

MANY VOICES

WORDS OF HOPE FOR PEOPLE RECOVERING FROM TRAUMA & DISSOCIATION

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In This Issue:

Coping with Suicidal Thoughts, Guilt & Grief.

...and more...

Look

If you don't look up...
You will never see the bird's nest
high in a tree...
Or bright blue skies with
kaleidoscope clouds...

I have given to you a beautiful
day..
Don't let it be hidden in mists of
gray...

You will never see crystal raindrops
on lacey branches...
Or boughs of evergreen dancing
gently in response to the wind...
Or leaf buds that look now like tiny
bandaged thumbs before they
unfurl their beauty...

Look up not just with your eyes
but with your heart...

I beckon to you with orange
sherbet sunsets & arms
full of stars twinkling with beauty
in the darkest of nights...

My laws guide all of creation...but
you are free...because I want you
to freely come to me...

I understand your anger...your
pain... but it does not change my
love for you...nothing ever can...

Forever & ever...
You are my precious child.

By Marguerite

MV



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I Come From God

By Marguerite

For many years my husband and I have taught the Nursery 2's and 3's Sunday school class at our church. The lessons for October were "We thank our God for creating our beautiful world and for the wonder of oceans, fish, birds and sea shells we find on the beach.

We decided to have the children make a take home art project using construction paper, felt fish, cotton ball clouds and small sea shells.

When we visited our son at his beach home, we were hopeful that we could find the sea shells that we needed for our Sunday school class. We watched as the ocean waves tossed its stones and sea shells on the beach, only to snatch them back in a few moments.

I dashed about searching for unbroken shells. Much to my dismay, I found only three whole sea shells! My husband had collected ugly, large, broken, stained sea shells, and put them in a bag. None of them were suitable for our Sunday school project.

The next week, just before we left for Sunday school, I took my husband's "misfit-shells" out of the tote bag. But what was this? There was a second bag full of hundreds of small, beautiful sea shells...all whole...not even one was broken! Where had these shells come from? Who could have put them there? It was as if God had seen our need and abundantly provided a "mini miracle" The children made wonderful sea shore masterpieces. "This is for you Mommy!"

Later, I found out that without telling me, my son had put the bag of beautiful sea shells in our tote bag. If I had known that we already had the sea shells we needed for our art project, I would have urged my husband to throw out his bag of ugly sea shells. But we had kept those broken shells, and I had given the bag of "misfit"-shells to our sweet, loving 5 year old granddaughter, Bethany Marguerite.

After our Sunday school class, my husband and I had taken the pretty sea shells, the ugly sea shells and the other supplies we would need to our grandchildren to make their own sea shore masterpieces. They had lots of fun and were very pleased and proud of what they had created!

The next morning, I found Bethany sitting at the kitchen table with the bag of ugly, stained broken sea shells in front of her. As I watched, she carefully took each ugly sea shell out of the bag and drew a cross on it. When the bag was emptied, I asked, "Bethany, Why are you drawing a cross on all of those ugly, broken sea shells?" Her answer was wise and profound, yet innocent and simple. "They come from God!"

And that is all that I need to know. to believe. "I am worthy! I come from God!" And I thought of a Bible verse, "Come unto Me all you who labor and are burdened, and I will give you rest." Matthew 11:28.

Another Bible verse that I hold in my heart is, "For I know the plans I have for you, declares the Lord., plans to prosper you and not to harm you, plans to give you hope and a future!" Jeremiah 29:11

And as Bethany had found beauty in the stained, broken shells, God finds beauty in us, even when we feel ugly, broken, unwanted, unworthy, God calls us as His precious child. God treasures us. He is awesomely loving beyond our imagining! God will never leave us!

You are God's child!

Stand Tall!

Play with all of your heart!

Run with outstretched arms

***gathering life from the
warming sun the balmy breeze
and***

Hold in your heart...

your truth

"I come from God."

Pater Noster

pater noster
who in Heaven
should gather but three sisters
keening in a sacred

Hallowed

circle

Naming

long silent fears.

in open fields somewhere

between

Interstate 80 and

Kingdom come

living off sheer

Will

doing at last what must

Be done

in a place where

Earth is as it is in heaven.

older sisters still

Daily relearning to eat

Bread given us.

laughing, crying

over illnesses, family, history,

secrets, sad eyed photos

Forgiveness

of

sins

not of our doing.

talking all at once.

listening for once.

dreading the dim seeping wound

a muffled snap of gnarled

paternal trunks that

Lead us into temptation

of hatred and anger.

But we are delivered from evil.

though danger remains

We soothe ourselves

A Trinity

of saddened children.

for united we are

A kingdom.

The power.

of wind-quelled quaking aspens

And the glory.

of tall, wild grasses.

the plea of

our father

a distorted lament

done.

Forever.

By Faye W.

MV

MV

The DID Patient and the Dementia-impaired Psychotherapist

By Lee G.

For 8 years my psychotherapist was my anchor in the sea of life. Over time, however, I began to suspect he was losing his own mooring and that I was being set adrift along with him.

At first I thought I was the problem and that it was all my fault. It was I who did not remember what happened from session to session or who misinterpreted what occurred. When I spoke to him, and he responded only with a blank stare, I believed I had said something crazy. When I brought in a completed assignment he had given me and he behaved as though he did not know why I was bothering him with it, I questioned whether I had been told to do it in the first place.

After many such experiences, I realized that rather than my "usual" DID ups and downs, I was in a constant state of turmoil and that slowly I was sharing less and less with him, and that I was moving away emotionally. That was when I began to entertain the idea that perhaps it was my therapist who was having trouble.

I did not accept this possibility easily but rather found excuses for his behavior such as fatigue, normal age-related changes, family pressures, etc., and he did have good days along with bad ones. When on numerous occasions I called his attention to specific memory lapses, he vehemently denied any cognitive defects. I did so much want to believe him.

Yet following some very bad judgment calls on his part, I knew I could not longer deal with the situation by myself. Also, I became concerned that he could incur professional liability if he practiced while impaired, if in fact this was the case.

I turned to the local Alzheimer's Foundation for advice and read up on types of dementias. Also I got in touch with my former therapist who provided excellent guidance. Next I talked to a colleague of his about my observations. I did not want to get my therapist into trouble, yet felt he was in trouble already but simply was not

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—Lynn W., Executive Director/Editor

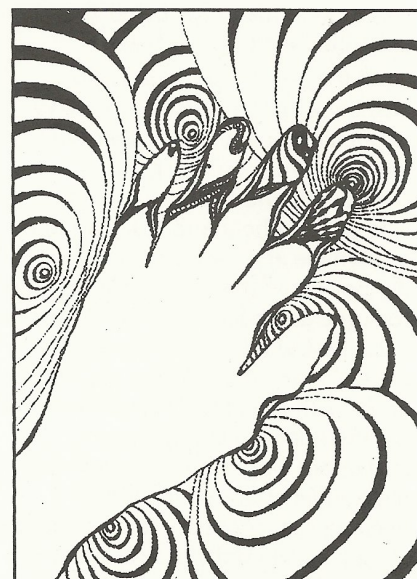
aware of it. And finally I acknowledged there was nothing more I could do and that in order to take care of myself, I had to terminate therapy.

My therapist believed I was simply running away from my own problems. I, on the other hand, felt that I was facing the basic problem head-on and in this case the problem was my therapist himself.

The pain of this separation has been immense, though perhaps more so for me than for him, since he seems consciously unaware of his decline. It makes me sad for him, for his other patients, for myself, and for the psychological community of which he is still an active member.

Psychotherapists are human after all. How I wish that were not the case.

MV



Ripple Effect By Kate Edwin

My Most Difficult Time in Therapy

By MySong

I would like to say that it has been easy walking through my trauma, but as you know, it would not be the truth. I have been in therapy for many, many years with a truly wonderful psychologist, who has walked with me every step of the way. He has always been there for me in my time in need, so I have been blessed in many ways.

In my late twenties, I met and finally married a wonderful man. A friend introduced me to him, as they were both firefighters and worked together. We had many things in common, one being we both wanted to travel. We also had great fun together. We instantly connected and it wasn't too long before we were married.

Since neither of us really had childhoods or even a teenage life, we were able to be like children and teenagers together, something I had never had with a man before. He taught me how to fly a kite and we played with stuffed animals in bed together. We traveled a great deal of the world with backpacks and two books and he taught me to snow ski. We had great fun together and both of us had very adventurous spirits. It was a good marriage, better than I ever dreamed I would have.

At the age of 45 I had my first flashback. I had no idea what was happening to me and neither did my wonderful husband. He took me to our church and finally to a man who was still in school and studying to be a marriage and family counselor. He did not even have his license yet. He took me as a patient, as he did realize I was having memories of sexual abuse. I didn't remember the satanic abuse with him, but I painted many of my memories, a strange way to remember, but I was starting to see the horrific abuse by my father. I became very anorexic, started abusing diuretics and laxatives, and got down to only 85lbs. I knew I was in extreme danger. He was pushing me to have

more and more memories and I was being flooded by them. He had no business keeping me as a patient, but he did. He finally put me into a hospital as I was dying from anorexia, and luckily for me his back ruptured and he couldn't come and visit me. Interesting how God has worked in my life. He found a clinical psychologist who specialized in abuse until he could recover and "help" me again. I knew deep down inside that this marriage and family council couldn't help me, so when this new doctor came to see me, I switched to him. It wasn't easy to change, but I knew I had to. That was not my most difficult time in therapy, by any means.

This new psychologist called Tom stopped my flooding memories and tried to help me with my eating disorder. It was a slow process of trusting and connecting with this new man, but he was very kind, soft-spoken and gentle. That was a must for me, as I was afraid of aggressive men. He told me many years later that when he saw my first painting he was horrified, yet I was so disconnected from my feelings I never showed any emotion at all. Neither did he at the time.

I have been flooded with terrible flashbacks, had body memories that have lasted as long as eight hours, auditory memories, taste memories, night terrors and nightmares. I've struggled with anorexia since infancy and still do on and off and have dealt with the most horrible memories imaginable. Well, all abuse memories are horrible. But I know even after all of this, none of these have been my most difficult time in therapy.

To put me through therapy, my husband, who was older than I was and retired, went back to work to send me to therapy. He had been a battalion chief for a local fire department and went to work coordinating a fire-science program and teaching four classes. He loved

his job and the fire service. He really cared about his students and they loved him. Because he lived so far away from his job, he decided to learn how to fly, something he had wanted to do his whole life. This gave him an excuse to do it. He loved flying and when he got his pilot's license he purchased an older plane. It was small and only had two seats in it, but we could barely afford this one. He would fly back and forth to work and he kept a small car at an airport near his job, where he would land the plane and drive a few miles to school each day. He loved it and it worked out well for him.

One day while flying to a meeting my husband got into a very bad storm over a large mountain area and flew our small plane into a mountain. The whole front of the plane was gone and so was my husband. At one AM the police knocked on my door and woke me up. I looked at them and said, "My husband has been killed, he got into a storm and flew our plane into a mountain." They asked me, "How did you know?" I said, "I don't know, I just did." I was devastated. We had been married for 23 years and he was the love of my life. I had no idea what I was going to do without him. I was only 53 years old. I knew my husband had died for me.

I cannot tell you what it is like to lose that kind of love. All of a sudden my life was over as I knew it. I had no idea if I had medical insurance or where my next paycheck was coming from. I was on social security disability and it was a very meager income, but again God took care of me. Because my husband was killed on the job, they had to pay for my health insurance for the rest of my life. I also got a small retirement check from his previous job and cashed in and invested the retirement from his teaching job along with all the life insurance that was available. That supplied me with enough income to just live.

I came to therapy to quit because I knew I couldn't afford it anymore, but my psychologist took my hands in his and looked into my eyes and said, "It's not time for you to quit, Mysong, we're going to make it so you can afford therapy," and he did. Walking through grief has been the hardest thing I have ever faced in therapy and I would go through the 16 ½ years of abuse all over again, just to have my beloved husband back, but life doesn't work that way. That season of my life was over and I knew it. Everything I had ever remembered and gone through from my abuse didn't even come close to trying to come to terms with living my life without him. My bed was empty where his body had lain, my home was so quiet I could hardly stand it, and my life was like a void in time. Walking through life those first few

years were like walking through a shell that had been my life. I had his Dalmatian still and a new Yellow Lab, but life remained empty.

Every few days I went to therapy, trying to come to terms with life alone, without my love and my partner in life. I have found that there are no words that can really heal this kind of loss. Although it helped a great deal going to therapy and talking about it, a huge wound lived in my heart that was raw and bleeding all of the time. I kept getting letters from the salvage company that bought the remnants of the plane describing what it looked like, how it had crashed, and asking me if I wanted to purchase it. I called them and begged them to please stop sending me these disturbing letters, but they sent them for three years. Finally they sold it and stopped.

It has been over 11 years now and I am still a widow. I think I will always be his widow, because it is comfortable for me living alone now and I'm used to it. Today I live with two Yellow Labs, who fill my life as much as dogs can, and I have tried very hard to make a life, but it has been the hardest thing I have ever done. But I am a survivor, just like all of us, and I do my very best. After all, that's all we can ever ask of ourselves.

Today, I still have a hole in my heart, but it isn't raw anymore, nor does it bleed, but it is there. It is a hole that is full of joy, laughter, pain, tears, adventure, and the journey that was our life together, and it has his face on it, and I never want it to leave me. It is that thing called memories.

MV

Christmas 2011

By Deb C.

Every Christmas brings the same thoughts; not thoughts of sugar plums or chestnuts roasting on an open fire. More like how many ways there are to do away with oneself.

I do this every year. I have Seasonal Affective Disorder (along with DID, PTSD, OCD and bipolar.) It starts every fall, mid-October. As the holidays get closer, it worsens.

My 32 year old son has Asperger's and he starts with his birthday in September and zooms into Halloween, which he dearly loves. From there it goes into Christmas with all this hyperactivity that doesn't cease until after the New Year.

I try to get excited for him, but the plain truth is that Christmas just gets to me in a big way.

Every year I write my annual Christmas poem, which is how I deal with my negative feelings.

I ask questions about why people want to help people in need at this time of the year only. Gifts, toys for the kids, food baskets. People need this 365 days a year, not just one day.

People are nicer to other people during the "season." Why can't they

be nicer every day? I ask deep questions. Why do people go in debt to buy, buy, buy? People have enough stuff! Most have way too much.

For people like most of us with DID, it's a rough time of the year. Believe it or not, my family is not the Walton's.

Now, don't get me wrong. I'm not the Grinch. I love to give people presents, but I do it all year long, not for a particular reason or season. I do it because I want to show my love.

My son has a good Christmas; I wouldn't ruin it for him. But I think very self-destructive thoughts, which escalates as the big day nears. I act out, too. My inner system is pure chaos.

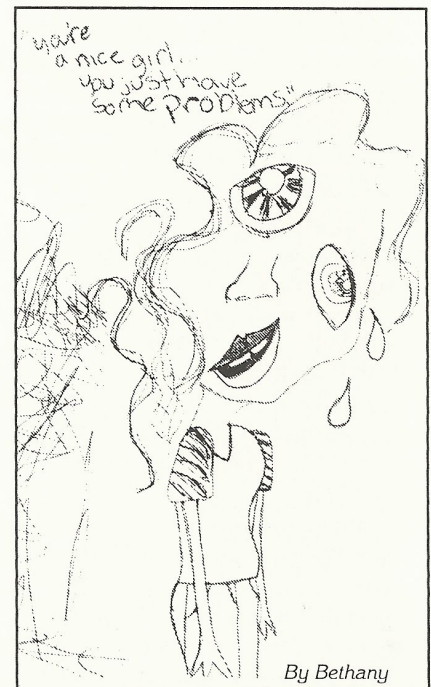
But somehow, we survive. So if you are like me, protect yourself and all your "others." Schedule some time alone. Read a good book. Listen to some music you enjoy that is not carols. Really focus on your feelings. Let your therapist and doctor know how much you care about them. Take your meds. Get enough rest and don't overdo the eating. Buy yourself a little present.

And a really good suggestion this year, if you can afford it. Give *Many*

Voices a little gift. We all need *Many Voices* in our lives. And please let Lynn know how much you appreciate what she does for all of us.

I wish each and every one of you and all your many others "much love."

MV



Grief, Loss, Dissociation, Suicidal Ideation, and Grounding Skills

By Jeanmarie Rizzo

Isometimes want to cringe and bolt out my therapists' or psychiatrists' office whenever they seem, as they inevitably do, to remind me of how far I've come, or how strong and determined I am now in dealing with my D.I.D. (Dissociative Identity Disorder) formerly known as MPD (Multiple Personality Disorder).

Being a multiple sometimes has its benefits, especially if one's "alter personalities" are in harmony or co-operate in working with you in your life. Most importantly as well, when you have co-consciousness with them.

I have achieved the cooperativeness or harmony, but the latter of co-consciousness I have not. My alters and I have not yet learned to trust one another. It's funny, since they were created in effect by me to help me survive what otherwise might have been not only a certain mental, but physical death, surviving R.C.A. (Ritual Cult Abuse) and every form of abuse in general in childhood and adolescence.

Surviving was a miracle in itself. Yet I learned I was deficient in the basic internal trait or gift most individuals have and take for granted, and that is to trust and love unconditionally.

I say 'most have' because there are those—i.e., my abusers—who are as deficient in those values as I was.

So whenever my therapist, psychiatrist, or anyone who knows my story comments on "How far I've come or what I've endured or survived," I immediately think: "Yes, but at what cost?" I lost a therapist, a husband, a child, a father, and a great psychiatrist. Three (my husband, child, and father) within months of each other.

While on some level I realize I was not directly responsible for their early and untimely deaths, indirectly I felt guilt that had they not known and been involved in my life they'd still be here today—at least where my first

therapist and husband were concerned. My loss was compounded with the grief of knowing that I was not able to reciprocate the unconditional caring and trust they had for me, because those values held no meaning for me or my alters and had no stronghold in our life. I always questioned and still do to some extent, anyone telling me they care about me or even love me. As much as I cared for and loved my husband or respected and cared for my first therapist and late psychiatrist, I never fully trusted their care or genuine concerns regarding me. There was always that "but what if" doubt hanging in the balance of better trust.

The main reason I'm told why I do not have co-consciousness with my alters yet is because neither I, nor my alters, really trust anyone—including "ourselves". We learned very early not to trust, since those individuals who we should have felt trust and safe with weren't trustworthy. As a young child you trust that your parent(s) will be there to love and protect you, but sometimes for whatever reason, they aren't.

You trust that your teacher(s) or religious leaders will be role models that you can learn from and trust, but in my case they were evil monsters who hid behind their professions to perform their heinous and sadistic acts upon their young innocent victims.

You trust that other family members or relatives will be empathic and loving, but sometimes they are as bad as the other monsters. So as a young child and adolescent, when love and trust are formed and your psyche as well, you learn otherwise. You learn that no one is trustworthy and love is as foreign a word or act as trust.

You cannot love unconditionally if you cannot trust. They go hand in hand. My alters would not love or trust

because all they experienced was betrayal, even from me, who they were created by—or my mind, to protect and help me survive the torture.

Yet I could not initially be grateful to them, because I had no idea they even existed; and when I did become aware they did exist, instead of being grateful, I often felt resentment for the chaos they caused in my life.

I am now at a point in my therapy that I stand at a crossroads. I want to have co-consciousness with my internal family and saviors, but in order to accomplish this great feat, I'm told I must validate and accept what they did for our survival. In order to achieve this I must learn or hear what they endured.

Pretty confusing, no? I mean, they don't really actually exist. Not like I have actual real live people living inside me. They are just parts of me. Parts that were created by my mind to survive.

My therapist, a brilliant, skilled and caring woman, who has extensive experience working with dissociative individuals or severe trauma cases, has repeatedly told me that I needed to hear and embrace my entire family. I needed to know what they endured for our survival. Unless I validated these parts of me, I will never achieve their trust and co-consciousness.

This is extremely frightening to me since my late psychiatrist attempted this several times, and the results were always my becoming extremely suicidal and finding myself a guest in some psychiatric unit for months, trying to regain whatever balance and stability we had. So neither I, nor my inner family, seem willing to cross that threshold again.

My argument is always "why rock the boat?" I'm functioning, perhaps not as well as others with my particular disorder, but as long as I can keep that door closed and keep one foot in front of the other, and not

dwelling or be inside my own head (which is never on a good day a great place to be) my life is manageable.

Yet, somehow, those skeletons refuse to remain in the closet, and push against the door wanting to escape. So I know in order to progress further, I have to reconcile and embrace my past via my inner family, who hold all those memories.

My therapist Joy assures me that it didn't work before because I did not have or even knew the bare basics about grounding skills, and now I do. Without grounding skills I was in a perpetual state of suicidal ideation. I was consumed by my grief and loss and the fragmented nightmarish memories of the abuse and torture I endured as a young child.

It took me years to learn to perfect and employ these seemingly easy grounding skills necessary for me to cope and function with my D.I.D. and suicidal thoughts in my everyday life. Yet for someone with D.I.D., what seems easy or effortless is often a monumental task for us.

For those of you who are wondering what exactly are grounding skills, I will explain it in the words my therapist Joy explained it to me. Grounding skills are tools that help you stay focused on the moment. They can help you reconnect with reality around us when our mind has jumped to thinking about the past, our biggest fears, or suicidal thoughts. Once our mind starts down that path, it can be incredibly difficult to get back. That's where grounding skills come in. The more we perfect them, the more we are able to redirect our thoughts back to a healthy place when triggered. There are many, many techniques one can use to ground themselves.

I will list a few of the ones most helpful to me. They are:

- 1) Asking yourself questions—i.e., "Where am I?" or "What day is it?"
- 2) Focus on what you see around you—i.e., if you're in a room say to yourself, or out loud if it's more helpful, "I see a green couch, a table,"
- 3) Hold something with a unique texture and focus on how it feels against your skin. During my last

hospitalization in McLean Hospital, in Massachusetts, in the residential Hope Cottage program, specifically for individuals with dissociative disorders, the therapists are all skilled in being able to recognize someone in the process of dissociating. During one group session, one therapist, while continuing to lecture to the group, grabbed my hand and placed a frozen orange she had just removed from a freezer in the room in my hand. Not only was I taken by surprise, but the coldness of the orange in my hand shocked me out of focusing on my negative thoughts and attempts to dissociate. It quickly shocked me back to focusing on where I was, and more specifically, getting rid of that frozen object that was stinging my hand. The therapist never skipped a beat, just smiled at me and said not only to me but to the group..."See how we can redirect our thoughts by focusing on something else?" And as I tried to put the orange down she commanded that I hold onto that orange for another couple of minutes.

I still use the frozen object skill. It doesn't have to be a piece of fruit, but can be anything cold.

4) Focus on breathing. Take a deep breath, hold it for a second and let it out. Count each inhalation and exhalation.

5) Place a loose rubber band on your wrist and gently snap it so as not to cause injury to yourself.

6) Listen to music that conveys the opposite of what you're feeling.

7) Repeat a comforting phrase of thought—i.e., "This is now, not then."

8) Write your thoughts in a journal.

9) Remove yourself from the situation by going for a walk and paying close attention to the weather—i.e., the warmth of the sun on you, or the wetness of the rain on your skin, or the coolness of the day/night, etc.

10) Think of or remember a time and place you felt very safe.

For me, grounding skills are a necessary part of my day. Without them I wouldn't be able to leave my home or function at all without

turning into a trembling mess, paralyzed in fear. The fear is like a motor, which if I allow it to enter and take control of me, will pump me around and around until I fade out like an old bicycle rider whose odds are measured in actuary graphs.

So I concentrate on grounding myself daily. Without my grounding skills, getting through my day would be like navigating a mine field. Without my grounding skills, it is an impossible task. The fear which ultimately leads me to dark and suicidal thoughts would ultimately drown me. So while I do acknowledge that I have indeed come a long way, I realize it did not come without cost.

I regret that I was never able to effectively or unconditionally convey my love to my husband, or adequately express my undying appreciation to him, or to my first therapist and late psychiatrist, for believing in me and having faith in me, when I had none for myself.

In further striving to achieve my goals of co-consciousness with my inner parts, with all of us working cooperatively to function as near to "normal" as possible, I am not only validating their faith and belief in me—that I was always a loving and giving person, that no evil could ever destroy or take from me—but I can one day embrace it for myself.

Years ago I once asked my late psychiatrist if my alters and I would one day be integrated and I would function as one complete person, same as anyone else. He hesitated before answering, and told me truthfully he didn't think that was a possibility for me, but it was possible for me and my alter parts to co-exist and cooperate and function as close to that as was possible.

So grounding skills have become an important part of my daily life, as most other daily living skills such as brushing one's teeth—and most times, just as automatic. It's not as "normal" a daily functioning as some others, but as my late psychiatrist told me, "It's pretty close to being normal," and I'll settle for that compared to the alternative.

Therapist's Page

By Marjorie McKelvey Isaacs, PsyD

Marjorie McKelvey Isaacs PsyD is a clinical psychologist based in Cincinnati, Ohio. She has worked extensively with patients with histories of childhood trauma and PTSD. Contact by phone for more information: 513-631-5363.

A Path to Safety, and a Life You Would Choose.

The energy to create and the drive to destroy are both parts of every life. Yet just as physical and sexual abuse were once unspeakable realities, the self-harm tendencies that often result from those traumas have remained almost unspeakable topics. Perhaps discussion of self-harm seemed pointless, as ways to prevent it remained obscure and disquieting as the topic itself.

Much of the material is written specifically for people who have alters (D.I.D.) or shorter dissociative periods, but many ideas and suggestions will work for anyone. No article can promise to provide all the answers or fail-safe instructions—to do so would be to discount the unique capacities of each individual. Still, in a spirit of understanding and without judging, this article will explore and clarify several motivations and impulses to self-harm. Such thoughts are often a normal reaction to non-normal experiences of stress or trauma.

We will then look at the impact of repeated self-harm threats and actions on life situation and relationships with others.

Finally readers are offered a sample of realistic practical activities and perspectives that provided workable alternatives to self-harm within a context of a life worth living and sharing.

Creating Real Safety Out of Risky Situations.

Self-harm takes many forms and arises from many motivations. There are many methods of attempting to end a life, ranging from highly lethal to nearly harmless. Other forms of self-harm are never meant to cause permanent damage, but rather are intended to calm or excite, focus, or diffuse feelings and awareness. Intentions range from seeking an altered state of consciousness to expressing a cry for help or a statement of despair.

Thoughts of death and wishes to end life are common symptoms of depression, a condition and perspective somewhere between uncomfortable and thoroughly terrible. Sometimes feeling like either

overeating or wanting no food, depressed people are often tired or achy. Depression not only affects mood and the body, it also can cause problems concentrating or deciding, and a negative outlook including feelings of guilt, inferiority, and hopelessness.

Experiencing those symptoms, it is no surprise that depressed people want to stay away from everyone else and do nothing. Both of those temptations, to withdraw from people and avoid activity, then can make depression worse, as negative brooding thoughts get plenty of time to repeat automatically, dragging a person further down.

What is going on here? Anyone feeling worse just reading this long list of troubles? If you are feeling worse since reading these items, you have just experienced the power of thought to change mood. If thinking about these symptoms makes you feel worse, continue reading, and you will soon find out how alternative kinds of thinking can help you feel better.

Why include this miserable symptom list? Because depression is a condition that sometimes decreases on its own and usually will decrease with medicine, counseling, strategies or a combination of these. If you have these symptoms, they could be depression—and you can do things to change that. The encouraging thing about depression is that it will change.

When a person has Dissociative Identity Disorder (D.I.D.), there are different awarenesses and feelings separated into different facets of the person. The host is often depressed, but other alters may feel differently. Rather than blaming self and feeling sad, another alter may recognize the abuse was unfair, and become angry. Anger has strength, often arising from the desire to protect. Unlike depression, anger gives energy, useful for getting things done as well as getting into trouble, including deliberate self-harm.

Anger can be hard to tolerate because it may be associated with loss of control and hurt experienced during past abuse.

Anger may remind a survivor of an abuser's employing aggressive words and acts to gain cooperation. Some survivors of trauma or abuse do not experience strongly divided awareness and divided types of mental-emotional activity, but do have shorter dissociative periods when one part seems in control of a limited range of feelings and actions.

Depressed people who do not dissociate may alternate between depression and anger. When anyone becomes aware of root causes for past anger, they can begin to use the feeling constructively in the present to self-protect. Resolving feelings about past unfair treatment will give a person more energy and make it easier to recognize and resolve or avoid currently unfair situations.

A person with alters (D.I.D.) has created within him/herself a mind that works differently and holds different views than others. Alters are the spontaneous creation of a bright, protective imagination. Separating emotions, memories and activities into alters requires intelligence and creativity working under high levels of childhood stress. The result is an internal world with separations and specializations that divide traumatic memories into tolerable pieces. This divided awareness with sudden moment-by-moment changes creates a tangle of partial understandings. Some alters know nothing about others; some know a few but not all the others. Some work well together, but some are against each other.

Through alters, a child or teen with D.I.D. can perform actions that transcend reason and maintain beliefs that defy logic. Alters have truly amazing abilities: to dodge and weave, to speak up with courage or to run with speed, to charm, then befuddle those who intend harm. Moment-by-moment, alters did their various tasks in a young one's life. With only fragmented awareness of what others did, alters helped insure the body's survival. Alters were effective during childhood, the time of limited responsibility and required dependence. However, without conscious awareness of

the overall current situation, these same alters that protected the child from irresponsible abusers can make responsible self-protection by an adult survivor more difficult.

Just as alters sometimes have no initial knowledge of each other or ability to communicate internally, they can intensify focus on one fact and block awareness of others. People who have D.I.D. sometimes actually do unbelievable things. Perhaps then, it makes some sense that reality becomes less clear-cut; in hypnosis, this holding mutually-exclusive understandings is called trance-logic. One alter may have an allergy with all of the symptoms, at the same time that other alter in the same person is not allergic. One alter may feel physical pain while another feels numb. An alter might be able to play classical music, yet another alter belonging to the same person could draw portraits but could not even read music.

With these unusual abilities, it is not surprising that a person with D.I.D. holds views about life and death that may differ from those of other people. When the original role and tasks of an alter have been completed, and internal barriers begin to lift, the alter may feel as if it were dying as it becomes more part of the whole. There are alters who affirm they themselves are not "alive".

An important source of confusion and distress is accepting that there is only one body. Therefore, it is also hard to keep in mind that self-harm by one alter means harm to all. People with dissociative abilities can sometimes blur the focus on reality; they may understand a real time situation, but related emotions and perceptions lack immediacy. This capacity would be protective when enduring abuse, but a concern when wishes to self-harm arise.

Progress in Counseling Changes the Boundaries of Safety.

For everyone, change is both exciting and frightening. People want positive changes, but not the discomfort and stress that are part of exploring one's past, or the fear of a new and unknown future. If a person believes it is better to feel physical pain than emotional pain, counseling cannot go forward because any exploration would increase risk of physical self-harm. Likewise, serious depression or patterns of self-harm, need to be addressed before working with traumatic memories.

It may seem sensible to jump in and get all the trauma work done at once, but that strategy is no more effective than a crash diet to lose weight, and it is much more dangerous. Even when a client has become stable before exploring her past, the feeling of having revealed secrets that were supposed to be hidden can feel like betraying an unsafe caregiver, and increase self-destructive impulses.

As counseling progresses, there is more continuity of internal feelings and understanding of the past. These new insights can change personal relationships and increase worry as well as thoughts of self-harm. At such times it is good to review and refresh the safety contract.

Some clients may wish they did not have to deal with the safety contract just then. Suicide can seem like a certain escape for people who have been trapped in situations no one should have to endure. Ending life seems like one certain way to end current pain and the pain of what happened in the past. Instead, the best thing is to talk about suicidal feelings with your counselor. Why?

Talking about suicidal feelings with a healthcare provider does not increase the changes that people will complete suicide. The counselor can help develop new perspectives and ways to relieve the distressing feelings. Making a serious attempt at self-harm violates your therapeutic alliance with the healthcare professional. You break your promise. If you make a suicide attempt, you risk losing your counseling relationship altogether. Your counselor may decide because the self-harm put you in danger, that they are unable to help you and therefore are ethically bound to transfer you to another psychologist. Even if you stay with your counselor after a suicide attempt, the relationship could be weakened. The counselor may become concerned that any intervention could increase risks of another attempt.

Suicide attempts hold the counseling relationship hostage. With friends and family, the more they value you, the more confused, frustrated, or scared they may feel about doing the wrong thing and nudging you toward another suicide attempt. A suicide attempt therefore can drive away the people who care most. In these ways, a suicide attempt may appear to be a temporary escape or relief from bad feelings, but at a very high cost.

During the counseling processes of understanding depression, uncovering causes of fear and pain, and expressing the anger which often has been stored in incredibly large amounts, risks of self-harm may increase. For that reason it is important to identify, practice, and test ways to restore calm and soothe hurt, before exploring past traumas. Writing down how you plan to self-calm or soothe on a card kept in a safe convenient place like a wallet provides a handy reminder. Your card provides self helpful choices, even at times when your thinking may be clouded by upsetting memories or feelings. In addition to the card that lists activities, supportive contacts, and resources for self-care, a written contract promising not to self-harm prevents confusion. A contract reminds everyone involved of a promise to always be safe. The ISSTD suggests this way to state the agreement:

"No Suicide/Homicide Contract"

The following is agreed upon by all facets who have communicated and who have not communicated, that are known and unknown, conscious or unconscious, active and not active, and any other facet I have not mentioned.

I will not accidentally or on purpose, consciously or unconsciously kill myself or any other facet under any circumstances whatsoever. Signed _____

This agreement can be signed by both client and counselor. If there are alters, they may all sign the contract as well. However, contracts are only as good as the therapeutic alliance between client and counselor. (Brand, 2001)

Believe it: There are Alternatives That Can Work.

Hopelessness is a feeling, not a fact. It actually is a symptom of depression listed in the Diagnostic and Statistical Manual of Mental Disorders. Depression is a condition that sometimes improves on its own, but general improves with strategies, medication, or both. Still, when people feel it, they feel like depression will never go away; that also is a feeling that can change, not a fact. When life feels hopelessly bad, ending it could appear attractive. With a new perspective and new tools for survival, life becomes worthwhile, and thoughts of self-harm fade. You may then begin to see good reasons to live.

You can independently take steps to decrease both depression and impulses to self-harm. Identify convenient, inexpensive ways to decrease emotional discomfort. If

you set your goal as "noticeable even if small improvement," rather than complete transformation, you will find the steps to feeling better.

Many trauma survivors were raised in environments where they did not learn healthy self-soothing. For that reason, these small, barely noticeable improvements are a sensible way to ease into the self-care that will bring out the best in you, for yourself as well as for those important to you.

There are many possibilities, including the following activities:

- 1) Exercise of your choice at your own pace—whether by participating in a sport, gym exercises, walking, working out to a CD program, or vacuuming the rug—helps return stressed body chemistry to normal balance. The result is physically feeling better, less irritable or angry.

- 2) Discover activities that increased relaxed feelings for you. Possibilities include creating relaxing mental imagery of a place where you felt safe and secure, being out in nature, listening to music you find peaceful, or learning effective deep breathing. Even simple things like soaking in a bubble bath with a magazine or coloring with crayons can make a real difference. Just notice what works for you.

If you dissociate, notice what works for your other facets or alters as well. For better or worse, you are now responsible for your own life and safety. In order to effectively carry that responsibility and retain the privilege of independence that goes with it, you need to recognize and relate to others within. It is a project that takes time. Although it may be difficult to imagine that some of the internal group have any merit, every one was created for a purpose, and contributed to survival.

Ironically, the reason some of your inner group seem so intolerable is that they did the jobs others could not bring themselves to value or perhaps even attempt. What would life be like without the floor scrubber, the sensitive child artist, the smarmy though truthful diplomat, the whiny adorable kid, the tough and loyal marine, the absent-minded huggable great aunt? Alters step up for so many jobs, and discovering how to feel grateful for them is an important part of being in charge of your life. Difficult though it is, communication and cooperation among alters is an essential part of taking responsibility for adult life. Impossible though it may seem, the

internal world can become less a reflection of the difficult dangerous external environment of childhood, and more a center for peace.

Because depression and anxiety both affect how people feel physically, general self-care can be quite helpful. Changes in sleep, appetite, and body tension commonly accompany worry and the blues. Everyone gets a short-term sense of well-being from eating foods high in fat and sugar, and from drinking coffee or soda. Slowly savoring these kinds of snacks will give you the most enjoyment for the calories. It is easy when feeling badly to grab snacks for comfort and drink caffeinated beverages for an energy boost. Both of these habits unfortunately can disturb sleep, and sleep deprived people's body chemistry makes them want more high calorie foods and less exercise.

No need to criticize yourself for slipping into these habits that are so common in today's world. A cycle gets started when poor eating increases worsens sleep problems, then poor sleep increases cravings for the stuff that causes sleep troubles. A check-up with your primary care doctor can give you reassurance when poor sleep, fatigue, body tension, and food cravings are emotional side effects, rather than signs of serious illness.

If you are also seeing specialists, take a list of all the medications and supplements you take with you, so your primary care doctor can check to be sure that all of the prescriptions and any over-the-counter products are working well together. If you are having any significant problem with food or sleep, and have no current medicine for mental health, consider taking something short term. It can help you break the cycle of too much caffeine and high calorie snacks and too little quality of sleep.

With a counselor's guidance, you can figure out what makes self-harm feel like a good idea to you. If you think about self-harm with any frequency, or have already done some, and are not seeing a counselor, now is an excellent time to obtain professional consultation and support you truly deserve. Talking about it does not increase the wish or chance of self-harm—in fact, it does the opposite. Discussion with a professional helps you consider the real consequences and identify safe alternatives. Your mental health professional needs and wants to hear your thoughts, feelings, and any

plans about self-harm. Keeping such information to yourself does not protect your healthcare provider from bad feelings—instead your honesty builds trust because it shows you are willing to work and to be a good team member.

No matter how difficult your situation may feel or be, ways to make it more livable do exist. Simply believing there could be more acceptable alternatives, and deciding to be open to discovering them, will increase your awareness of what you can do. If you act on the belief that there are things you can do to improve your situation, you are taking an important step toward finding what will work for you.

There are at least two reasons that trying anything different but harmless will improve your situation. First, increasing your activity level toward a reachable goal will ease depression. Taking action prevents ruminating that makes a bad mood even worse. Next, if what you tried does not work, you learn something about yourself that may help you make what is more likely to work for you. We all may feel reluctant to try because we fear trying and failing. In addition, you can realistically applaud yourself for making that effort.

If you doubt that making effort brings respect, imagine a child having trouble with school. Picture that young one trying the homework, asking for help, listening, trying again. Imagine them staying after class to ask the teacher to explain the mistakes marked on work sheets, then asking for more items to practice. When the next test comes, this kid starts right in. The child checks the test paper, finds some mistakes, fixes them. While other children rush through, this child sharpens a pencil, takes a few deep breaths, and goes back to work.

Imagine the next day, as the teacher gives back the graded tests. Our kid passed. Not a high grade, but clearly better than before.

Would you respect that child's work and determination to stay with it, even when the task was tough? I would, and I am certain I am not alone.

Will you give respect to that tough child within you, the one who got you through some of life's worst tests? I will, I do, and I invite you to join me in respecting you for your survival of the past, and for your efforts to create a present and a future worth living.

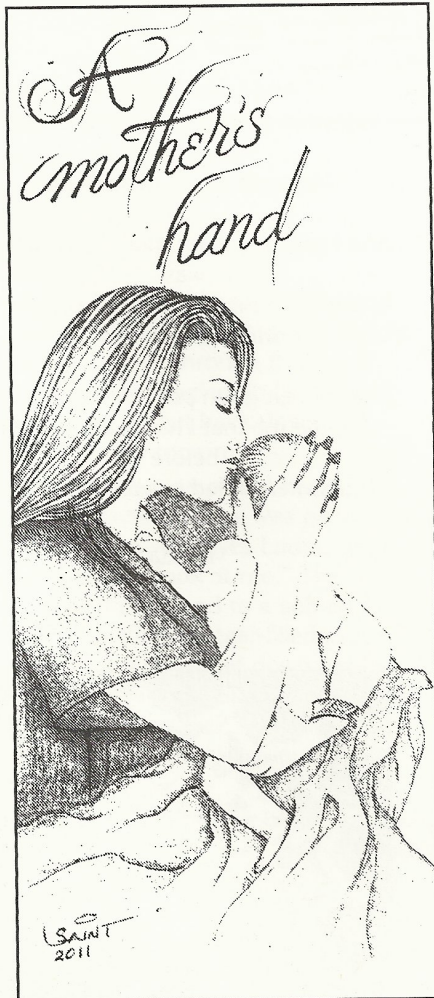
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Our Own Traditions

By Kate Edwin

A long long time ago, I was in a now atypical hospital stay. It was a state hospital and I was there for 2 to 3 months. They had parties on holidays, extra chocolate milk on birthdays... for Christmas, we got cards and small gifts from volunteers. At the time I remember thinking it was the best Christmas I'd had in quite a while. Made me feel like someone actually cared.

After having graduated from a different day program and becoming attached to the staff, I started a new holiday tradition. Since family doesn't mean much anymore, and friends are few and far between, I thought I'd do something for people I knew wouldn't be having the best time during the holidays because they were in an all day every day hospital program. This tradition helped sharpen my dollar store and clearance sale eye. For the last 4 to 6 years I keep my eyes open year round for nicer dollar store clearance type treats and presents. I have a drawer in my place just for my "Christmas Stash." I drop off about 35 to 50 gifts for the local day program from which I graduated. Each is tied with ribbon and a handmade tag, along with some items the program keeps for everyone to use (puzzle books, playing cards, music cd's etc). They have a very low budget and would likely not have any gifts to give otherwise. I wanted to make sure people who were in the same position as I was got at least one moment of having someone care about them during a time of increased stress, symptoms and intensive treatment. And as we all know, holidays in particular can be especially stressful, whether or not friends or family are involved or not, with or without other complications.

I love shopping for gifts for people, and this makes me know I'm doing something good for myself as well as others. 50 gifts may seem like a lot but \$50 or so for the whole year is doable even on my budget. I like doing it, I like seeing the staff's eye light up when I come by every December, with large gift bags packed

to the brim. Hopefully it will keep my own holiday spirit from fizzling. I don't see stopping this tradition any time soon.

MV

The Week Before Christmas

'Twas the week before Christmas
And inside my mind
Were personalities
Of every kind.

Each had something they wanted to say
About what was happening on the big holiday.

All of the kids seemed to want a new book
Betty was telling me what I should cook
Chondra was begging for lots of bath gel
Somewhere, someone was ringing a bell.

All of this stuff going 'round in my head
And Jack saying he thought we should just stay in bed.

Then Micah asked if we could get a new dog.

Debby wanted a new stuffed frog.

Billy wanted to go to the store;

He has lots of cd's, but he wanted more.

Jetta, my hippie girl, wants love and peace
And for all of the wars in the world to cease.

Dominique doesn't want anything;
Then Chondra decided we need to add bling.

Dino is quiet, he just wants to sleep.

There is so much noise, I'm ready to weep

Mary yells for some peace and quiet;
And me, I'm just about ready to riot.
But really it's like this almost every day.
Each one has something that they want to say.

Being a multiple is okay with me
Because it's the only way I know how to be
Christmas just throws in some extra stuff
And I have to say, "Enough is enough!"

Christmas will come, we'll survive it somehow
I am just trying to get through now!!

By D. Clark

MV

On the Subject of Grief

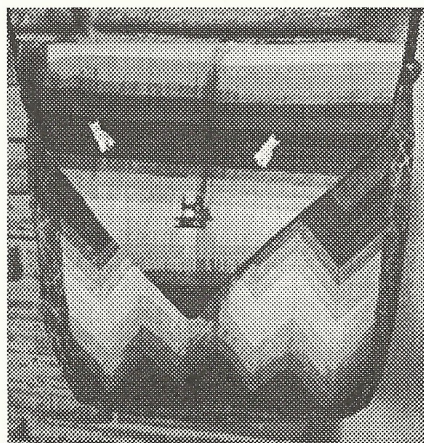
By Kat & the Girls

My Mom died Feb. 8, 2011, the day after my birthday. We were very close most of my life, and she had been very ill for over 2 years. I had been more her mom than she was mine- since my teens. All this said to show despite the loss of several others in the last two years, this was going to be a difficult grieving for me. I made a website as a Memorial to her. It seemed to really help my grief. I'm not finished, I have more photos of her quilts to add.

The website Memorial is at: <http://www.southpawcats.net/Mom/index.html>

I had moved her quilting/sewing room to my house, but she became too ill so fast she never did get to use it. I found some of her pieced work, to me it was so amazing - so perfect. I used it as the cover for the print copy of her site, and in her site. I made a purse out of it. It's like having a piece of her with me all the time.

**note: even tho we are Kat & the girls, most of the girls were held back around Mom. We have voice changes with different girls and it really upset her as we were told. So that should explain why we talk about Mom and use the "I" not "we".*



MV

A Short Healing Experience

By Sahara

For years I have drawn this little girl with her face down and her hair falling over her crouched-up knees. In my memory, she is sitting naked and alone in that corner. A couple of days ago, I was triggered and that image came into my head. I cried some, and then I thought, "This little one needs help."

So I laid down on my bed with just the afternoon light coming in the window, and became very quiet. I breathed in "calm" and I breathed out "ease". I relaxed into somewhat of a meditative state.

When my body was calm and my mind clear, I went inside and picked

up this little one and closed the door to that room. I told her that she would never have to go there again, and I would never let anyone hurt her again. I told her that I was grown and that this was August 20, 2010. I told her she is safe and loved. She snuggled into me and is still in my arms. I especially notice her when I lay down at night.

The room has popped up again and has been empty. I closed the door again. When it came up another time, it seemed that someone was sitting there. I went over to investigate and all I saw was a blanket in the shape of a child. I pulled it off and there was nothing there.

MV

Unspoken Needs

As I gaze out into the world around
my being
I sigh and wonder where is
the place for me

Is it behind the rock or out
in the belly of the sunshine
heart beating wildly

So excited at all I see around me
so breathless at all the gifts
that adorn my sight

I stop and let my soul expand at
the scope of such that eclipses
my vision

How exciting to be a part
of such wonders and
deafening jubilation

I hold my breath at the vitality of the
earth's secrets that close
around myself.

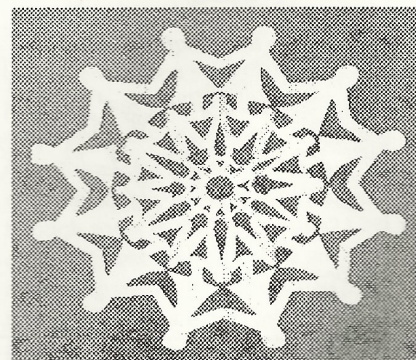
And I raise my hands
in joyous exuberance, mouth open
and
I scream out in excitement.

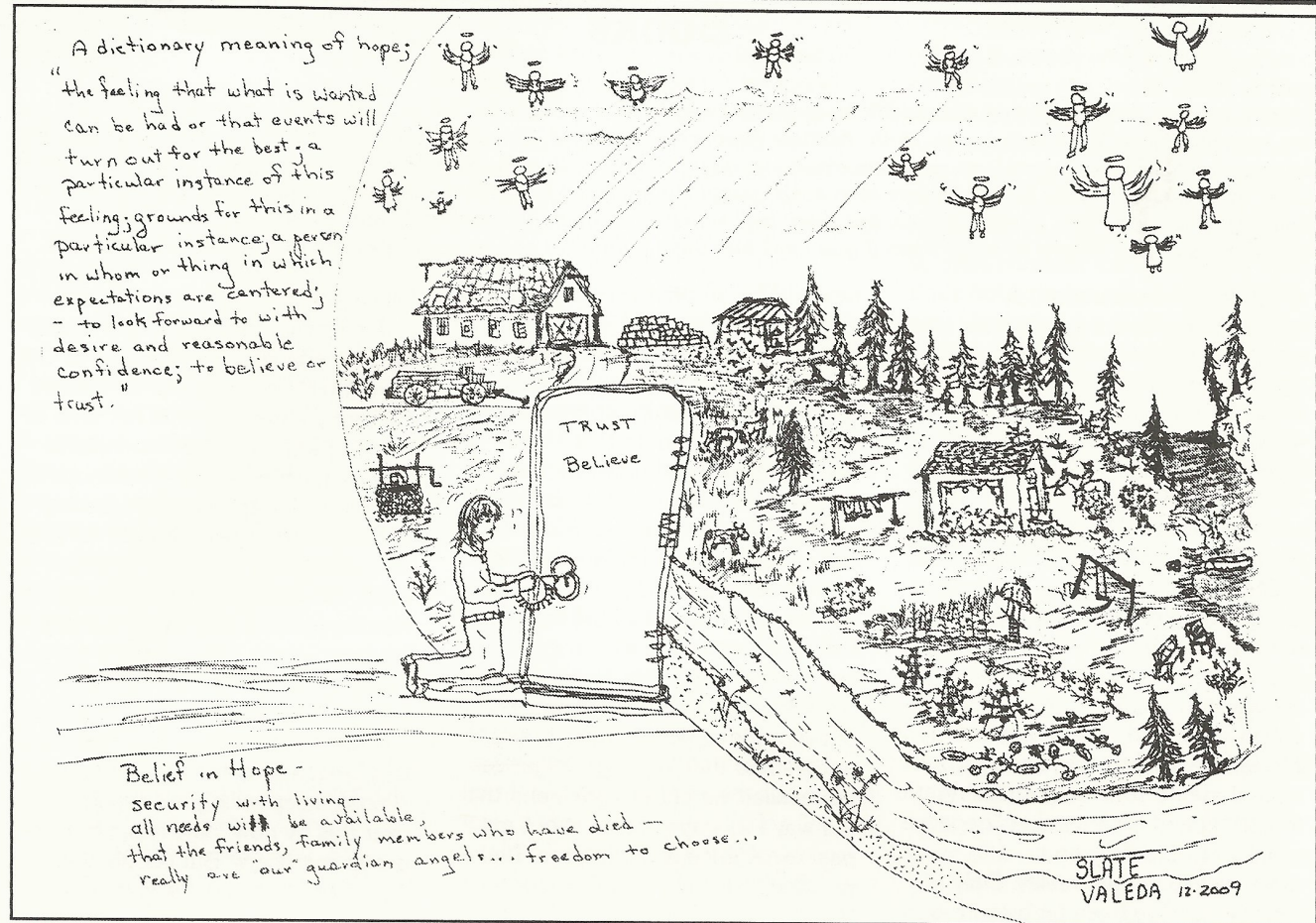
And I yell "this is for me!" The me that
was
meant to be part of the countless
world and its wonders

I have been given permission to finally
see the me that I have kept hidden
before
but am encircled in wonders now...

By Kathy A.

MV





Session

By Jesse Michaels

I heard the little girl screaming and yet I could not help her. The child's voice echoed through the small room as she wriggled and squirmed begging to be put back down and calling for her mommy.

Within a few seconds I heard another voice; this one was gentle and warm. "Open your eyes Laura, open your eyes and look at me." The screaming mellowed to a sob and finally to sniffles, as tear-filled eyes emptied and streamed down her face. "Can you hear me Laura? Do you know where you are?" asked the gentle voice heard just minutes before."

Laura put her thumb in her mouth, recited the alphabet over and over while searching the room through puddled eyes.

A young woman crossed the room and sat closer to the little girl. "Do you like my diplomas?" she asked.

Laura nodded slowly but continued cautiously scoping the room, her thumb planted firmly in her mouth.

There was a few minutes of silence. I grew uncomfortable watching and wished someone would speak.

Finally, Laura looked out the office window. She told the woman beside her about the clouds that she saw. They watched the sky together for what seemed like hours. They talked about the images and even allowed a young giggle to escape between heavy sighs.

Laura saw her favorite toy. She had used it many times before here in this office, but only now did it seem to appear to her. "Can we play with the doll house?"

The young woman smiled and asked if they could wait until her next visit because she needed to speak to an adult. She had to make sure that Laura had a way to get home.

Laura complied and told her that her adult would be there in a minute.

I opened my eyes; the little girl who was sitting on the sofa was gone. Beside me sat Jenn, my therapist. I heard her voice asking "Are you here with me?" I nodded as Laura had before; my face was soaked with tears, my head ached and I was exhausted.

"Let's set an appointment for tomorrow and remember to call me when you get home." Jenn handed me a card with the time of my appointment. We hugged and she called from behind me as I slowly left the room, "Hang in there, Laura!"

In my head I heard the voice of a very young child saying "bye bye, Jenn." Her voice touched me deep within my soul. We'll hang in there, I thought to myself. We always have.

Books

Note to readers: This is the first time in MV history that I recall reading 3 books that I can heartily recommend. The first two are particularly useful to laypersons. Both "Attitude Reconstruction" and "You Don't Have to Like It" are well-worth reading by anyone who has had problems negative emotions, guilt or grief. Both helped me turn my life around. "In the Presence of Grief" is written primarily for counselors who assist people in grief, but it is also accessible to laypersons. I gained insights from that book too. Brief reviews follow, but there isn't space to do them justice. Read them if you have faced loss or hardship. Ask your library to order them if you can't buy them yourself. I honestly believe they can be helpful. —Lynn W.

Attitude Reconstruction: A Blueprint for Building a Better Life.

By Jude Bijou, MA MFT. © 2011 by Jude Bijou. Published by Riviera Press, Santa Barbara, CA.

www.attitudereconstruction.com. ISBN 978-0-9835287-7-7 \$16.95 paperback. 354 pgs incl. Index.

This remarkable book identifies the first three of six emotions: sadness, anger, and fear. Then Bijou shows how to thoroughly express these natural human emotions, allowing them to be transformed (with various practices) into three other constructive and comforting emotions of joy, love, and peace. Bijou's book helped me personally by stressing the importance of experiencing "negative emotions" forcefully and acknowledging their reality. Only now—when I've been hit by so much negative experience all at once—it dawns on me that I have to face these feelings head-on. I've often kept my emotions hidden, often from myself but definitely from others—including my closest companions and counselors. No one could get through the kind of defensive barriers I put up, and I've had some excellent therapists over the years.

Bijou uses worksheets to help people understand which emotions they are ruled by. While she emphasizes physically expressing fear (for example) by deliberately shivering and shaking, I am still uncomfortable with physical expression. But she offers other methods to get fear out in the open, including journal writing, verbalizing, or even thinking to move from a fear mentality to peace. "Everything will be all right. I do what I can and the rest is out of my hands," and more.

Anger is another emotion that scares me. My current counselor says she "feels" anger pouring out of me when I'm in session, even when I am talking about what I think is "good

news." This surprised me a bit, but I also know there's truth in it. While I'm not angry at my recently-deceased companion (he did not plan to die), his death brought up repressed anger from past experiences that I have dealt with in ways that restrict my life. An example: for several years I've refused to drive near the town where my ex lives for fear I might see him, even though there are events in that city I'd like to see; it's hard for me to be friends with men who share his first name, and so on. Now—finally—I see how this level of avoidance is out of proportion. Through this book, I understand that long-ago anger can be recalled via current grief, and that the way I've stayed bitter about my past experience is hurting me. I've decided to do something about this buried anger-bomb, and defuse it—over time—for my own health.

Another point I must make about Bijou's book. Though she gives very thorough instructions with detailed affirmations on virtually every emotion, she does not minimize the difficulty of actually "reconstructing attitudes," or accepting the changes, unfairness, and uncertainty of life. We are not what we do. We are who we are. She believes that the "cosmic plan" for each of us is unfathomable. Yet our true selves exist from the day we start living and persist until the day we die. We just need to keep uncovering the layers and doing the best we can do, accepting that we are human, make mistakes, and can learn to love ourselves. I don't know about you, but I'm going to be working on this for a long, long time.

You Don't Have to Like It, but You Do Have to Live It: Conversations About Loss, Grief, and the Opportunity to Grow.

By A. Barbara Coyne, PhD, MSN. © 2010 www.barbaracoyne.com ISBN-13 9781439215234 \$16.95. 224 pgs.

Paperback.

Dr. Coyne, the author, is a former nursing educator and founder of The Dwelling Place: A Center for Health. Currently she devotes all her time to working with grief-stricken families and conducting group workshops on her particular approach to grieving. She does not agree with the familiar "stages of grief" such as denial, acceptance, and "recovery" based on viewing grief as a sickness one can "recover" from. Often people worry that they aren't moving "through denial" fast enough, or are thrown by a sudden recollection of a loved one that seems to come out of the blue. "People keep telling me I should be over this by now," she hears from her group members. But people don't "get over" losses the way they "get over" the flu.

Coyne prefers to view grief as a part of a natural human condition, bringing together the personal experiences of each individual, old and new. Over time, one learns to integrate sadness with joy, to eventually come to a happiness of a different kind than one had before the death of someone important in one's life. "Life will never—ever—be the same," is her point. Loss changes life forever.

As some of you know, I've been suffering "chemo fatigue" that's been very sudden and debilitating. But I learned from this book that grief on its own can cause extreme fatigue, mental confusion, and to expect the unpredictable sensations that sometimes arise "out of nowhere." So maybe my fatigue is a double-whammy. Coyne stresses that no sensations or feelings are "wrong" or "bad." Observe them, but let them be there. Feelings—whatever they are—are natural. Even though your wish may be to "have life back the way it was" this will never happen, no matter how much you long for that to be

true.

She also suggests that as your life changes, think about continuously releasing what is over, while simultaneously reaching toward what is yet to be. Notice what is happening to your body and be especially careful about protecting your own health. You are who you have always been. You learn, and you grow, and you "move on"...but be patient with yourself. Echoes of this particular loss will join with experiences of future losses. Death does not play by our rules. Those who die do so because it was their time to die—not yours. Grief and loss are not problems to be solved—they are our next opportunity to develop and grow in awareness and caring.

In The Presence of Grief: Helping Family Members Resolve Death, Dying, and Bereavement Issues.

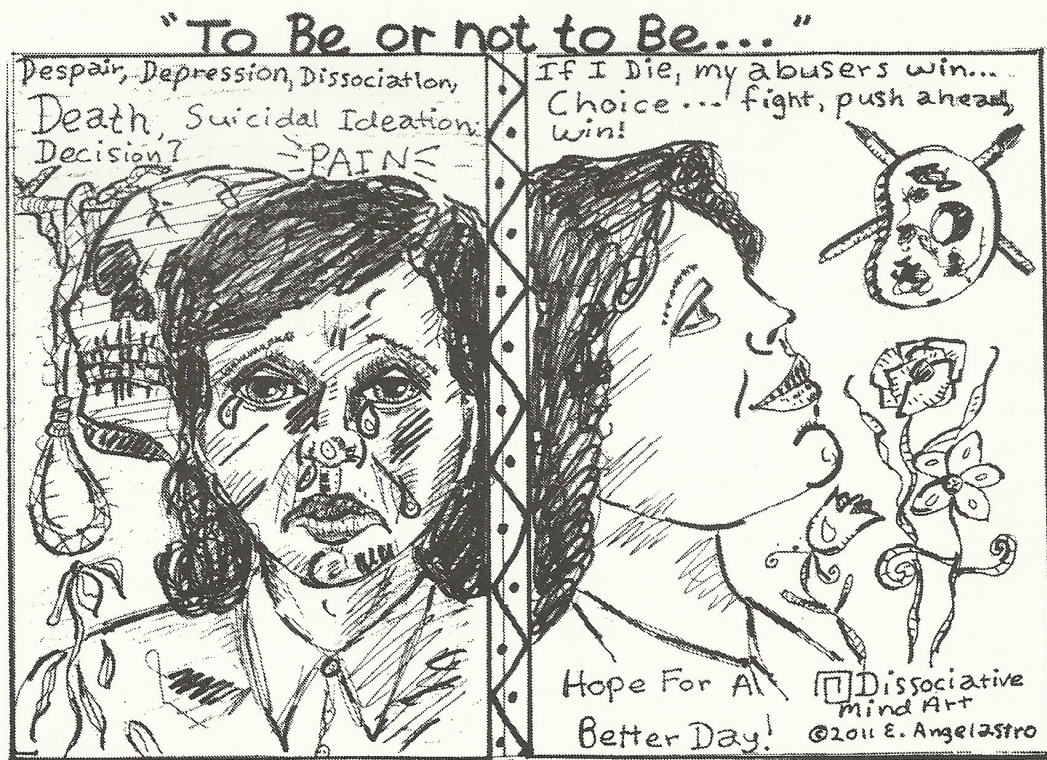
By Dorothy S. Becvar, PhD. © 2001 by The Guilford Press. NY, London. ISBN 1-57230-697-1 www.guilford.com
284 pgs. Hardback. About \$40. Also available in Paperback, ©2003, about \$20 on Amazon.com.

Becvar experienced her own personal loss of a son, as well as worked with countless bereaved

families, so she conveys the kind of intelligent outlook only to be found "the hard way." Her book is divided into two main sections. First is The Contexts of Grief. Numerous types of death are discussed in separate chapters, such as When Death Comes Unannounced, When Death is Anticipated, When a Child Dies, a spouse, a parent, a sibling dies. She even takes on the difficult task of discussing questions of Euthanasia. The second section covers grief in the context of therapy, with chapters on Creating Rituals, Searching for Meaning, Reclaiming Joy, among others. The personal narratives of clients are especially instructive. The insight I received from this book was perhaps a little odd: I learned that men who lose spouses or significant others tend to jump back into the dating pool quickly, and give little thought to what other people think about their actions. On the other hand, bereaved women tend to wait at least a year before considering "dating again." I considered this information for some time, and the more I thought about it, the more I realized that no amount of wishing or hoping would ever bring Ray back to me. So I chose to go ahead and "Play the Lottery"

(which is exactly what it is) on a free online dating site, being totally upfront about my health condition and setting numerous restrictions on the kind of man I was hoping to find. So far my response has been "Thanks but no thanks" to the handful of men willing to even consider the challenges. This does not surprise me at all, but the way I look at it is—if I don't play, I can't possibly "win" though the odds are stacked very high against finding an appropriate companion—one where we could mutually enjoy each other's company. I don't take any of it too seriously—it's just "out there" as one more effort to recreate a "normal" life despite my problems. Besides, in my opinion anyway, I still have a lot to offer the right person. It's finding that needle in a haystack that's so difficult. It took over two years of online dating (while I was still relatively healthy) for Ray to "find me." So this so-called "dating experiment" is an occasionally interesting distraction. I never knew until reading this book that women were often so hesitant about reaching out for a new companion. There is a ton of info here for counselors and laypeople that go well beyond this minor "insight" of mine. I heartily recommend it.

MV



HAPPY HOLIDAYS EVERYONE!

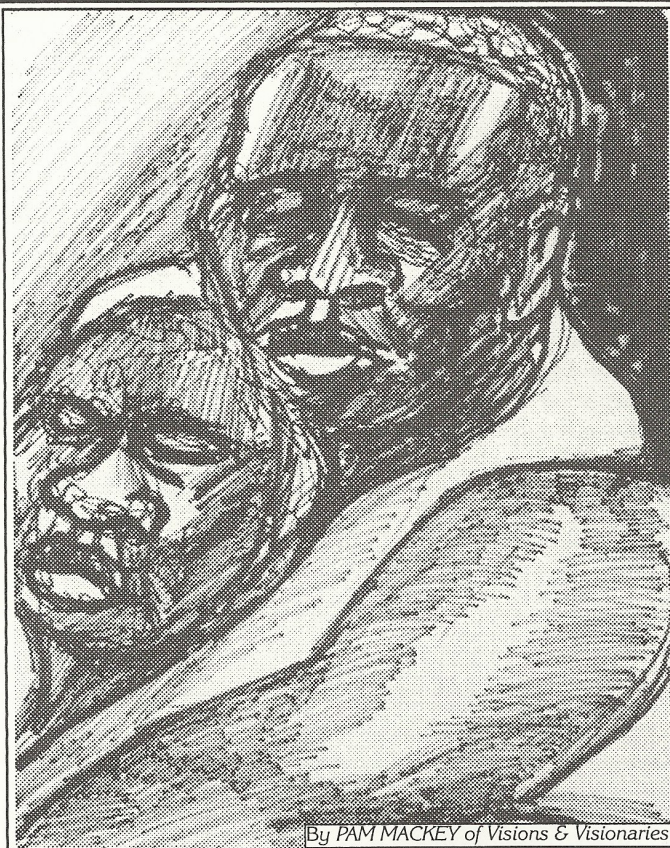
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