



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 March 2015

“My sun sets to rise again.” Elizabeth Barrett Browning

Hello Folks,

They say Spring is around the corner, but looking out my office window, I'm not so sure. I see a snowbank that is five feet high and at least fifteen feet wide. This is the accumulation of snow from the past several weeks that had to be shoveled off of the driveway. This snow bank reminds me of a castle wall, and I think back to my time touring Great Britain with the hard rock band, TRAIN. We performed many times in the city of Chester, England. Playing music was fun, but so was the time I had in exploring this city. The original Roman fortifications still encircled Chester and what was amazing to me, was the width of the parapets – they were built to allow their chariots to rush to the defense of breaches upon the fortification.

So now, I look out my half covered windows and think back to a time of peace and serenity for me, creating music and starting a family. Two incredible years spent in Great Britain, that allowed me some time away from my family of origin, giving me time to reflect upon my life and how hurtful my childhood was...it's funny how we can have memories of nice times and yet they can also be tied in to the dark times of our lives.

And that can be a conundrum for so many of us dealing with trauma and abuse concerns from the past. I know for myself, seeing young children smiling and happy at play, with or without their parents, brings a warm glow to my soul, and yet, there is also a cold chill that creeps in when I think of myself as a child and not having that playfulness...or, I can be reminded of my own children when they were young and how they brought such joy into my life...and yet, later on when struggling with depression and post traumatic stress, they were taken out of my life due a horrible divorce where all that had to be said was that I was “*mentally ill*” a few times, and well, that wrecked everything...even with no history of violence or abuse at either my ex-wife or my children.

Trauma is a strange creature to me, I've learned about it, I advocate to help raise awareness on its impact upon all of us, and yet for all I learn and continue to learn, it still can be such a darn mystery to me. I'm flooded with good memories and thoughts and then somehow, it allows the other not-so-nice feelings and hurts to come into view. Strange indeed to me...and that is part of the reason why I find great comfort in what is shared in this newsletter and from other resources – there is *Hope*, there is *Healing* and there is *Help*...and it helps to remind me, that I'm not alone in my struggles. We are a community of healing...and that gives me joy.

Someday I hope to be able to walk upon those castle walls again...

Take care, Michael Skinner

“If we fail to look after others when they need help, who will look after us?” Unknown

1] [Helping to Unite by Generating Mental Empowerment](#) [Hug Me Ink]

H.U.G. M.E. Ink is a peer-led, peer-run, nonprofit increasing mental health awareness and offering recovery sustainability through the arts.

Mission - We work to remove stigma from mental illness by educating through film, theater, poetry, literature, music & the arts. We aim to empower by informing the community on available mental health care resources. We promote sustained recovery through participation in the arts.

What we do?

Job Coaching

Resume writing workshops

Interview training workshops

Creative therapies such as art, music and drama

Promote community engagement

Group tours and outings

Outreach through the arts

Peer to Peer Counseling

Homeless Outreach

Participation on various Boards

Participation on various conferences [this includes not only sitting on steering committees but also presenting workshops]

We're always creating and organizing new projects to help promote mental health awareness. Our popular film series, [MANCHESTER HIGH](#), has been screened at schools, symposiums, conferences, town hall meetings and youth summits.

MANCHESTER HIGH is an independent film in the style of the TV shows GLEE, DEGRASSI, ONE TREE HILL and LAGUNA BEACH and of course movies like STAND AND DELIVER, DANGEROUS MINDS, FACING THE GIANTS and TO SAVE A LIFE.

Plot Outline - MANCHESTER HIGH tells the story of a group of teens at a public high school and the issues they encounter. This new project will showcase teens in real situations such as depression, suicide, bullying, fitting in, popularity, dealing with divorce, drugs, alcohol, and other issues teens go through.

MANCHESTER HIGH: Nobody Heard Me Cry, is the continuation of the MANCHESTER HIGH series, about how teens come together in the midst of tragedy to help each other out. How far would someone go to be popular? Is being popular worth dying for? In this compelling drama, one student

will go all lengths to be noticed and even too far. [Current Projects – 2015](#)

“Before sunlight can shine through a window, the blinds must be raised.” American Proverb

2] [Thriving At Work: A Guidebook for Survivors of Childhood Abuse](#) – Books – Surviving Spirit by Nancy Brooks and Cynthia Krainin

Foreword by Ellen Bass, internationally renowned author of, *“The Courage To Heal”*

Quick Overview

Are you a survivor of past abuse/trauma? Do you doubt yourself constantly, feel like you have a personality flaw/quirk and when you do something well you consider it a fluke? These are common feelings experienced by many abuse survivors.

The workplace can easily become a stage where family abuse and trauma events are reenacted.

A power differential always exists with authority figures. Co-workers may resemble siblings competing for approval from the authority figure. Work expectations elicit old fears of making mistakes and paying for them later. Long hours in the same setting contribute to feeling trapped. Thriving At Work is a tool to give hope to those struggling with Post Traumatic Stress.

Every Thriving At Work reader is given a road-map pointing out road blocks to success, job choices based on recovery needs, techniques to navigate unexpected situations and difficult people and practices to help you feel safe and give you a sense of control at work.

Who should read this book?

- Survivors of past abuse, trauma, family substance abuse, domestic violence, etc.
- Individuals who work with survivors: supervisors, managers, HR and Employee Assistance providers, co-workers, family and friends.
- Support providers: therapists, career counselors, trainers, health care practitioners, body workers, victim advocates, etc.
- Personnel within organizations: hospitals, courts, corrections facilities, shelters, rehab programs, advocacy groups, etc.

Please note, the purchase of, Thriving At Work: A Guidebook for Survivors of Childhood Abuse, from the web store helps The Surviving Spirit in paying our bills for the website, etc. Thanks!

“You cannot shake hands with a clenched fist.” Indira Gandhi

3] [One of Your Employees Is Probably Hiding a Mental Health Problem](#) - INC Magazine

If you've got more than a couple of employees, the odds are decent that one of them might be concealing mental health struggles, according to a new survey.

Very slowly entrepreneurs are starting to open up about their mental health struggles and talk publicly about the toll starting up can take on their mental well being. That's a helpful breath of fresh air for

fellow founders and those contemplating starting a business, but are employees following suit and feeling increasingly able to be open about any mental health issues they might face?

Not so much, according to new research by Dr. Carolyn Dewa of the University of Toronto. She surveyed more than 2,000 Canadians, asking them how open they'd be willing to be about any mental health issues they were facing. A full third said that they'd hide such problems from their boss, citing worries about how publically acknowledging their issues would affect their careers as the reason.

The cost of stigma

That's obviously bad news for employees who are struggling in silence with depression, anxiety and other mental health worries, but it's pretty terrible for employers too. According to the National Business Group on Health, **untreated mental illness costs American employers a hefty \$100 billion a year.**

The continued fear around talking about these problems at work flagged up by this new study certainly can't be helping workers acknowledge mental health problems and get the time and help they need to deal with them. As Dewa commented, *"stigma is a barrier to people seeking help. Yet by getting treatment, it would benefit the worker and the workplace, and minimize productivity loss."*

How to be a better boss to employees with mental health issues

If you find these numbers concerning and want to be the type of boss who employees feel they can confide in, advice abounds. Previously here on Inc.com we outlined seven ways to be a better boss to employees with mental health issues, including simple steps like "checking in" regularly with affected employees and more substantive support like offering the workplace accommodations they need. [Learn more](#)

"Every man has his secret sorrows which the world knows not; and often times we call a man cold when he is only sad.." Henry W. Longfellow

4] [Stress caused by discrimination linked to mental health issues among Latino teens](#) – Medical News Today

Latino adolescents who experience discrimination-related stress are more likely to experience anxiety, depression, and issues with sleep, according to research led by NYU's Steinhardt School of Culture, Education, and Human Development. These mental health outcomes were more pronounced among Latino teens born in the U.S. to immigrant parents, as opposed to foreign-born teens.

The longitudinal study, which appears online in the journal *Child Development*, suggests that first-generation immigrants and second-generation immigrants are affected differently by discrimination-related stress.

Latinos are the largest and fastest growing ethnic minority in the U.S., making up 15 percent of the population. Research has shown that many young Latinos face discrimination in their daily lives.

"Discrimination has been linked to a variety of mental health symptoms," said Selcuk Sirin, associate professor of applied psychology at NYU Steinhardt and the study's lead author. "Adolescence may be a

particularly vulnerable time for discrimination, as forming one's cultural, ethnic, and racial identities is central during this developmental period." [Learn more](#)

“When we see others as the enemy, we risk becoming what we hate. When we oppress others, we end up oppressing ourselves. All of our humanity is dependent upon recognizing the humanity in others.”
Desmond Tutu

5] [Dr. Nadine Burke Harris: How childhood trauma affects health across a lifetime](#) – TED Talk Video 15:58 minutes

Childhood trauma isn't something you just get over as you grow up. Pediatrician Nadine Burke Harris explains that the repeated stress of abuse, neglect and parents struggling with mental health or substance abuse issues has real, tangible effects on the development of the brain. This unfolds across a lifetime, to the point where those who've experienced high levels of trauma are at triple the risk for heart disease and lung cancer. An impassioned plea for pediatric medicine to confront the prevention and treatment of trauma, head-on.

In the mid-'90s, the CDC and Kaiser Permanente discovered an exposure that dramatically increased the risk for seven out of 10 of the leading causes of death in the United States. In high doses, it affects brain development, the immune system, hormonal systems, and even the way our DNA is read and transcribed. Folks who are exposed in very high doses have triple the lifetime risk of heart disease and lung cancer and a 20-year difference in life expectancy. And yet, doctors today are not trained in routine screening or treatment. Now, the exposure I'm talking about is not a pesticide or a packaging chemical. It's childhood trauma.

[The Adverse Childhood Experiences Study](#) is something that everybody needs to know about. It was done by Dr. Vince Felitti at Kaiser and Dr. Bob Anda at the CDC, and together, they asked 17,500 adults about their history of exposure to what they called “adverse childhood experiences,” or ACEs. Those include physical, emotional, or sexual abuse; physical or emotional neglect; parental mental illness, substance dependence, incarceration; parental separation or divorce; or domestic violence. For every yes, you would get a point on your ACE score. And then what they did was they correlated these ACE scores against health outcomes. What they found was striking. Two things: Number one, ACEs are incredibly common. Sixty-seven percent of the population had at least one ACE, and 12.6 percent, one in eight, had four or more ACEs. The second thing that they found was that there was a dose-response relationship between ACEs and health outcomes: the higher your ACE score, the worse your health outcomes. For a person with an ACE score of four or more, their relative risk of chronic obstructive pulmonary disease was two and a half times that of someone with an ACE score of zero. For hepatitis, it was also two and a half times. For depression, it was four and a half times. For suicidality, it was 12 times. A person with an ACE score of seven or more had triple the lifetime risk of lung cancer and three and a half times the risk of ischemic heart disease, the number one killer in the United States of America.

The other thing that happens when you understand this science is that you want to shout it from the rooftops, because this isn't just an issue for kids in Bayview. I figured the minute that everybody else heard about this, it would be routine screening, multi-disciplinary treatment teams, and it would be a race to the most effective clinical treatment protocols. Yeah. That did not happen. And that was a huge learning for me. What I had thought of as simply best clinical practice I now understand to be a

movement. *In the words of Dr. Robert Block, the former President of the American Academy of Pediatrics, “Adverse childhood experiences are the single greatest unaddressed public health threat facing our nation today.”* And for a lot of people, that's a terrifying prospect. The scope and scale of the problem seems so large that it feels overwhelming to think about how we might approach it. But for me, that's actually where the hopes lies, because when we have the right framework, when we recognize this to be a public health crisis, then we can begin to use the right tool kit to come up with solutions. From tobacco to lead poisoning to HIV/AIDS, the United States actually has quite a strong track record with addressing public health problems, but replicating those successes with ACEs and toxic stress is going to take determination and commitment, and when I look at what our nation's response has been so far, I wonder, why haven't we taken this more seriously? [Read the entire transcript](#)

“Do your little bit of good where you are; it's those little bits of good put together that overwhelm the world.” Desmond Tutu

6] [Dear Gov. Tom Wolf and Education Secretary-designee Pedro Rivera](#) : Childhood trauma is the elephant in the classroom – NewsWorks – Daun Kauffman, veteran educator in North Philadelphia

I write regarding injured, marginalized children in Pennsylvania schools, to ask that you include them explicitly in a broad, “Healthy PA” paradigm in your new administration.

I am an educator serving children in elementary and middle school classrooms in my own neighborhood in a major urban center for 14 years. I advocate today regarding an aspect of education rarely discussed, but clearly visible to experienced classroom educators.

Childhood trauma is a tragic, life-changing assault on the minds and lives of children in our schools. Unaddressed [which is the general, present state], its ravages continue, life-long. This applies to all neighborhoods in Pennsylvania.

Childhood Trauma is not “poverty.” It is a response of overwhelming, helpless terror to events some call “adverse childhood experience” [ACE]. It can result when adults who are supposed to love and protect, instead, cause hurt: physical, emotional and sexual abuse; physical and emotional neglect; single-parent homes [because of separation, divorce, incarceration]; violence; community violence; substance abuse; and mental illness. When a child is dealing with chronic ACEs in three or more categories, the impact can be devastating personally. It is powerful and shockingly prevalent.

We won't have a successful education paradigm, or even accurately interpret academic results, until we explicitly confront trauma's overwhelming impact.

Childhood trauma in our education system

The intersection of our educational system with childhood trauma is the most accessible and immediate aspect of this heartbreaking scourge. Dealing first with childhood trauma in education is analogous to putting the customer and the customer's needs first in business. Dealing with childhood trauma is a prerequisite to understanding our education results. Understanding results, in turn, is a prerequisite to interpreting our many “reform” efforts with curriculum, pedagogy, and assessment, as well as training and retention of staff.

Then, understanding the childhood trauma variable is crucial for accurate reflection about effective education investment in Pennsylvania.

Successful, trauma-competent schools require consistent, system-wide training and response. Conversely, I can assure you from hard experience, with scars, that attempting to “educate” first, without understanding and without dealing with the neurobiological impacts of childhood trauma is exactly like putting the cart before the horse. [Read the entire article](#)

Sadly, Childhood trauma is still “the elephant in the room”.

Unrecognized or unacknowledged and unresolved, Childhood Trauma obstructs education efforts and destroys lives.

[Lucid Witness](#) - Daun Kauffman on urban education, on justice, mercy, and love . . . with a humble spirit as the goal.

Daun Kauffman has taught . . . [actually, mostly learned] in Philadelphia public schools for 14 years.

Prior to public education worked as a business executive for about 17 years and earlier as a bio-medical photographer.

Hard to predict....Traditional at heart.... Artist's soul.

“Dreams are the touchstones of our character.” Henry David Thoreau

7] [Human_Trafficking_in_Americas_Schools_Final_1-9-15.pdf](#)

This report was written under U.S. Department of Education Grant Number Q184L070139 by Jeneé Littrell of the Grossmont Union High School District. Eve Birge served as the grant monitor. This report was designed for the U.S. Department of Education under Contract Number EDESE12O0035 with American Institutes for Research, Inc. Rita Foy Moss served as the contracting officer’s representative for the National Center on Safe Supportive Learning Environments technical assistance center (NCSSLE). The views expressed herein do not necessarily represent the positions or policies of the Department of Education. No official endorsement by the Department of any product, commodity, service or enterprise mentioned in this publication is intended or should be inferred. For the reader’s convenience, this publication contains information about and from outside organizations, including hyperlinks and URLs. Inclusion of such information does not constitute the Department’s endorsement.

U.S. Department of Education Arne Duncan Secretary

“ONE OUT OF EIGHT endangered runaway youths is likely a victim of human trafficking.” National Center for Missing and Exploited Children

“I had a feeling that my teacher knew something was wrong in my life. I would notice her looking at me . . . almost like she wanted to say something to me. I wanted to open up to her, but I was afraid she would judge me. I was afraid that she wouldn’t understand.” Child sex trafficking survivor, 16 years old

Not all traffickers are adults: A suburban Minneapolis high school cheerleader was arrested for allegedly recruiting and pimping a younger student by creating an online ad and driving the victim to potential customers. Star Tribune

*“Great thoughts speak only to the thoughtful mind, but great actions speak to all mankind.”
Theodore Roosevelt*

8] [Grace As Justice](#) - No one can do everything, but everyone can do something. What's in your hand?

Welcome to *Grace As Justice*, a magazine whose central purpose is to combat human slavery and trafficking.

Grace As Justice Magazine is set for its first publication on May 1, 2015.

Feel free to explore this website in its present, budding stage for information on the publication's purpose, how to submit articles, and the editor's vision.

Come back often and learn how you can fight to end human trafficking and slavery!

The mission of *Grace As Justice* is to use a written platform to help eradicate human trafficking and slavery. Words, photos and videos are a powerful force in the world. Most of world media has used these methods of power to create or increase hatred, destruction, strife, violence, division, genocide, gendecide and everything else that is evil. *Grace As Justice* seeks to use these powerful tools to end human trafficking and slavery. We are intent on showing how the world is working together to destroy the atrocity of slavery.

If you are looking for hope; seeing the world for what is good; and joining the fight to eradicate slavery, you are in the right place.

Grace As Justice has a threefold purpose:

1. To continue to raise awareness about the atrocity of human trafficking.
2. To supply information to those people interested in helping to end this atrocity with volunteer opportunities and ideas to start their own fight.
3. To be a forum for all anti-trafficking groups to meet and promote their work, while reaching out to those interested in working with them.
4. To financially support anti-human trafficking groups as *Grace As Justice* begins marketing and advertisements.

Contact - graceasjustice@gmail.com

“It is precisely the possibility of realizing a dream that makes life interesting.” Paulo Coelho

9] [Why Do We Hurt Our Children?](#) - Truth Can Prevail – Michael Goldfield

About Michael Goldfield - I have always been passionate about promoting equality and condemning racism. I share with Alice Miller, Jordan Riak and countless others the belief that all the violence and

greed in our world is the result of the maltreatment of children.

Why Do We Hurt Our Children?

“Almost everyone in Western societies agrees that it is morally wrong for people to settle arguments or impose their will on each other with blows. When a big kid hits a little kid on the playground, we call him a bully; five years later he punches a woman for her wallet and is called a mugger; later still, when he slugs a fellow worker who insults him, he is called a troublemaker, but when he becomes a father and hits his tiresome, disobedient or disrespectful child, we call him a disciplinarian. Why is this rung on a ladder of interpersonal violence regarded so differently from the rest?” Penelope Leach

As a psychologist who specialized in working with emotionally disturbed children and as a person who has a special fondness for children, I am extremely troubled that punishment, both physical and otherwise, is an intrinsic part of child rearing in the United States. None of my three children, now adults, were ever punished. Just as people who state, “I was spanked and punished and I turned out OK,” my children are able to say, “I was never spanked or punished and I turned out OK.” And based on the kind of people they are as adults, I would agree that, not only did they turn out OK, but they are much more caring of others, including their children, than most of their contemporaries. They do not, of course, punish their children.

However, I do not wish to prove through my children or my grandchildren that punishment is totally unnecessary in order to grow up to be a socially appropriate and caring person. We already know this from studies of cultures where children are never punished. I hope to show, instead, that punishing children is a malevolent act that is harmful to children and, ultimately, to the community and society in which it takes place. The punishment of one human being by another is behavior in which the punisher has, or believes he has, the right to hurt and violate a person he perceives as his social inferior. Punishing another individual of one’s species is a human cultural invention. It is not found in all cultures nor in the animal world. Its utilization as a child-rearing method seems to go hand in hand with the development of civilization.

A person hurting another as a result of a temporary loss of emotional control is not punishment. Such behavior is a different form of violence. Punishment is a deliberate, controlled act with a conscious purpose. It is, of course, a terrible, troublesome, and dangerous fact that, in our society, parental loss of control, accompanied by physical and verbal abuse of children, is tolerated. However, such behavior is not the subject of this paper. Our society, although it may not do much to prevent it, does not openly condone child abuse. But it does openly condone and sanction punishing children, physically and otherwise. What bothers me so much about punishing children is that it is a conscious effort to hurt them physically and/or emotionally. I find it hard to understand, even when it is explained as a way of teaching them proper behavior, why someone would intentionally choose to hurt the life they contributed to creating (or chose to care for through adoption.) I also find it incredible that parents, and many authorities in the areas of mental and physical health, child development, and human morality, cannot see that by hurting children, we are teaching them that it is moral and right to hurt other human beings.

The Origins Of Punishment [Read the entire article](#)

“Differences are not intended to separate, to alienate. We are different precisely in order to realize our

need of one another.” Desmond Tutu

10] [MS Hope](#) - GIVING Hope TO THOSE LIVING WITH MS

My name is Matt Embry and in 1995 I was diagnosed with Multiple Sclerosis. I've developed MS Hope for those newly diagnosed or currently dealing with MS. My goal is to provide the strategies that have enabled me to live a drug-free, healthy life for more than 20 years since my diagnosis. Below you'll find information on the key components of MS Hope, along with useful guidelines and links to the research explaining the science behind the strategies. I invite you to hear more of my story and begin your journey to regaining control of your health and your future.

“In the hopes of reaching the moon men fail to see the flowers that blossom at their feet.” Albert Schweitzer

11] [Gutsy Healing - Reflections on Motherhood, Art and Consciousness](#) – Rythea Lee

This blog is dedicated to the question of what it means to live a healing life.

This blog will post my writing and videos about healing and how the path of someone who is healing is radical because most people don't think healing is really much of anything. BUT if you decide that your mental, emotional, physical, and spiritual health are a priority, you are engaged in a deep, mysterious, and rousing wrestle with the forces of life. It ain't easy and it ain't quick. This blog includes musings on Motherhood, Art, and the state of our own Consciousness.

I will cover the topics and questions below:

- **Motherhood and Healing**; What does it mean to interrupt the patterns our parents passed down to us? How does it look to truly invent a childhood for your child that you never had? What does healing from trauma and abuse mean and how does it change the choices one makes as a parent? As a person? As a compassionate helper in one's own community?
- **The Artist who lives the healing life**; What does an artist have to offer who is pushing the edge of his or her own emotional literacy? How does an artist speak for others as well as herself? Why does the creative life require complete surrender to the outcome? Why does it matter?
- **Consciousness as it applies to facing the horrible and fabulous truths about our self and our world**; Can we choose how we grow in our own body/minds? Can we truly walk into our worst fears and open to them at the same time? How does consciousness evolve in our own lives, in our world, if we commit to truth at any cost? How do we know when the foundation of our understanding of things is shifting and changing for good? I will be adding posts regularly related to these topics and questions

Music - Rythea Lee's new CD: [Something Knows You](#) - is now available!

This album is a culmination of years of songwriting and performing â€“ a dynamic, melodic collection of songs that take you on a ride. From funny, to raw, to heartbreaking, **Something Knows You** is a mix of harmonies and story. You can listen to it, purchase a download of it to your computer or ipod, or buy

the hard copy of it.

Check it out! [LISTEN](#)

“The ability to simplify means to eliminate the unnecessary so that the necessary may speak.” Hans Hofmann

12] [Weebly](#): Create a Free Website, Online Store, or Blog

Your idea needs a great website. It's surprisingly easy to create a unique website, blog or online store

*“So often times it happens that we live our lives in chains. And we never even know we have the key.”
Lyrics from Already Gone - the Eagles*

13] [Why I Don't Like The Term 'Mental Illness'](#) - Huffington Post by Roger Covin, Ph.D, Ottawa Psychologist, Author of *"The Need to be Liked"*

I have to admit something embarrassing. I am a registered psychologist working in private practice and I don't know what the term mental illness means. Well, on a general level I know that it refers to psychological problems, but I don't know exactly what is meant by the "illness" part.

As far as a I can tell, there are two possibilities. First, illness could be a metaphor. If a writer used a phrase like “terrorism is an illness of society,” we would know that the author is using a metaphor because a society cannot literally be sick. It cannot get the flu or have a bacterial infection.

The second potential meaning of illness is literal - there is actually a disease or sickness that affects the mental functioning of the person.

When we use the term mental illness, what do we mean? Are we using a metaphor, like the mind is not working properly, as if it was ill. Or, do we mean it literally that the brain is in some way sick?

This is not simply an issue of semantics and splitting hairs. There are consequences and implications to the language we use to describe problems, including how we conceptualize or think about the cause of the problem, and how we treat it.

The idea that mental illness, most notably depression, is caused by chemical imbalances is arguably the most widely disseminated theory of mental illness in existence. The theory is described on respectable internet sites, the mainstream media, professional organizations (ex: National Institute of Mental Health), and is used by innumerable health professionals.

The problem is that the research evidence for this theory is simply too weak. The problems with this theory have only really started to hit the mainstream media and the general population in the past five to 10 years. For example, multiple experts, including psychiatrists, have come forward to say that the chemical imbalance theory for depression is simply wrong. There is poor and inconsistent evidence that low serotonin causes depression.

Neuroscience has done a great job of finding correlations between mental disorders and various brain

dysfunctions, but to date, no one has found a definitive biological cause for any one mental illness.
[Learn more](#)

*“Happiness resides not in possessions and not in gold; the feeling of happiness dwells in the soul.”
Democritus*

14] [The Need to be Liked](#): Dr. Roger Covin: Amazon.com: Books

Almost everyone has a fundamental need to be liked by other people. It is a healthy and normal part of life. However, the need to be liked can also be associated with emotional, behavioural and even personality problems. *The Need to be Liked* is a book that explores the dark side of this human need. The author [Dr. Roger Covin] is a clinical psychologist who weaves together psychological research with his own clinical experiences in order to present a unique and original way of thinking about the need to be liked. Drawing on research and theory from various fields of psychology, Dr. Covin explains how people’s experience with painful rejection shapes their way of thinking about themselves and others. Readers will learn how problems with the need to be liked can lead to depression, anxiety and other mental health concerns. Dr. Covin describes how the need to be liked expresses itself in numerous ways, ranging from subtle behaviours to aspects of one’s overall personality. For example, the need to be liked can affect... ..being overly career-driven ...alcohol and drug use ...promiscuity ...one’s excessive focus on appearance ...the decision to remain in an abusive relationship ...rumination about past relationships ...being overly self-critical or perfectionistic ...continually entering into relationships where you find the wrong partner ...sabotaging relationships Finally, Dr. Covin provides useful strategies and suggestions for how to manage problems with needing to be liked and dealing with rejection. *The Need to be Liked* is a fascinating and timely examination of a topic that affects the vast majority of people. Grounded in current research and theory, and articulated through Dr. Covin’s experiences as a therapist, this book is a must read for those who have ever wondered – why do I need to be liked?

“When one door of happiness closes, another opens, but often we look so long at the closed door that we do not see the one that has been opened for us.” Helen Keller

15] [Mindfulness-Oriented Interventions for Trauma: Integrating Contemplative Practices](#): Medicine & Health Science Books @ Amazon.com by Victoria M. Follette PhD (Editor), John Briere PhD (Editor), Deborah Rozelle PsyD (Editor), James W. Hopper PhD (Editor), David I. Rome (Editor)

Grounded in research and accumulated clinical wisdom, this book describes a range of ways to integrate mindfulness and other contemplative practices into clinical work with trauma survivors. The volume showcases treatment approaches that can be tailored to this population's needs, such as mindfulness-based stress reduction (MBSR), acceptance and commitment therapy (ACT), dialectical behavior therapy (DBT), mindfulness-based cognitive therapy (MBCT), and mindful self-compassion (MSC), among others. Featuring vivid case material, the book explores which elements of contemplative traditions support recovery and how to apply them safely. Neurobiological foundations of mindfulness-oriented work are examined. Treatment applications are illustrated for specific trauma populations, such as clients with chronic pain, military veterans, and children and adolescents.

**Excerpts from
Harnessing the Seeking, Satisfaction and Embodiment Circuitries in Contemplative Approaches**

to Healing Trauma [James W. Hopper](#)

This framework is a way of understanding human suffering, healing and happiness in terms of (a) four key brain circuitries and (b) cycles of suffering and cycles of healing that entail particular relationships among the four circuitries. (“Cycle” here means a set of experiences and actions that unfold repeatedly, in the same order, and typically in a self-perpetuating way.) In this chapter the framework is introduced and explained in four steps. First, the brain circuitries of fear, seeking, satisfaction, and embodiment are described.... Second, what are referred to within the framework as fundamental “cycles of suffering,” which involve relationships among the framework’s key brain circuitries, are explained and briefly illustrated with examples familiar to clinicians working with traumatized clients. Third, I explain and illustrate fundamental “cycles of healing” specified by the framework, and roles of the key circuitries in those cycles. Finally, I offer the framework’s explanation of how the seeking, satisfaction and embodiment circuitries can be harnessed by interventions with contemplative aspects and by contemplative practices – especially those that cultivate mindfulness, love, kindness and compassion – to transform posttraumatic suffering and bring genuine happiness.... The framework offered here can be used by clinicians to understand – and to help their clients understand – posttraumatic symptoms and suffering, including addictions and emotion regulation deficits associated with complex trauma. The framework can also be used to understand and explain potential pathways to healing.... In short, the framework is offered as a set of clarifying conceptual tools for exploring experience and behavior, for understanding suffering and healing, and for choosing and getting the most from clinical interventions and from the contemplative methods for treating trauma found in this book....

Healing cycle: Seeking true goods. Fortunately, recovery and healing aren’t all about seeking to deal more effectively with pain and suffering. If that’s all a clinician ever focuses on with a client, the work of therapy and healing is not so appealing, and definitely not inspiring – for the client or the clinician. In the framework’s second key healing cycle, seeking true goods, one is harnessing the brain circuitry of seeking – that always-active and powerful driver of our thoughts and behaviors – to seeking out the truly “good things in life.” These true goods include love, peace, playfulness, and joy.... As research has shown, when one activates the brain’s opioid satisfaction circuitry, activity of the fear and seeking circuitries, including in response to old “triggers” of fear and craving, is actually reduced ([research references]). When this happens, a person is no longer enslaved to fearing and seeking, or the cycles of suffering and addiction. Instead, as shown in figure 3, a modulated seeking circuitry can be harnessed to a self-perpetuating seeking true goods cycle: The more one successfully seeks true goods, the more one enjoys the genuine satisfaction, fulfillment and happiness they bring, and the more one’s seeking circuitry becomes focused on seeking true goods that bring healing and happiness....

“Do what you can, with what you have, where you are.” Theodore Roosevelt

16] [Truth about ‘Fifty Shades of Grey’](#) – Dawn Hawkins

Dawn Hawkins is executive director of the [National Center on Sexual Exploitation](#). Her organization exposes the seamless connection between all forms of sexual exploitation.

Truth about ‘Fifty Shades of Grey’: Movie glamorizes sexual violence, domestic abuse

The mass media and throngs of women are swooning over the twisted “love story” “Fifty Shades of

Grey,” but this cultural phenomenon’s impact on society will serve only to glamorize sexual violence and romanticize domestic abuse.

While millions of women are fantasizing about the controlling and abusive Christian Grey of fiction, there are many other women dealing with the horrors of actually living with men like him.

In the book, and now the soon-to-be released film, Christian uses manipulation, jealousy, intimidation and violence to control the naive Ana. Most fans overlook and romanticize this because of his powerful position, handsome looks and nice suits. But women like Ana in real life will tell you that a seemingly perfect exterior does not necessarily mirror one’s psychological health or mean that he possesses a moral compass.

A college student, one of many I’ve heard from in my role as executive director of the National Center on Sexual Exploitation, wrote to me that Christian is just suffering the consequences of his own abuse, acting out in the only way he knows, and that Ana’s patient, loving behavior helps him overcome his abusive tendencies. Christian is so easily and quickly forgiven for his violent behavior. But forgiveness and devotion to an aggressor who inflicts violence is not sexy. Violence is violence. Sexual violence is worse.

While this should be a black-and-white truth, E.L. James is selling it in all shades of gray. Even worse, over 100 million women are buying it - in over 50 languages.

The reality is that if you take away the glamour, “Fifty Shades” is just a sensationalized lie, telling women that they can, and should, fix violent and controlling men by being obedient and devoted, and that, somehow, this is romantic. It is no surprise that Hollywood is betting millions of dollars that now is the right time to offer sexual abuse and sexual violence against women as mainstream entertainment.

The popularity of “Fifty Shades of Grey” among women also sends a message to men that unrestrained domination is what women want. And, educated by porn, they know how to do it. A majority of men have been getting a regular diet of this kind of violent sex and degradation through porn for years. In it, women are tied up and treated like animals and objects. Much of it is rape-themed.

One of the most popular BDSM [bondage, discipline, sadism and masochism] websites advertises its content as “the sexual persecution of women and young teenage girls.” Ana Bridges, a researcher at the University of Arkansas, conducted a study that found that 89 percent of the most popular porn scenes involved violence, most of which was directed at women by men.

Porn will show you that women enjoy torture and violence, and now “Fifty Shades” is tacking on an unrealistic fairy-tale ending, convincing droves of women that this type of relationship is normal, and that they should just give in.

This is not entertainment or a fairy tale, as Hollywood is claiming. This is glamorization of violence and abuse. Society pays a price when we teach men to be turned on by women in pain. As a result, sexual violence is on the rise in our military, colleges, families and on the street. When violence is made to be sexy, it is no wonder that these are the consequences. [Read the entire article](#)

“Reach high, for stars lie hidden in your soul. Dream deep, for every dream precedes the goal.”

Pamela Vaull Starr

17] [The Murphy Bill: Ethical Considerations for the State of Mental Health Care and Its Consumers](#) - Harvard Public Health Review, Morgan Shields

Due to reported links between high-profile shooting incidents and mental illness, there has been an increased interest in mental health care. The most recent mental health policy initiative is the Helping Families in Mental Health Crisis Act of 2013 [HR3717]. authored by Congressman Tim Murphy. The Murphy Bill is the most ambitious attempt to transform our mental health care systems in decades, and its primary goal is to provide treatment to individuals before they reach a point of crisis.

This Bill has great intentions and indeed attempts to address gaps in current mental health care. However, it seems to be driven by fear, and is constructed to persuade the public that this bill will protect them from violence. Rather than provide the kind of high quality care that would reduce risks to both service users and the general public, this bill would impose treatments that are not reliably effective and are possibly harmful. Moreover, this bill ignores the substantial input that has been offered by those it would affect, and infringes upon their constitutional rights [Knopf, 2014]. When we consider the current state of our system and the United States' history of mental health care provision, it is crucial that we think through such impactful policies more critically.

Background on Mental Health Care in the United States

During the early and middle 20th century, long-term stay psychiatric care hospitals were the primary venues for mental health care. Looking back, they are now remembered as notorious for how they treated patients, often performing toxic experiments on helpless people and violating basic human rights. In the 1970s, America went through a period of deinstitutionalization, during which long-term stay hospitals were closed and greater demands for expanded community mental health care were advocated for. Though ethical reasons played a role, some have argued that the closing of hospitals was largely due to the introduction of the anti-psychotic Chlorpromazine, with the thought that it enabled individuals to better function in society.

Reviews of the literature suggest that Thorazine was not actually effective, and in fact, induced horrific side effects like tardive and spontaneous dyskinesia, which diminished both functionality and quality of life in the long-term [Whitaker, 2005]. In this regard, Thorazine did not enable the majority of its users to participate in society in a meaningful way, despite its ubiquitous endorsement as an effective means of treatment.

Some argue that the more likely precipitator of deinstitutionalization was Medicare disability payments. [Learn more](#)

“Start by doing what's necessary; then do what's possible; and suddenly you are doing the impossible.” Francis of Assisi

18] [OverCriminalized • Alternatives to Incarceration](#) • FULL DOCUMENTARY • BRAVE NEW FILMS – YouTube 22:31 minutes

OverCriminalized profiles three promising and less expensive alternatives to incarceration that may

actually change the course of people's lives. It's time to roll back mass criminalization and focus on what works.

SUBSCRIBE: http://www.youtube.com/subscription_c

SIGN THE PETITION: <http://www.bravenewfilms.org/endhome1>

HOST A FREE SCREENING: <http://bravenewfilms.org/screenings>

It seems that for almost every social problem that pops up, we turn to the criminal justice system. Suffering from mental illness? Here's a cell. Struggling with drug dependency? Let's throw you in handcuffs. Sleeping on the street? Here's an arrest record.

And if you are a person of color, the criminal justice crackdown can be even worse.

How could it possibly make sense to saddle police officers and prison wardens with sole responsibility for helping people get a roof over their head? Or to task lawyers and judges with treating mental illness or helping people get sober? Simply making problems into "crimes" is just making things worse.

It's 2015. We know better. Not only is all of this inhumane, it's expensive. When our tax dollars are picking up the tab, it makes sense to put funds where they will make the biggest impact. Housing programs help solve homelessness. Treatment helps stabilize mental illness and end drug dependency. Arrests and jail cells just waste time and money.

It's simple. Diversion programs work better than incarceration – for everyone. In cities like Seattle, San Antonio, and Salt Lake City, we see that successful solutions are a viable option to help end serious social problems. These services alter the course of people's lives in a positive way and save taxpayers huge amounts of money. We cannot continue to isolate and imprison people who suffer from mental illness, substance abuse, or homelessness. We must treat them with compassion and care to better serve our communities and our pocketbooks.

It's time we got serious about pulling our money out of incarceration and putting it into systems that foster healthy communities. Hundreds of thousands of people are locked up not because of any dangerous behavior, but because of problems like mental illness, substance use disorders, and homelessness, which should be dealt with outside the criminal justice system. Services like drug treatment and affordable housing cost less and can have a better record of success. [Learn more](#)

[Brave New Films – Facebook Page](#)

The United States leads the world in incarceration - and it's destroying our communities. Let's do more to build communities through prevention, rehabilitation, and opportunity. We'll continue to expose those profiting from the tragedy of mass incarceration and continue looking for better solutions than throwing people away in prison without hope. socialmedia@bravenewfilms.org

"I can't change the direction of the wind, but I can adjust my sails to always reach my destination."
Jimmy Dean

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

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

A diagnosis is not a destiny

[The Surviving Spirit](#) - Healing the Heart Through the Creative Arts, Education & Advocacy - Hope, Healing & Help for Trauma, Abuse & Mental Health

[The Surviving Spirit Speakers' Bureau](#)

[The Surviving Spirit Facebook Page](#)

mike.skinner@survivingspirit.com 603-625-2136 38 River Ledge Drive, Goffstown, NH 03045

[@SurvivinSpirit](#) Twitter

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