



*Healing the Heart Through the Creative Arts, Education & Advocacy*

Hope, Healing & Help for Trauma, Abuse & Mental Health

*Out of suffering have emerged the strongest souls; the most massive characters are seared with scars. - Kahlil Gibran*

The Surviving Spirit Newsletter December 2014

Season's Greetings folks,

*“Always hold firmly to the thought that each one of us can do something to bring some portion of misery to an end.” Author Unknown*

This sentiment helps keep me going in the never ending struggle to raise awareness on the impact of trauma, abuse and mental health challenges upon all of us, especially child abuse in all of its forms. Breaking down that denial, silence and apathy is hard, but with time, we shall prevail. I do believe that, but quite mindful that at times it doesn't seem to be the case. Yet we persevere in our efforts to be of service to others and for the greater good that it brings about.

Aaahh, the holidays and what it can bring up for so many of us impacted by trauma, abuse and mental health concerns. For myself, it feels like a slow crawl from Halloween till the week after New Years, when it finally feels like the weight of the past has been shrugged off of my shoulders.

Don't get me wrong, I do enjoy the festivities and time spent with those close to me. But there are constant reminders everyday of the losses and the hurts I have experienced in life. I don't even need to be consciously thinking about the respective traumas and abuse – but there they are. Fortunately, my learning of so many helpful coping skills and taking care of myself helps to negate the painful intrusions – I remind myself that it will pass, and it does. Grieving and trauma have their own way of being present when we don't want them there, but there they are nonetheless. I've learned to stop fighting the intrusions when they happen and just let them be, it helps to mitigate and shorten their 'visit' upon me. I hope that you also have found coping skills and tools to soften the blow of the hurts of the past when they come-a-knocking...I hope you find *hope, healing and help* with the resources shared in this newsletter and elsewhere to help give you comfort and solace when it is needed.

Here are a few to help with the holidays - [Navigating Holiday Stress](#) National Council on Alcoholism and Drug Dependence & [Surviving the Holidays](#) Surviving Spirit

All the best to you & take care, Michael Skinner

*“Life truly lived is a risky business, and if one puts up too many fences against risk one ends by shutting out life itself.” Kenneth S. Davis*

1] [The Heart of Healing-Thoughts from a Survivor Therapist](#) – Mikele Rauch LMFT

Since 1983, Mikele Rauch has worked with men and women survivors of sexual, religious, ritual and physical abuse. In addition to her work as a therapist, Mikele has also been a facilitator of [MaleSurvivor.org Weekends of Recovery](#) team since its inception in 2001. In partnership with MaleSurvivor, she is Founding Chair of [Taking Back Ourselves Weekends of Recovery](#), for women who are survivors of sexual abuse and assault to create community, hope, joy - and more life. She is the author of *Healing the Soul after Religious Abuse: The Dark Heaven of Recovery*. She lives, works and does her art near Boston, Massachusetts.

It appears that we humans are dupes of programming. Evolution plods along, yet often we are just puppets of repetition.

There are actions and reactions that were once necessary for survival, even if we no longer need them. The templates mapped out by our experiences often shape our sense of self. These experiences become pieces of our personal stories. They are embedded inside the hard drive of our human machine, below any words that could describe them. And despite small gains in intellectual acuity and technological prowess, the more primitive instincts still prevail, especially in moments of severe danger or stress.

....The seething and simmering from the trauma become our default positions when we are overwhelmed, exhausted or activated. We may repeat the same self-destructive behaviors, stick with familiar but terrible relationships, and engage with those old demons inside our brains, over and over again. Shame or fear, the ghosts of self-loathing or self-doubt, perhaps even the sound of our own name can suck us back into a black hole at the center of our core. The triggers and old stories recreate a mis-identity. They can define us in the shape of our violations instead of who we truly are. They may be the IT that addiction or even dissociation try to cover.

The self-blaming emptiness that we feel actually belongs to the negative event or person that betrayed us in the first place. We may know this intellectually, but often our bodies or our younger selves tell us otherwise. And, despite talk therapy, self-help groups, meditation, and commitment to health, support and sobriety—this may still be the pothole where we sink into the mud.

We try to remember all we've been told. We try to hold on to all we've learned. [Learn more](#)

*"The strongest principle of growth lies in human choice." George Elliot*

Excerpt From: [Healing the Soul after Religious Abuse: The Dark Heaven of Recovery](#) - Mikele Rauch

... Some say that when we really hear and are truly heard, something changes not only in our minds, but also in our bodies. So we bear witness. We have no illusions about what can be fixed. Yet when stories are told, and heard, something may change in our own bodies, our own voices. When words are spoken, or faces clearly seen, it can sear us with silence or with ah-hah. And perhaps, something happens in our souls ...

**About The Book** - Discrimination, persecution, shame, hatred, all in the name of God... Religious abuse is the physical, sexual or mental damage suffered by members of a faith community when its leaders exploit them. It devastates one's sense of self, principles or inner compass about your experience of the world, shame about your body, sexual orientation, inner values, relationships, and self

care. The harm reaches even to the core of the spirit where often there is no longer a place for a god of love or a love of what was once divine. Yet, there is often a longing to connect with the deepest part of oneself, without the trappings of the institution, or even the name of God.

Recovering the Soul after Religious Abuse: The Dark Heaven of Recovery, speaks about the impact of religious abuse not only on the psyche but the soul, and how to recover the deepest parts of the self, rediscover the sacred within or without the institutions of religion, and create meaning again.

There are powerful interviews with persons from all five religions, who were survivors of sexual, physical and ritual abuse, as well as homophobia, racism, sexism and misogyny in religious cultures. It looks at shame and its place in individual development and religious community. Healing the Soul explores leadership and narcissism in religious clergy, especially the powerful and potential dangerous connection between spiritual guide and those he or she serves. There is also a special section for Buddhist and Hindus about the guru disciple relationship and how abuses happen there. The book grapples with the paradox of "holiness" and spiritual stature, and how persons with such stature still are capable of doing harm.

Healing the Soul has both a personal story and a larger viewpoint, clinically and spiritually, about hope and possibilities in the face of darkness and alienation. [Learn more](#)

*"Be kinder than necessary; For everyone you meet is Fighting some kind of battle." Author Unknown*

2] [Beyond Survivor - The Wounded Warrior Blog](#): Guidelines for prospective guest bloggers

Topics are your choice, as long as there is a connection to child abuse in some form.

Posts can include: child abuse survivor stories, art and poetry, child abuse as a topic in the news media, as well as PTSD, D.I.D, and other areas of abuse "aftermath" that adult survivors are forced to deal with. Therapy, recovery, and healing from abuse and all forms of child advocacy and awareness are included. I am also happy to promote other writers that have published their own books on the above topics.

The post can be anonymous if you prefer. If you are happy to be yourself then you can also include photos, links to yourself on social media and your own website.

My aim is to make this blog a comprehensive resource for other survivors and also to promote awareness regarding all aspects of being a survivor of abuse. Speaking out and sharing our experiences is a great way to both help ourselves in our healing journey and to help others to understand us better.

Submissions are to be sent to [slippy1967@yahoo.com](mailto:slippy1967@yahoo.com) Ján L. Frayne [Learn more](#)

["Beyond Survivor - Rising from the ashes of childhood sexual abuse"](#) - Ján L. Frayne, author

*"What we have done for ourselves alone dies with us; what we have done for others and the world remains and is immortal." Albert Pike*

Why "Beyond Survivor" ?

I have survived much in the last four decades. From abuse in all forms, ill health, living on the streets, to business bankruptcy and personal financial ruin. I have found my way through and out of all these. In the process *I found my voice!*

Due to the way society views abuse very few men feel able to speak about what happened to them and many live a life in the shadows of the abuse they endured. I hope to be able to make these men see that they can speak out and seek help. There is life after abuse. Being a survivor is one heck of an achievement. Getting beyond surviving to the point of thriving is within the grasp of every survivor, male or female. We should all get to “Beyond Survivor”.

After much encouragement I decided to publish my first book. The book is a mix of poetry, prose and advice, some of which has been previously published on this website. Much is new work not released before. [Learn more](#)

*“When I was young I admired clever people. Now that I am old, I admire kind people.” Abraham Joshua Heschel*

### 3] [Double Hit of Childhood Trauma, Combat Stress May Cause Veterans' PTSD](#) - Health News

Madison, Wisconsin - A harsh childhood may prime brain circuits to develop post-traumatic stress disorder (PTSD) when the person experiences the stress of war later in life, according to a recent study from brain researchers at the University of Wisconsin School of Medicine and Public Health and the University of Pittsburgh.

While childhood trauma has been a known factor for later developing combat PTSD, the brain mechanisms that created the relationship weren't understood.

Researchers Dr. Ryan Herringa and Dr. Rasmus Birn, of the UW Department of Psychiatry, analyzed brain scans from 27 young combat veterans from Operation Enduring Freedom and Operation Iraqi Freedom. The veterans reported varying degrees of childhood maltreatment experiences, combat exposure, and combat PTSD symptoms, which allowed researchers to examine the relationship of all three measures to brain function.

They found that experiences of childhood maltreatment were associated with weaker connections between the amygdala and hippocampus and the ventral prefrontal cortex, a pathway important in the automatic or non-conscious regulation of fear. In contrast, combat PTSD symptoms were associated with an additional weakening of connections between the amygdala and hippocampus and the dorsal prefrontal cortex, a pathway important for effortful or more conscious regulation of fear. [Learn more](#)

*“There is a time when we must firmly choose the course we will follow, or the relentless drift of events will make the decision for us.”*

### 4] [Struggling to Overcome Depression and Return to the Working World](#) - New York Times

Idleness has a way of creeping up on Kevin Williams.

As a man of many passions and hobbies, he speaks enthusiastically about his love of sketching characters and writing stories; of reading comic books, watching movies and whipping up a meal in the kitchen. It has been much harder, however, for Mr. Williams, 50, to define his ambitions, to pinpoint his purpose and to voice the depths of the internal struggle that has plagued him for more than two decades.

In 1992, Mr. Williams received a diagnosis of a major depressive disorder, which has made it difficult not only to find and keep a steady job, but also to acclimate to a wider world so often unaccommodating of mental illness.

“I want to be flowing more in society, be more interactive,” said Mr. Williams, who has endured prolonged periods of limbo and stagnation.

The first sign that something was amiss came in his 20s. Mr. Williams said he would get into bed at night - and remain there well into the day. Weeks would roll by without his leaving home, days would pass without his showering. He was oblivious to the extent of his dormancy.

“My family members pointed it out to me,” Mr. Williams said. “They said, 'You’re not the same as you used to be.' I was always good in school, very talkative, very vibrant. My family saw the change.” He was convinced that they were overreacting, that he was simply in a temporary slump. To ease their worry, Mr. Williams complied with his family’s requests to visit a doctor.

He was upset and humbled by his depression diagnosis. He began attending an outpatient mental health program. In 1999, he completed a job-training course and held a few jobs over the next seven years, working as a messenger and a mail-room clerk.

“I’m happy getting a job,” Mr. Williams said. “I’m working. But there’s always that looming thought: Suppose I start showing symptoms of relapse.” [Read the entire article](#)

*“Nearly everyone is aware of dramatic changes in the world. Yet we continue to live in the assumption that we can ride out the changes without changing ourselves, coasting, as we have always coasted, on the historic wave of human development. What it will take to wake us up is a wave of equal size traveling in the opposite direction. That wave is already on its way.” Verlyn Klinkenborg*

5] [Voices from the Field Blog: Winter Weather Preparations for Those Living Unsheltered](#) – Darby Penney – SAMHSA's Homelessness Resource Center Blog

*Homelessness and Housing contributing writer Darby Penney discusses the onset of winter weather and what many cities have instituted in response to tragic deaths from hypothermia and other cold-related conditions to temporarily enhance access to shelter when the temperature falls.*

Living on the street can be daunting and dangerous at any time of the year, but in many parts of the country, the onset of winter weather can quickly make this a potentially lethal circumstance. In response to tragic deaths from hypothermia and other cold-related conditions, many cities have instituted Code Blue programs to temporarily enhance access to shelter when the temperature falls.

In New York City, for instance, the Department of Homeless Services initiates Code Blue when the

temperature falls to 32 degrees or lower, or if there are sustained winds or periods of intense snowfall. While a Code Blue is in effect, twice the usual number of street outreach vans are deployed to help locate people in need and offer them rides to shelter, assess them for medical needs, and provide warm clothing and food. In addition, people may access any of the agency's shelters and drop-in centers without going through the usual intake process. Many cities have similar programs, although the instigating weather conditions, rules, and available services vary from place to place.

But some people do not live in places with Code Blue programs, or, for a variety of reasons, may choose not to come into shelter. In some localities, people who are under the influence are not welcome to enter shelters, even during emergency weather conditions. But across the country, homelessness service providers, volunteers, and generous citizens have come up with ways to help unsheltered people survive frigid temperatures. [Learn more](#)

*“People start to heal the moment they feel heard.” Cheryl Richardson*

6] [Healing: Body Work](#) - “Don't Try This at Home” blog - Kathy Brous

Here's the simplest explanation why healing can not be done just by “cognitive” thought. Instead, healing is a physical and emotional process: [Bruce Perry: Rhythm Regulates the Brain](#)

A great resource just out September 2014 is “*The Body Keeps the Score*” by Bessel van der Kolk, MD. Healing starts with owning our “self,” he says. We need 100% acceptance of our self, especially our body, exactly as we are, no guilt, no self condemnation. Only by accepting ourselves as we are, do we become free to change. We must respect our body for putting us into trauma freeze; it was the only way to defend us, as Stephen Porges says.

Here's a summary of Dr. van der Kolk's “Do List” for body healing. Each step, however, requires trained specialists and hard work:

- Recognize language is a “miracle and tyranny...For real change, the body needs to learn that the danger has passed.”
- EMDR (Eye Movement Desensitization and Reprocessing)
- Yoga then teaches us how to inhabit our bodies here, right now; that's why it's been used for thousands of years.
- Neurofeedback programs done by trained specialists
- “Finding Your Voice” with theater, singing, and similar.

*“Trauma is the most avoided, ignored, denied, misunderstood and untreated cause of human suffering.” Dr Peter Levine, Author of Waking the Tiger*

A New Book - “[Don't Try This at Home](#)” - The Silent Epidemic of Attachment Disorder – *How I accidentally regressed myself back to infancy and healed it all*- Kathy Brous

Raised on Long Island, New York, Kathy survived a 30-year career in the fast lanes of New York City and Washington DC. Starting on Wall Street researching South African gold stocks, she was an international economist for 18 years, using her Japanese language skills to write and consult on U.S.-Japan trade and finance. In Washington, she became a technical writer, producing complex documents

for Pentagon subcontractors, her line for the last 12 years, while pursuing her hobby as an opera singer.

Suddenly in 2007, Kathy faced divorce from her 27-year marriage to her college sweetheart, leaving her bankrupt. A move to California was followed by the death of both her parents and then two bad rebound affairs - five life disasters in two years.

Those crises started her down a path of discovery and healing that she is now able to share with others.

*“Education is the most powerful weapon you can use to change the world.” Nelson Mandela*

7] [CAN YOU HEAR ME NOW](#) - Self Help Podcasts w/ host Annie O'Sullivan w/guest, David H. Nguyen, Ph.D., - [Studies Link of childhood Trauma and Cancer](#). 12/04/14 One hour show

[CANCER inCYTES](#) is a public health e-magazine that discusses the health-care needs of disadvantaged populations. The uniqueness of Cancer InCytes is its focus on the link between cancer and social injustice, producing and discussing the latest research on this subject. Our articles become training material for law enforcement, advocates, clinicians, scientists, social workers, and your next-door neighbor. Connecting childhood trauma, disease risk, and social injustice.

David H. Nguyen, Ph.D. Editor-in-Chief

Dave is a cancer biologist who does human rights scholarship from the biomedical perspective. He obtained his doctorate in Endocrinology from the University of California, Berkeley. His research finds new ways of understanding causes and treatments for cancers by studying the transcriptome of tumors in the physiological context of life stages, such as why childhood is a window of susceptibility for carcinogens. He also deciphers the biological processes that link childhood trauma to the risk for developing cancer during adulthood. His other human rights research is about cost-effective experiments to detect the age, race, and gender of anonymous human tissue sold for research purposes. He has co-authored articles in various peer-reviewed journals including Stem Cells, Cancer Research, Clinical Cancer Research, Cancer Cell, PLOS Computational Biology, Proceedings of the National Academy of Sciences, and Journal of Biological Chemistry. [d.hh.nguyen@cancerincytes.org](mailto:d.hh.nguyen@cancerincytes.org)

*“Those who play rarely become brittle in the face of stress or lose the healing capacity for humor.”  
Stuart Brown*

8] [America's Youngest Outcasts](#) - 2.5 million children in America - one in every 30 children - go to sleep without a home of their own each year. They are America's Youngest Outcasts.

America's Youngest Outcasts documents the number of homeless children in every state, their well-being, their risk for child homelessness, and state level planning and policy efforts. Using findings from numerous sources that include well-established national data sets as well as our own research, we rank the states in four domains, and then develop a composite of these domains to rank the states from 1 [best] to 50 [worst]. A page about the District of Columbia is also available.

By rolling over each of the states in the map below [*posted at their website*], you can open and download the state page from the report that displays some of the key data used in ranking each state.

The complete report is available for [download](#).

Information for members of the media can be [downloaded here](#).

*“The idea that everything is purposeful really changes the way you live. To think that everything that you do has a ripple effect, every word you speak, every action you make affects other people and the planet.” Victoria Moran*

9] [Watchdog calls for tighter regulation on foster care prescriber relationships with drug companies](#) - San Jose Mercury News - Scrutiny of doctors who prescribe psychotropic drugs to California foster children intensified Monday, with growing calls for regulators to consider whether financial relationships with pharmaceutical companies may be driving the excessive use of medication.

The outcry came from a leading consumer advocacy group as lawmakers stepped up their efforts to rein in reckless prescribing and the California Medical Board vowed to widen its investigation in response to this newspaper's ongoing series “*Drugging Our Kids*”. On Sunday, the newspaper reported that prescribers in the foster care system received more than twice as much as the typical California doctor in payments from big drug companies for meals, gifts, travel, speaking and industry-sponsored research. The newspaper also found that last year doctors who prescribed the most to California foster youth, on average, accepted almost four times as much as those who fell in a lower-prescribing group.

“We've known for years that the problem of drug manufacturer payments to doctors appears to have an out-sized influence in their prescribing practices,” said Carmen Balber, executive director of the nonprofit group Consumer Watchdog. “But this investigation was particularly disturbing because of the patients it affects. The conflict of interest is clear in these cases, and we think that action is long overdue.” [Read the entire article](#)

*“True friendship isn't about being there when its convenient, its about being there when its not”*  
*Anonymous*

10] [A Podcast for Your Mental Health](#) - The Atlantic

Former comedian Paul Gilmartin has built a devoted following for *The Mental-Illness Happy Hour*, which tackles everything from incest to alcoholism to serial killers.

Paul Gilmartin can spot his listeners well before they introduce themselves to him. They look like they want to cry, and their first words are usually something along the lines of “I just want to say ...” Gilmartin immediately hugs them, and the conversation that follows is far from anything two people who just met would ordinarily hold.

Gilmartin, 51, is the creator and host of [The Mental-Illness Happy Hour](#), a weekly two-hour trudge to the darkest-and most joyful-corners of the human condition. He records the podcast in his hometown of Los Angeles, and the show is built around interviews with celebrities, artists, therapists, and podcast listeners; anonymous surveys; and Gilmartin's narration of his own struggles with depression, addiction, and overcoming sexual abuse. Thirty-five thousand people download the podcast each week, and some episodes-interviews he's held with Marc Maron, Maria Bamford, and Adam Carolla, for example-have been downloaded more than 80,000 times. *The Mental-Illness Happy Hour* website is home to an active listener forum, and the show's 200th episode aired on November 21.



The podcast serves as a place of community and affirmation for those who struggle with mental illness, including Gilmartin, who has been undergoing treatment for clinical depression since 1999 and has gained clarity on his own issues through talking with his guests and corresponding with his listeners. It was while interviewing comedian Danielle Koenig during episode 16 of the podcast that Gilmartin realized on-air that he had been molested by a neighbor as a young boy, and the revelation that he was a survivor of incest began its slow simmer while talking with radio personality Phil Hendrie on episode 59. [Read the entire article](#)

*“There are years that ask questions and years that answer.” Zora Neale Hurston*

11] [Leading Trauma Expert Offers Hope to Survivors of Complex Trauma in New Book](#) - Digital Journal

Christine A. Courtois, PhD, ABPP, a licensed psychologist in independent practice in Washington DC and the national clinical trauma consultant for Promises Treatment Centers and Elements Behavioral Health, offers essential tools and reassures complex trauma survivors that there is hope in her new book *It's Not You, It's What Happened to You: Complex Trauma and Treatment*.

“The book is a brief, focused and easy-to-read explanation for trauma survivors of what they are going through, how all of this is connected and related to treatment, and what treatment options are available,” Dr. Courtois offers.

Dr. David Sack, CEO of Elements Behavioral Health, wrote the book's foreword, saying, in part, “Dr. Courtois' book never shies away from its unflinching portrait of how trauma can shape a person's life, but her message is one of hope. While there is no one-size-fits-all treatment for the problems caused by traumatic events, people can free themselves emotionally from their powerful psychological consequences.”

“A lot of emotional turmoil comes from the fact that trauma survivors often blame themselves, especially children who've been traumatized or mistreated in any way and even more so if it's repeated,” Dr. Courtois says. “They feel it's about them, that they're bad or they did something bad, that they should have known what to do to have it stop. It has a major impact on their identity formation, sense of self-worth, and ability to relate to and trust other people.”

A portion of the book proceeds will be donated to nonprofit organizations dedicated to helping trauma survivors. [Learn more](#)

*“It is loves nature to be expressed.” Steve Maraboli*

12] **Webinar Series on Trauma-Informed Peer Support [TIPS]**

SAMHSA's National Center for Trauma-Informed Care (NCTIC) hosted a series of three 75-minute webinars in September 2014 that introduced key concepts in NCTIC's day-long Trauma-Informed Peer Support (TIPS) training. The primary audience is people who provide peer support - including people working as peer specialists or in similar roles, people involved in independent peer support groups, and people working in or receiving services from peer-run programs. The series would also be of interest to

administrators, clinicians, and supervisors in organizations that employ peer specialists and people in similar roles, or those interested in incorporating trauma-informed peer support into their programs. Each session includes 60 minutes of presentation and 15 minutes for discussion and questions.

All three sessions are archived:

**[Trauma and its Impact/Cultural Considerations](#)** - Darby Penney & Cathy Cave

Presenters will define trauma and discuss its impact on individuals and communities, as well as the prevalence of trauma histories among people who use services. This session will also address how the experience of trauma and healing is strongly affected by cultural considerations such as race and ethnicity, gender, age, language and family history.

**[Peer support basics/Trauma-informed Practices](#)** - Darby Penney & Leah Harris

This session will introduce the basic concepts, values and principles of genuine peer support as developed and practiced by the mental health consumer/survivor/ex-patient movement over the past 40+ years. The basics of trauma-informed practices, which can be applied in any setting, will also be discussed.

**[Applying Trauma-Informed Practices to Peer Support](#)** - Darby Penney & Michael Skinner

This session will conclude the series with a discussion of applying trauma-informed practices to peer support through the development of mutual, reciprocal relationships. The discussion will be illustrated with examples of issues that may arise in trauma-informed peer support, such as understanding self-injury as a coping strategy, and the effective use of personal narrative in healing from trauma.

Presenters' Bios:

**Cathy Cave** has more than 25 years' experience as an administrator, facilitator and consultant specializing in cultural competence and disparities elimination, trauma-informed services and supports, and leadership in child welfare, juvenile justice, disaster response, mental health, and substance abuse services. She was one of New York State's early trauma champions, coordinating county collaboratives and the Mastering the Key Connection Statewide Trauma Conferences in the mid-1990s. Currently, Cathy provides technical assistance to SAMHSA's National Center for Trauma-Informed Care (NCTIC) and is Director of Training for the Mental Health Empowerment Project. She is the former Director for Cultural Competence for the New York State Office of Mental Health. As a consultant, she uses her survivor, family, community and provider perspectives to facilitate organizational change to improve service quality at local, state and national levels.

**Leah Harris** is a mother, activist, writer, and a person with a psychiatric history. She is also the daughter of two parents who were diagnosed with severe mental illness, both of whom died very young as a result of their disabilities. This depth of personal experience fuels Leah's unstoppable commitment to ensuring human rights and a meaningful life in the community for people experiencing emotional distress and extreme states. Leah has been a nationally recognized leader in the consumer/survivor movement for over a decade. She has written and spoken widely about her own experiences of trauma and healing, and as a family member of people diagnosed with mental health issues. She is currently director of communications and development at the National Empowerment Center, consults on trauma-informed practice for SAMHSA's NCTIC, and on new innovations in suicide prevention with the Center for Dignity, Recovery, and Stigma Elimination, Mental Health America of San Francisco. She is an Emotional CPR facilitator, and promotes alternative approaches to supporting individuals

through distress and crisis and into recovery. <http://leahidaharris.com/>

**Darby Penney** is a long-time activist in the human rights movement for people with psychiatric labels and a Senior Research Associate with Advocates for Human Potential, Inc. She provides training and technical assistance to SAMHSA's NCTIC and is a consultant to the Mental Health Empowerment Project's "Creating Trauma-Informed Communities" Project. She is a co-author of the SAMHSA NCTIC technical assistance tool, Engaging Women in Trauma-Informed Peer Support: A Guidebook, and a member of the team that developed SAMHSA's Consumer-Operated Programs Toolkit. Darby was formerly Director of Recipient Affairs at the New York State Office of Mental Health, where she brought the perspectives of people with psychiatric histories into the policymaking process. She is co-author with Peter Stastny of *The Lives They Left Behind: Suitcases from a State Hospital Attic* (Bellevue Literary Press, 2008) and a website [[www.suitcaseexhibit.org](http://www.suitcaseexhibit.org)] and traveling exhibit of the same name.

**Michael Skinner** is a nationally known, award-winning advocate survivor addressing the issues of trauma, abuse and mental health concerns through public speaking and his music. He has spoken at the National Press Club, was a keynote presenter for a conference held by the United Nations, The State Department and Georgetown University on the sexual exploitation and trafficking of children and adults. He has appeared on many TV, radio and Internet shows; he was part of the Oprah Winfrey Shows that addressed the issues of males sexually abused as children. His music and advocacy website has been visited by well over a million visitors and he has formed the non-profit, the Surviving Spirit, that offers Hope, Healing and Help for those impacted by trauma, abuse and mental health challenges through the creative arts, advocacy, education, a monthly newsletter and website, [www.survivingspirit.com](http://www.survivingspirit.com). His role as a consultant and trainer for SAMHSA's NCTIC has been crucial in helping to shape the policy initiatives and directives for the delivery and implementation of trauma-informed care and services. [www.mskinnermusic.com](http://www.mskinnermusic.com)

*"Whatever you can do or dream you can begin it; boldness has a genius, power and magic in it."*  
Johann Wolfgang von Goethe

13] [Mental illness, addiction & most chronic illness is linked to childhood loss & trauma](#) – Beyond Meds

Here Gabor Mate tells us the medical profession are the most difficult to speak to about what he's learned in his work because they don't recognize that so-called mental illness and most physical chronic illness is the result of childhood loss and trauma.

We don't need anymore research he says. We know the cause of these issues. SEE: More: [Adverse Childhood Experiences Study](#) [14 minute video - trauma in childhood associated with many later problems, including that which gets labeled mental illness]

**He points out that the barrier to the health professionals is that they've not cared for their own trauma.** This is clearly true. Many professionals are afraid of their own darkness. This makes it impossible for them to correctly recognize issues in their patients and clients.

I love Gabor Mate. If you're not familiar with his work please view this video. He's brilliant, inspired and right on.

[Gábor Máté MD: Attachment](#) = Wholeness and Health or Disease, ADD, Addiction, Violence

*“Vulnerability is our most accurate measurement of courage.” Brene Brown*

14] [Mental Illness Is Unfairly Scapegoated in Mass Shootings](#) - Elizabeth Kulze

Two years after the Sandy Hook shooting, a new Vanderbilt University study shows that trying to link mental illness to extreme gun violence actually distracts us from the real issues

Two years ago this Sunday, 20-year-old Adam Lanza burst into Sandy Hook Elementary School in Newtown, Connecticut, and fatally shot 20 children and six adults with his mother’s Bushmaster XM15-E2S rifle. The incident—one of the deadliest mass shootings in U.S. history—left the entire country reeling and ignited a national debate over gun control and mental health. Many were led to believe that the latter was largely to blame for the massacre, but according to a new study by Vanderbilt University, mental illness is wrongly used as a scapegoat when it comes to extreme acts of violence.

“Gun discourse after mass shootings often perpetuates the fear that 'some crazy person is going to come shoot me,' ” says Dr. Jonathan Metzl, the study’s lead author. “But if you look at the research, it’s not the 'crazy' person you have to fear.”

“Our research finds that across the board the mentally ill are 60 to 120 percent more likely than the average person to be the victims of violent crime rather than the perpetrators.”

Metzl and his colleagues analyzed data and literature from the past 40 years and found that the link between individual mental health issues and mass shootings is actually unsubstantiated. Instead, they found that most gun violence is committed by relatives, friends or acquaintances of the victim[s], rather than a lone psychopath.

“Fewer than 5 percent of the 120,000 gun-related killings in the United States between 2001 and 2010 were perpetrated by people diagnosed with mental illness,” they write. “Our research finds that across the board, the mentally ill are 60 to 120 percent more likely than the average person to be the victims of violent crime rather than the perpetrators.” [Read the entire article](#)

*“Life is a series of experiences, each of which makes us bigger, even though it is hard to realize this. For the world was built to develop character, and we must learn that the setbacks and griefs which we endure help us in our marching onward.” Henry Ford*

15] [The Selling of Attention Deficit Disorder](#) – By Alan Schwarz, New York Times

After more than 50 years leading the fight to legitimize attention deficit hyperactivity disorder, Keith Conners could be celebrating.

Severely hyperactive and impulsive children, once shunned as bad seeds, are now recognized as having a real neurological problem. Doctors and parents have largely accepted drugs like Adderall and Concerta to temper the traits of classic A.D.H.D., helping youngsters succeed in school and beyond.

But Dr. Conners did not feel triumphant this fall as he addressed a group of fellow A.D.H.D. specialists in Washington. He noted that recent data from the Centers for Disease Control and Prevention show that the diagnosis had been made in 15 percent of high school-age children, and that the number of children on medication for the disorder had soared to 3.5 million from 600,000 in 1990. He questioned the rising rates of diagnosis and called them “a national disaster of dangerous proportions.”

“The numbers make it look like an epidemic. Well, it’s not. It’s preposterous,” Dr. Conners, a psychologist and professor emeritus at Duke University, said in a subsequent interview. “This is a concoction to justify the giving out of medication at unprecedented and unjustifiable levels.”

[Read the entire article](#)

*How to Begin:*

*Rebuilding Life from Within  
Love, yourself unconditionally.  
Release your bottled up emotions.  
Make time for long walks, alone.  
Avoid living beyond your means.  
Nurture your inner strength.  
Stop apologizing for being you.  
Surround yourself with positive people.  
Embrace your situation, whatever it may be. Author unknown*

Take care, Mike, Mary, Zsuzsi, Becky, Cynthia, Lynn & Mary Ann

PS. Please share this with your friends & if you have received this in error, please let me know – [mikeskinner@comcast.net](mailto:mikeskinner@comcast.net)

*Our lives begin to end the day we become silent about things that matter. Martin Luther King, Jr.*

*A diagnosis is not a destiny*

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**"BE the change you want to see in the world." Mohandas Gandhi**