th>Therapy</th>
<th>No place to feel safe or peace</th>
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<tbody>
<tr>
<td>Scary</td>
<td>Stairs, Noisy</td>
<td>Title</td>
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New therapy office in a title company office building.
Strangers walking around, smiling into the door.
Get me out of here.
They're all laughing at me
for using the elevator up one floor.
Too many abuses on stairs.

New therapy office—
major traffic route noise right outside the window.
Smiling therapist—
happy in her new chair.

Get me out of here.
Shaking and crying in corners of my mind—
too many abuses with cars not yet healed.

Two new therapy offices.
One for each day of the week.
One on Monday, another on Friday—
happy therapist has found such wealth.

Get me out of here.
Too many changes,
too much to get used to.
Will I ever feel safe?

New therapy office
Politician's creepy energy office across the hall
Representative speaking her own views
and not representing me.
Get me out of here.
She scares me too much.
I've got to hide
to escape her.

Second new therapy office
The one on Friday
No chair I can sit on with my back injury
No couch to sit with you to say the hard things.
Get me out of here.
There is no room for me.
This room is not for me.
Run, run away.

What happened to our old office?
We were there eleven years.
Where it was quiet and I felt safe
to heal my soul.

Therapist, are you trying to get rid of me?

By Victoria Light, 2005

Hospitals & DID

In our opinion, hospitals should only be used as a last resort when the clients' life is in danger. Our experiences with hospitalization have not been positive. The staff was not trained to handle flashbacks, dissociation or any of the things multiples do. It created more trauma which, ultimately, created more alters to handle it. We think outpatient treatment is the preferred method.

Right now, we are under 24-hour care outside the hospital to try and keep any cult people from hurting us until we are strong enough to take care of ourselves. Having people around all the time is driving us crazy sometimes but it has kept us safe on numerous occasions. The people we live with are very accepting of us and our needs and have even helped us get through some suicidal periods that in the past, would have resulted in hospitalization.

If hospitalization is necessary, try to select one that understands MPD and won't just medicate to stabilize and send them home. Hospital staff needs to be able to work with various age groups. It needs to be a completely accepting environment— not some staff are willing and others aren't. That's more rejection for the patient to face.

We've faced enough already. Hospitals can be helpful if staff is willing to accept whatever (or whoever) comes up in any given day.

MV

By Victoria Light, 2005
Surviving the Mental Health System

By Mary G.

I am a recovering DID and abuse survivor. I too experienced traumatic hospitalizations during my treatment. It still amazes me that I can refer to myself as a recovering DID and abuse survivor. My experiences were extremely traumatic and still haunt me. I have come to realize that if there were more hospitals and physicians that accepted DID as a legitimate illness my experiences would not have been so traumatic. I hope that even one mental healthcare provider can learn from my experiences. My family also added to this problem. Their perception of my illness was just that I had erratic behaviors and dramatic mood swings. They too did not want to hear what the real problem was.

The first really bad hospitalization occurred in October of 2003. My family decided that my behavior must be due to the drugs I was taking for the many physical problems I had and still have. In their minds it was easier to deal with that instead of the DID and what that implied. They tried to do an intervention. I can only assume that's what it was as I do not have contact with any of them and to this day I don't have a clear picture of exactly what happened. I do remember that their intervention felt to me like an attack. The people that so severely abused me were trying to hurt me again. I remember some shouting and the feeling of fear.

The next thing I knew I was in a psychiatric hospital and had no idea how I got there or what exactly happened. I was terrified! I didn't realize at the time that the treating psychiatrist had spoken to my family and believed everything they said about me. There were no drugs in my system at all and the staff kept looking for signs of withdrawal. I desperately asked for help from them, tried explaining about the lost time and how I truly needed their help in understanding what exactly happened to bring me to this place. The professionals believed that my lost time was drug addiction and nothing more. I continued to beg for help and some understanding. I tried to explain about the voices within which only lead them to believe I was schizophrenic. This was another disaster.

I arrived in the hospital in only pajamas and a robe. I needed some clothes, toothbrush, hair brush, etc. I contacted my family for help and they refused to help me in any way. They stuck to their drug addict story and I guess believed I needed tough love. I am also visually impaired and needed my sunglasses to shield my eyes as light is very painful. I had a stroke just a year earlier and I needed my walker. I fell a lot during my recovery from the stroke and my falling was blamed on my supposed drug addiction. How my family handled my stroke is a whole other sick story. My family, obviously disturbed themselves, still refused to help. They even went so far as to tell friends who asked about me and wanted to help me, they didn't know where I was. So I was very much alone and completely terrified. I was surrounded by so-called mental healthcare professionals who refused to discuss or acknowledge DID. Nothing was discussed with me.

I had to stay in this hospital for three days. I didn't understand this either. What had I done? No one would tell me. Maybe we were really crazy as I had always suspected. In order to get out we all knew we must play their game. We quit asking so many questions and participated in everything. It was a team effort.

The powers that be decided I was well enough to go home. This was a problem as I had no way to get home. Even if I could find a way I didn't have house keys. The staff told me that it was pretty clear that my family wanted nothing more to do with me, the staff couldn't help me, and so I needed to find another way home. The whole experience up to this point had me so traumatized that I could only remember the name and number of one person. This person was a woman who had worked for me in the past. I was so confused and embarrassed when I called her, but I was desperate. She was able to get house keys, went to my house and picked up clean clothes for me. She seemed very understanding, I thought. I also sensed her fear of me. On the way home we needed to stop and get prescriptions filled. One was a drug for sleep as well as schizophrenia. She would only leave enough for one night and she would come back each day to dole out more. It turns out that my family had found out she was helping me and told her some pretty scary stories about how disturbed I really was. This explained a lot about her behavior towards me and why she always spoke on the phone making sure someone knew she was with me, the lunatic. She chose to believe the stories and a friendship was lost. I couldn't defend myself. I couldn't confirm or deny anything as I still didn't remember or know what happened.

My family went around to my neighbors and friends and told them I was crazy and to be careful around me as I was unpredictable and couldn't be trusted. Only one friend stood by me. My family, including my daughter, disowned me. I was alone, scared and still didn't understand why.

Three weeks after my return home I had a medical emergency. I called 911 and was taken to the hospital where I had emergency surgery. I am extremely sensitive to some medications and I began hallucinating from the morphine I was given. I had been in that hospital before and they had my family down as emergency contacts. My family did their magic, a psychiatrist was called and I was then
given Haldol because again they didn’t discuss anything with me and only believed my relatives. Being in a psychiatric hospital only three weeks earlier totally discredited me. The Haldol sent me on a paranoid journey that lasted for days. When I finally was free from the Haldol, I found myself stranded to the bed and wearing a wet diaper. Then I found out my family and the hospital were working together to have me put away. I was kept there for two weeks and my one friend, Theresa, came when she could. She always spoke on my behalf and tried to convey to the doctors that my family was pretty sick and only wanted to keep me quiet. I had too many terrible secrets they didn’t want anyone to hear or worse yet, believe.

Again, no one would even consider or discuss DID as my diagnosis. None of them spoke to me about it. I think what kept me sane was Theresa. I spent Thanksgiving in the hospital feeling abandoned, alone, and thinking that maybe I really was insane. I was finally released in December and was told by the mental healthcare staff that I was in denial and that I didn’t know and didn’t want to accept what was really wrong with me. Apparently DID was not an option.

A babysitter was assigned to me 24 hours a day in the hospital and she was the one who drove me home. I was so alone and completely terrified. Upon my return home I began experiencing severe flashbacks, panic attacks, nightmares and the paranoia was brutal.

I still didn’t understand what was happening. I kept wondering what did I do? Was I a monster and just didn’t know it because I was insane? Maybe I was in denial. Maybe I should be locked up.

All of my medication had been tossed which included my antidepressants, sleep meds, etc. I could only assume that my family was responsible for this. I had five prescriptions from the hospital that needed to be filled. There was an antidepressant/schizophrenic medication, anti-anxiety medication and antibiotics for what I was hospitalized for in the first place. Being visually impaired, I needed someone to drive and as I really can’t see much I was unable to figure out how much money I had to pay for the medications. Theresa was working seventy hours a week, was a full time student and was having problems of her own. I knew I needed to find another person to help me. Theresa did the best she could but it wasn’t fair to lay everything on her shoulders. I contacted another woman, Roberta, for help. She came over and left to fill my prescriptions for me. She came back and told me that the pharmacy would only fill the antibiotics. Turns out my family got to her before I did. I learned, after many questions and days later, that my family decided that I shouldn’t be on any medication except for antibiotics. Again, I was not even given a chance. By this time I was really coming unglued. Roberta kept asking me if I accepted Jesus in my heart. She told me I was an evil sinner and I needed to confess my sins. Would this nightmare ever end?

I received a small disability income each month and my family subsidized the rest of my living expenses. The financial support was discontinued—which I had to figure out for myself. They never said a word and just left me stranded. Roberta told me that one of my brothers wanted to talk to me. I called Ed who informed me that everything is my fault (I always suspected all the misery in the world was my fault), I was fighting with my family and then he drops my financial picture on me. He told me that I needed to file for bankruptcy, I would lose my home and my cats would have to go to the pound and will most likely be destroyed. Ed also suggested I get a shower curtain and can as I will be homeless.

Is it any wonder I didn’t completely lose it? I eventually called my family to try and learn what was going on and better yet what happened that set this terrible nightmare in motion. My mother tells me that I just needed to snap out of it. She talked about what I was and was not eating. How did she know? Was she watching me somehow? I told her I really needed to see the psychiatrist and I needed help getting there, paying for it along with other needs. No help. The reason she knew my every move was because Roberta reported everything I did and said to her.

Eventually I got to the psychiatrist and relayed my continuing nightmare. I explained everything including my memory loss and confusion. He decided that I truly was a schizophrenic and not DID. I told him about the drug addict story. This was a mistake. Again, he didn’t even consider what I was saying or feeling, as my hearing voices and the paranoia could only mean one thing, right?

At this point I am starting to believe I am totally wrong about everything. That my instincts and feelings must be wrong. If all these people thought I was nuts, maybe I needed to start accepting this as the truth. I began to doubt my DID diagnosis. Maybe the trauma I remember from childhood isn’t real and I must have made it all up.

I spent the following year in therapy and I was only able to work on what happened that last quarter of 2003. DID was a thing of the past. I needed to snap out of it and get a grip. (If it were only that easy.)

During this time I’m still having flashbacks, panic attacks and nightmares. I am still losing time and I still hear noise and voices within myself. I feel I can’t tell the therapist. I know what happens when you talk about what is really happening.

Eventually I start believing in myself again. I find a new therapist whose specialty is DID cases. I met her and when I did I knew I was home. She understands everything I am saying. She validates my feelings and acknowledges what I had been through. Two weeks later I attempt suicide and again I am hospitalized. It’s hard to explain what happened. I’m afraid to explain because I know what being honest with the mental healthcare professionals can mean. The phone rings and it’s my new therapist who understands completely about everything. She knows I am not crazy or making up stories. There is only encouragement and understanding in her voice. This was very new to me. It was wonderful.

Continued on Page 12
Surviving the MHS System, Cont’d.

I am admitted to the same psychiatric hospital I was in the first time. I am terrified of the place. I know it requires us to play their game again and that we should not divulge any personal information. We need only have a good appetite, participate in their therapy sessions, smile and get along with everyone. How sad this is.

I notice a change in the staff. Some now acknowledge DID as an illness while others do not. There is dissension among the staff. I talk with one who understands what extreme abuse can do while another member of the staff tells me not to talk or even think about the past. At this time I no longer doubted what was wrong with me. I felt sad and such a waste of time to be in a place meant to help me and I couldn’t express myself for fear of what “they” would do to me.

I survived this stay, and at this point I no longer had contact with my family. I was now allowed to work on getting well without begging to be heard or believed. I was hospitalized again for two weeks. This was the last, and let’s hope, the final hospital stay I will have. This hospital was supposed to be one of the best, however once there, I was told they do not treat DID. I was told not to discuss it with the other patients as it may frighten them. I did not receive therapy except for daily group sessions. Again, we played the game and when it was over we went back to our therapist and Psychiatrist. I must add that the diagnosis of schizophrenia was by now a thing of the past.

Even though I am doing so well today, I am still terrified and have no faith in most of the mental healthcare people out there. Because I was not heard or believed so many times and was driven into a madness I try not to think about. I still feel afraid of hospitals and physicians. I have trouble understanding why everything happened the way it did. All I needed was some encouragement and to be heard. Instead I was made to feel bad and I could feel like a bad person on my own without it being confirmed by a psychiatrist. I was made to feel hopeless and was told I was a complete liar. In addition to my fear of physicians and hospitals I fear the police. I now know the police can haul you off for observation just by listening to a story told by another. I no longer feel I can go to them for help.

All the things and people out there that are there for my benefit are only scary to me. I know what can happen when they say they are only looking out for me. I guess I can also claim to be a survivor of the mental health system!

How I Handle My Gyn Appointments

By JoEllen

I had the dreaded annual physical yesterday and gyn exam—same doctor. I was so jittery and nasty to the poor medical assistant who, by the way, had her chance to even up the score with my flu shot and blood draw later. : ) I apologized before the needles and when finally feeling the effects of the Xanax. The medical assistants always get put-out when I refuse to be weighed, anyway.

Why can’t I get some level of victory over medical procedures? One of my alters was curled in a corner on the floor dressed only in an oversized hospital gown wondering why the dress she was given was so large and without buttons. Somebody else was hiding behind the door prepared to ambush the doctor when she entered. Another trembled on the table and yet another violent one was ready to tear the room apart piece by piece. While my physical body sat on the table trying to hold my head together and attempt to be nice to the staff...all the time wondering if they could hear all the chaos evidently only I was privy to.

Fortunately my primary care doctor and I have an agreement. I told her years ago about my mental health condition and how she could help. One important way for me was to have only the doctor in the exam room to do my gyn exam. The doctor has to account for the extra time it takes her considering she has no medical assistant to help her.

Last year though something triggered me and a child alter was suddenly in control after the exam and sat in the waiting room, not knowing what to do. When the doctor discovered I was in a dissociative state she sent me to the emergency room. That was not a good thing. So since that event I have included a list of emergency contact people so I will not be sent to the hospital. Doctors always think that a dissociative client is seriously disturbed and want to medicate the voices away, which does not work anyway. Currently I am on no medications at all.

This is how I have been handling medical appointments. I am constantly learning to speak up for myself and make the unpleasant experience more tolerable.

Heesh & Sheesh
"500 Milligrams of Cat"
Men Survivors on the Sidelines

By J.W.

I am so sickened by the double standard of what constitutes victimization between males and females. Obviously you see the headlines about male and female teachers having “consensual” sexual relations with their students, and yet it’s always the man who gets the harsh sentence. I don’t understand why women who use their authority and sexual power over boys are seen as celebrities and not True Predators. As difficult as it is for any victim of sexual violence to speak up and out for themselves, why are men who share equally in the suffering left with few outlets in which to grieve and commiserate about our stolen innocence? I quit talking to my own family about it because they collectively told me, “You just need to get over that; it’s in the past.” I was told matter-of-factly that what happened to me didn’t count.

I think this is the greatest injustice that men abused as boys, who never really grow into manhood, face. Men are not allowed to be victims. Once we have hair on our face, all the hurts of childhood are irrelevant to society. We are not allowed to cry without damn good reason and we better get over it quick. Be a man for Gods’ sake! When a little boy living in a man’s body finally finds the courage to step out from the shadow of fear he’s been hiding in through his bravado, and tells about his hurts and shame and fear we are practically looked upon as aliens. Women don’t want to be with men who have perceived weakness, and other men either shame you for being weak or attempt to victimize you themselves. Nowhere are there the resources for men to share our pain and humiliation and our tears.

I am grateful to have the income to get the therapy for the lost little boy in me. Yet when I leave the therapy session I had better cloak myself in armor for the cruel world will not show compassion to the man who they perceive to be invulnerable. Were I a woman, a flood of other women would knock my door down to assist me, and comfort me, and cry and support me. Yet as a man I had better expect to get tough or die. To look at me the first thought one would have is “scruffy redneck”. That is the persona I wear in order to keep others at bay, because showing weakness or tenderness is not respected and invites a challenge by the alpha males of this world, who feel the need to crush those they think are not a “real man.”

I just want the little boys who had to be so tough for me, when I was so afraid and helpless, to have the safe playground to enjoy with the other children who suffered in their own lives. A playground where everybody gets a swing and there are no bullies. I just want an equal resource for the men who are brave enough to tell their truth to be boys and not be locked out by our gender. Truly this is the irony of our victimization as men, we never get to be skinny, goofy, muddy, little boys who climb trees and eat bugs, and live as superheroes, ever again. The world won’t let us go back to a time when scraping our knee got a kiss from mommy and a boo-boo sticker, before we ran back out to save the world from cosmic evil only we could see.

Thank you for reading this and doing what you can to express this dire inequality and burgeoning need for all the little boys who still think girls are yucky, and just want it to be OK if they cry a little.

My Dearest Friend

Inspired by and dedicated to Sherri J. M

Rest in this
my dearest friend
though our times together
are fragiely few
you are held lovingly
in heart and mind
as I am ready
to go the distance; to be here to stay

Rest in this
my dearest friend
that when I see
you crushed by the agonizing torment of your inner world
though my heart breaks
it’s not to run away
but only to grow to love you more:
stretching in a different way
I’m here for the distance; I’m here to stay

Rest in this
my dearest friend
if when hugging you
it seems a bit too hard
it’s because I wish I could
like a mother her unborn child
keep you safe;
nourish you to grow
to birth
of all your gifts and potentials;
push away obstacles, dangers
and pain
as I get to go the distance, to be here to stay

Rest in this
my dearest friend
if there are new scars
on your tender skin;
if your face shows no memory of nor ability to learn
how to smile
I accept this as part
of going the distance; of being here to stay

Rest in this
my dearest friend
if I seem angry
how can it be at you?
You walk thru your holocaust
bravely clinging to life;
shredded fingers sitting
thru painful fragments
to find and hold fast
the joyful and good
for colder days;
I bow before you
as I get to go the distance and be here to stay.

By SAM
Inner and Outer Worlds

By Jane White

"Sufism is an ancient spiritual teaching. It is a path towards the Truth where the provisions are love. Its method is to look solely in one direction, and its objective is God."

I read an article recently, written by a Sufi mystic, who wished to convey some truth regarding the troubled, global world we now all live in. He speaks of our present world in which, he says, "the subject matter of unity and diversity must be at the foreground of our thinking if we are to survive and live harmoniously. The outer world is a product of the inner worlds of all who inhabit it."

Sufis teach ‘zikr’, remembrance of the unity of being. It is a process in which each part of ourselves is progressively awakened and realigned with the living spirit of the whole. They speak of "reclaiming the undivided self as a complete an integrated human being."

As I reading the statement above I was reminded that this is exactly what those of us who suffer from dissociative disorders are trying to achieve as individuals, through the process of psychotherapy and other healing therapies. That is not to say that we do not care about the troubled, external world in which we all live. But we do need to be vigilant about our self care first, as we are damaged individuals.

Included in the article is a wonderful Indian folk tale which I have reproduced here. It is a tale that the Sufi has used to depict the problems and prospects of life on earth in our times. But I think it is also a tale that speaks to the readers of MV about the experience of trauma. We know only too well about the struggle to survive and to emerge as one, and try to live in an internal harmonious state. We readers are well versed in this matter at a very personal level. Read the tale and enjoy it as a tale that depicts both our inner and outer worlds. Both need healing!

"It is told that a fairy chanced upon a doll's house. She could not resist the temptation to peer through the windows, and when she did, the scene was so lovely to behold, she decided at once, 'This shall be my new home.' But as she made to enter a problem arose. The front door was doll-sized, far too small for a full-grown fairy. She was a magical creature however, and after a moments reflection she arrived at a magical solution. The various segments of her body parted company and each went in its own way through a different entrance, being it a door, window or chimney.

But something unexpected happened. When the fairy's organs and limbs converged in the dollhouse, they no longer recognised each other and began frantically jostling for space. A hand said to its arm 'Keep your distance!' The lung told the nose, 'I want nothing to do with you!' In short, chaos prevailed.

Then suddenly, above the din of shrill accusations and growling threats, a sweet voice arose. It was the voice of the heart, the organ that had once linked them all through the warm pulsation of the fairy's lifeblood. 'Brothers and sisters listen! We are each different, but we are all part of a single whole. Remember...re-member!'

Hearing these words from the heart, the spell of forgetfulness was broken and the sundry pieces began reaching out to each other. Slowly, out of the shambles, the fairy's body resurrected.

As she woke the fairy found, to her endless delight, that she knew herself better now than ever before."

Therapy

Years ago I met my new Doctor/Therapist at the time

I knew nothing about being a survivor

I did know I had terrible memories of awful things that were done to me

I forgot days and weeks I had strange, painful sensations in my body

my husband said I had so many different "moods" that it was hard to relate to me

I felt ashamed, betrayed I believed I was bad

the worst person in the world not worthy of life

this doctor completely changed my world

she helped me understand who I/we really were and the why, and the how we're still working together still discovering new things and now not only do I know of survivors I am one

By sjs

MV
Part of the Whole

When strangers look at me
A single person they see
With quirky behaviors
Oscillating moods

Maybe to a few,
Josie is the host
The one they see most often
The others are but oddities
To be ignored and forgotten

When I look at me
Multiplicity I see
All parts forming a whole
A complete picture

Each part longs to be understood
to be heard as she should
To be acknowledged
Accepted and loved

Each part in reality
A feeling or memory
Left behind
Disowned, disavowed

Each part has a piece
Of the story to be told
As we share our pain
We approach a whole

Is the whole the sum of the parts
Or is each part, part of the whole?

By Josephine

Books

**Dialogues with Forgotten Voices: Relational perspectives on child abuse trauma and treatment of dissociative disorders**

By Harvey L. Schwartz PhD © 2000
Published by Basic Books $47 US, $70.95
CAN, 451 pgs + notes & index. Hardcover

This belatedly-reviewed book is an important guide for professionals, especially those working with the most severe abuse cases. I don't recommend it for survivors due to graphic descriptions of abuse and extremely difficult material. But health care providers who hear what they can't believe is real may benefit from Dr. Schwartz' candid descriptions and the techniques he uses to treat the severely traumatized. He addresses in detail the extraordinary challenges of working with these individuals while maintaining appropriate therapeutic boundaries. Three sections outline the process of discovery and recovery: Part I. The Landscapes of Dissociative Survival, Child Abuse Trauma and Social Complicity; Part II. Restoration of the Traumatized, Dissociative Self, and Part III. Survival, Transformation and Transcendence. Content ranges from dealing with hostile alters to traumatic reenactment and much more. This book won the ISSD's 2003 Media Award, and deserves a respected place in the training of therapists working with survivors of extreme abuse.

**Responding to Physical and Sexual Abuse in Women with Alcohol and Other Drug and Mental Disorders**

Edited by Bonita M Veysey, PhD and Colleen Clark, PhD. © 2004 Published by the Haworth Press 200 pgs + index. $49.95 Hardback, $29.95 Softback.

This book explores efforts to address the significant lack of appropriate services for women trauma survivors with co-occurring mental health and substance use disorders. Experts describe the services integration programs of nine participating sites that address the multiple needs of these women. Find useful strategies for integrating services that are responsive to the strengths and needs of the individual as well as the community.

The book offers tips, solutions, and possibilities to mental health professionals, substance abuse professionals, and domestic violence professionals, and even patients and/or clients searching for support.
MANY THANKS FOR YOUR WRITING & ARTWORK!
Your creative contributions make MV a comforting and useful resource for people recovering from trauma and abuse. Please send more!

Lynn W., Editor

April 2006
Share your experience.
ART: A comforting scene.
DEADLINE: February 1, 2006.

June 2006
Family Life: Relationships and communicating with Parents, Siblings, Spouses/Partners, Children.
Can you create a "family" for healing?
ART: Your extended family.
DEADLINE: April 1, 2006.

Under the Cover of Winter, by Donna Holzem

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.

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