Hi Folks,

Hard to believe that another month has passed and we're in the final stages of August...I do hope you have found some time to relax and get away from it all, we deserve to take time for ourselves. I'm looking forward to the end of this month...because I will be taking an official vacation, I'm counting down the days.

Lots of great stuff to share....and a gentle reminder, if you know of resources, artists, musicians, poets, books, films, organizations, etc, who are trying to make the world a better place in their endeavors, do let me know, always looking to share the good works of others in this newsletter and elsewhere.

Take care, Michael Skinner

“Knowing what must be done does away with fear.” Rosa Parks

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9] The Key Role Your Nervous System Plays in Trauma Recovery By Lisa Danylchuk, EdM, LMFT,
Post Traumatic Stress Disorder (Simple PTSD) is a trauma-induced anxiety disorder that used to be reserved solely for military veterans who had experienced extraordinary, life-threatening events through combat. Overtime, this disorder came to include victims of natural catastrophes and acts of terrorism. But, in therapy settings, clinicians increasingly saw PTSD symptoms in survivors of childhood sexual abuse, rape and domestic violence victims, children raised in poverty or neglect, or children experiencing prolonged stress as a result of bullying or some other traumatizing situation. It was difficult to place these people into the PTSD category, as it stood, because their trauma could not be ascribed to one event. Hence, it wasn’t uncommon for them to get diagnosed with many acute syndromes and personality disorders, to address the wide-range of symptoms they presented.

Thankfully, the field of mental health started to recognize a type of post-traumatic stress that results more from prolonged stress than it does from one-defining, life-threatening event. It is called Complex PTSD (C-PTSD) and is found among individuals who have been exposed to prolonged, traumatic circumstances, like in sexual abuse, physical or sexual violence, bullying, or devastating living conditions, like chronic neglect, poverty, or living with family members who have a serious mental illness. This is the subject matter of my post today. I want to acknowledge my patients who have struggled with this challenging disorder, and also, to let those of you who may be suffering from this stress syndrome, to be able to identify it in yourself.

**Simple and Complex PTSD Symptoms**

The hallmark symptoms of simple PTSD, and its complex form, involve the reliving of the trauma (flashbacks), hypersensitivity and vigilance to threat, avoidance and withdrawal, nightmares and sleeping problems, disassociating from the environment, and problems in mood. But, unlike the transitory nature of trauma in PTSD’s simple form, years of inescapable childhood trauma damages the development of brain chemistry and the nervous system, so that the ability to learn, attend, and regulate
impulses, emotions, and behavior are wholly impacted. Hence, the symptoms are less related to a specific trauma, as in military combat, than they are to developmental problems of functioning. Thus, a nightmare to the specific traumatizing event, for people who have Simple PTSD, becomes night terrors that entertain a range of vaguely defined fears, for the person who has its complex form.

The Brain Chemistry of Prolonged Stress and Danger - Short-lived, life-threatening danger can traumatize people to the point of weakening what they value, believe, and trust, temporarily. But, in chronic childhood stress, the sense of self is not fully realized, so that a person’s values, beliefs, and feeling states fluctuate, especially in times of high stress. The ongoing trauma takes up so much of the growing child’s heart, mind and spirit that the brain cannot attend outside of the trauma, to grow and strengthen. This is especially true of the brain’s frontal lobe region that helps us to learn, control impulses, regulate our emotions, reason, attend and concentrate, problem-solve, and use our imagination toward goal-achievement. Thus, people who had prolonged childhood stress usually have a history of learning and thinking problems, attention-deficit disorders, impulse-control problems that show up in eating, alcohol, and drug use disorders, and mood and emotional regulation difficulties that have more to do with the structure of the personality than they do to an outside event.

If you have the complex form of PTSD, you most likely have difficulty taking control of your life. You most likely have already seen a variety of doctors for the problems that I’ve mentioned here. Unfortunately, many of you have been diagnosed with a range of mood, personality, and dissociative and learning disorders that make you feel all that more dysfunctional. You have to remember that,

*PTSD is not what is wrong with you; it is about what happened to you.*

As you can imagine, getting to the right diagnosis and treatment plan is a complex matter, for you and the treating clinician. I have had many patients who have the complex form of PTSD. One of the most challenging aspects to the therapy is to help them to understand its widespread impact on their learning and emotional and social functioning and the multipart interventions required to treat it. C-PTSD has a devastating impact on people’s lives, as their intelligence, talent, and will are seriously undermined by the disorder. And, believe me, most everyone I’ve encountered who has this disorder is intelligent and talented. But, stress gets the best of them. Imagine how hard this must be. It’s one thing to not have what it takes to fulfill certain dreams. But, it’s a whole different ball game to know that you have what it takes, but that your biology is working against you.

“We become happier, much happier, when we realize life is an opportunity rather than an obligation.”

*Mary Augustine*

2] Do Not Let Fear & Anxiety Ruin Your Life! - Stan Popovich

How To Help A Friend Who Struggles - This is what you can do:

1. Learn as much as you can in managing anxiety and depression. There are many books and information that will educate you on how to deal with fear and anxiety.

2. Be understanding and patient with the person struggling with their fears. Dealing with depression and anxiety can be difficult for the person so do not add more problems than what is already there.
3. In every anxiety-related situation you experience, begin to learn what works, what doesn’t work, and what you need to improve on in managing your fears and anxieties.

4. Another thing to remember is that things change and events do not stay the same. No one can predict the future with one hundred percent accuracy. Even if the thing that you feared does happen there are circumstances and factors that you can’t predict which can be used to your advantage.

5. When your fears and anxieties have the best of you, seek help from a professional. The key is to be patient, take it slow, and not to give up. In time, you will be able to find those resources that will help you with your problems.


Are you tired of struggling with fear, anxiety, and depression?

Anxiety, depression, addictions, fears, and other mental health issues can wreak havoc in your life... but they don't have to.

This short and easy to read book provides over 100 proven, easy-to-use methods that you can use TODAY to start overcoming your mental challenges, as well as guidance on how to pick the ones that are right for you.

Each technique is backed by real-life examples and explained in terms that a layperson can easily understand.

“Let us choose life and love, and happily use our selves up in loving service to one another.”

Doris Haddock

3] Share Your Story – GoodTherapy.org

Do you have a mental health story or experience that you wish to share? Writing and sharing a personal story can be a profound experience for the storyteller as well as for those reading. Stories about our personal experiences can awaken our awareness, stretch our hearts, and help us to heal. "Share Your Story" aims to do all of these things and to connect with your emotions and the common threads and journeys of the human experience. Indeed, by summoning the strength to reveal ourselves and our struggles, we provide comfort to others facing similar challenges while simultaneously reducing our own sense of isolation.

Be it trying or triumphant, insightful or inspiring, we would love to read your nonfictional story and consider it for publication. Sharing your story is as simple as filling out the information fields at the bottom of this page. Please note the following terms and specifications:

- To be considered for publication, your story must be at least 500 words long, never before published online (bio included), grammatically polished, and free of any identifying information aside from your own.
You agree that your story may not be published elsewhere online in the future. We perform regular checks for duplicate content on the web. In the event your story is found to have been republished elsewhere, we may remove it from GoodTherapy.org without notice. You may link from your own site or social media to your story on GoodTherapy.org, however.

We reserve the right to edit your story as we deem necessary, without notice.

We reserve the right to decline to publish any story, for any reason, without notice.

Thank you for sharing!

GoodTherapy.org unites therapists and the general public by disseminating mental health news and information, challenging mental health stigma, and promoting ethical therapy.

Our Mission

For the public, GoodTherapy.org...

- EDUCATES the public about mental health issues, treatment, the process of therapy, and the differences between healthy and unhealthy therapy.
- EMPOWERS all people’s wellness journeys through access to reliable, unbiased, and nonpathologizing mental health information as well as trained mental health professionals listed in our online therapist directory.
- CHALLENGES the myths, stereotypes, and stigmas that can surround mental health issues and treatment and prevent people from getting help.

For therapists, GoodTherapy.org...

- FACILITATES a community of therapists who believe in and adhere to principles of ethical therapy and are committed to reducing harm in therapy.
- SUPPORTS compassionate, collaborative therapists in their practices through access to quality continuing education events, up-to-date therapy news and information, and resources related to ethics and power dynamics in therapy.
- PROVIDES a leading online directory with strict membership standards, giving therapist members consistent referrals and other benefits that foster a thriving practice.

Our Vision  Learn more

“Loneliness is a sign you are in desperate need of yourself.” Rupi Kaur

4) Dealing with Depression: Self-Help and Coping Tips to Overcome Depression – HelpGuide.org

Depression drains your energy, hope, and drive, making it difficult to do what you need to feel better. But while overcoming depression isn’t quick or easy, it’s far from impossible. You can’t just will yourself to “snap out of it,” but you do have more control than you realize—even if your depression is severe and stubbornly persistent. The key is to start small and build from there. Feeling better takes time, but you can get there if you make positive choices for yourself each day.

The road to depression recovery begins with a single step

It’s the Catch-22 of depression: recovering from depression requires action, but taking action when you’re depressed is hard. In fact, just thinking about the things you should do to feel better, like going
for a walk or spending time with friends, can feel overwhelming. That’s why it’s important to start small and slowly build from there.

**Start small and stay focused** - Draw upon whatever resources you have. You may not have much energy, but you probably have enough to take a short walk around the block or pick up the phone to call a loved one.

Be patient with yourself and celebrate each accomplishment. The steps may seem small, but they’ll quickly add up. If you continue to take positive steps day by day, you’ll soon find yourself feeling better.

**Depression self-help tip 1: Stay connected**

When you’re depressed, the tendency is to withdraw and isolate. Even reaching out to close family members and friends can be tough. Compound that with the feelings of shame and the guilt you may feel at neglecting your relationships.

But social support is absolutely essential to depression recovery. Staying connected to other people and the outside world will make a world of difference in your mood and outlook. And if you don’t feel that you have anyone to turn to, it’s never too late to build new friendships and improve your support network.

- Reaching out is not a sign of weakness and it won’t mean you’re a burden to others. The truth is that most people are flattered if you trust them enough to confide in them. Your loved ones care about you and want to help.
- Look for support from people who make you feel safe and cared for. The person you talk to doesn’t have to be able to fix you; he or she just needs to be a good listener—someone who’ll listen attentively and compassionately without being distracted or judging you.
- Make face-time a priority. Phone calls, social media, and texting are great ways to stay in touch, but they don’t replace good old-fashioned in-person quality time. The simple act of talking to someone face to face about how you feel can play a big role in lifting the fog of depression and keeping it away.
- Try to keep up with social activities even if you don’t feel like it. Often when you’re depressed, it feels more comfortable to retreat into your shell, but being around other people will make you feel less depressed.
- Find ways to support others. It’s nice to receive support, but research shows you get an even bigger mood boost from providing support yourself. So find ways—both big and small—to help others: volunteer, be a listening ear for a friend, do something nice for somebody.
- Care for a pet. While nothing can replace the human connection, pets can bring joy and companionship into your life and help you feel less isolated. Caring for a pet can also get you outside of yourself and give you a sense of being needed—both powerful antidotes to depression.

**10 tips for reaching out and staying connected**

Talk to one person about your feelings
1. Help someone else by volunteering
2. Have lunch or coffee with a friend
3. Ask a loved one to check in with you regularly
4. Accompany someone to the movies, a concert, or a small get-together
5. Call or email an old friend
6. Go for a walk with a workout buddy
7. Schedule a weekly dinner date
8. Meet new people by taking a class or joining a club
9. Confide in a clergy member, teacher, or sports coach

**Depression self-help tip 2: Get moving**

When you’re depressed, just getting out of bed can seem like a daunting task, let alone working out! But exercise is a powerful depression fighter—and one of the most important tools in your recovery arsenal. Research shows that regular exercise can be as effective as medication for relieving depression symptoms. It also helps prevent relapse once you’re well.

To get the most benefit, aim for at least 30 minutes of exercise per day. This doesn’t have to be all at once—and it’s okay to start small. A 10-minute walk can improve your mood for two hours.

**Exercise is something you can do right now to boost your mood**

Personally, I find the 'label' of borderline personality disorder to be highly offensive, blaming and shaming...especially, when anyone I have ever met who has this 'diagnosis', has known severe trauma and abuse...it is long overdue and time to get rid of this stigmatizing label. MS

“A diagnosis is not a destiny.”

“To be without hope is to deny the wonderful possibilities of the future.” Al-Anon

5] Borderline Personality Disorder and Attention-Seeking - The Mighty

“If you know someone with BPD please, just give them a hug because for that three to five seconds, you’ll make the unbearable agony inside of them endurable, and that’s all we are trying to do. We have no other choice. Every poor decision, every attention-seeking action is us trying to endure.”

When Someone With Borderline Personality Disorder 'Cries Wolf'

I’ve tried to reach out blindly to so many people for help these past few months, and all that’s done is given me the label “attention-seeker,” written off as manipulative, a liar and a waste of time.

Attention-seekers like myself are written off as lost causes instead of treated like people who are seriously and constantly hurting, who are only “wasting your time” because they know their own is running out. I want your attention the same way a person drowning wants the attention of a lifeguard, but I can’t scream for help and raise my hand because instead of drowning in water I am drowning in my own heightened emotions.

One of the most severe symptoms of borderline personality disorder (BPD) is recurring self-harm and suicidal behavior/attempts.
When it comes to feeling suicidal, I’ve noticed people stop taking you seriously after a while. If I was going to kill myself, surely I would have done it by now. In the minds of those who aren’t consumed by this disorder, I’m simply crying wolf in order to feast on some nice juicy attention again. The thing about “crying wolf” is that the wolf is invisible, but it’s still there. The reason I’m crying wolf is because the wolf is going to kill me.

I don’t know how anyone can feel like this for even one second of their entire existence and not explode fragments of their bleeding heart everywhere, because every second of being alive is exhausting. BPD has been described as the emotional equivalent of having third degree burns over 90 percent of your body. This disorder I wasn’t even aware I have has impacted every single part of my life.

The sleepless nights that turn into empty days.

The drugs and alcohol that numb for a minute and pain for an hour.

The constant, always present feelings of worthlessness and shame and of guilt. Guilt for who I am and what I’ve done to the people who used to be around me or are still tied to me because of relation or university class or a lease.

Cooking enough food to feed four even though I’m not hungry because it’s been days since I’ve remembered to swallow anything solid and that’s how many attempts it’s going to take to stay down. Pretending there’s something wrong with my scales because there’s no way I could be that weight, is there? It hasn’t been that long since I last ate…has it?

Holding knives against my throat at 3 a.m. because I can’t stand another second alone with my thoughts, tying scarves and chords into nooses that break, routinely overdosing on drugs not just on weekends with “friends” but in the middle of the afternoon alone in my bedroom, praying this is it. This will be the time my heart finally gives up and shuts down.

Crying, then laughing, then needing to cut, then laughing, then crying again, then arguing with myself about jumping off a building, then needing a hug. All in the space of an hour. Every hour. No breaks, no time outs, not even when I’m asleep because apparently with BPD even your subconscious is as unstable and spasmodic as you are. Nightmares and pleasant dreams lurch back and forth at sickening speeds until you awake confused and frightened, your reality questionable.

Always letting down the people in my life because no matter how hard I try I can never be more than what I am. Knowing that everyone I love who hasn’t already done so will leave me and never look back because they think there’s nothing left to look back on.

The look of disgust but not surprise on my beautiful housemate’s face when after everything I have put him through, from suicide attempts to uncontrollable emotional outbursts that required him to physically restrain me and call the police, he comes home to find me in my room drunk or high. He thinks I don’t care, but all I do is care and that is why I can’t stop doing the things that are ruining my life. There is no neutral or in-between emotions for me, and until I learned what borderline
personality disorder was I thought everyone felt the way I did and just handled it better.

Every emotion is like getting in the shower and either being hit with a stream of freezing ice cold water that makes your skin turn blue with cold and your teeth chatter, or getting assaulted with boiling hot water that stings your flesh and burns you deeply. I understand what lukewarm showers are, but I am unable to experience them.

The shower analogy also explains the way I see people around me. Black and white. All good or all bad. I will meet someone at a bar, share a laugh with them, accept their friend request on Facebook and then all but propose to them. Strangers will become family almost immediately and things like them not replying to my messages within a quick manner or rejecting an invite to hang out have the same impact on me as if they had punched me in the face or told me they wished I was dead. They have just confirmed everything I had always known about myself to be true. I’m disgusting. I’m unlovable. I’m nothing. Everyone hates me. I’m alone.

One of my best friends who now refuses to speak to me, once spoke to me on the phone for four hours when I was distressed. Not for the first time that week he did everything humanly possible to put me in a better head-space and reassure me I was loved, and it worked. Until he said goodbye and hung up the phone. Then it was as if those four hours had never happened. I remembered everything he had said and I still believed it all to be true, but I couldn’t retain the positive emotions I felt when he was speaking to me. I couldn’t hold on to the sense of relief and love I had felt only seconds ago, the shower was turned back on full blast and I was burning. So I called someone else. And when they hung up I messaged another person. My phone became full of screen-shots of words of support and love from all those I communicated with, and for a while it helped me, but if I wasn’t continually receiving messages that proved people cared about me I would assume they had come to their senses and realized they would be better off without me in their lives. This fear of abandonment consumes me and causes my emotions to manifest into situations in which I will impulsively act out in dangerous ways in an attempt to communicate my pain to those around me or to try and sooth the storm inside me. These impulsive behaviors may seem like they are for attention, but more than half the time they take place when I am alone and no one is aware of them.

I’ve woken up more than once on my bedroom floor after purposely overdosing on a cocktail of drugs, surrounded by suicide notes I have no recollection of writing and a bleeding wrist. I have then continued on with my day because the world doesn’t stop just because I have. On my mother’s birthday I nearly took my own life after an argument with first my housemate and then her. I sat sobbing for nearly 10 hours trying to simultaneously convince myself to “just do it!” and also “Don’t be stupid!” I had convinced myself the best present I could give my mom was to not be in her life any longer. I convinced myself the only way I could make things right with my housemate was to permanently end my existence so he never had to look at me again.

I can’t remember the last day I’ve had where I haven’t seriously considered killing myself as the most viable option at least once. I am plagued by hopelessness. I can’t hold down a job because my emotional breakdowns happen out of the blue and I am unable to turn up to my shifts. I can’t do or say anything to get the friends that mean absolutely everything to me back in my life and in my corner again because no matter how badly I want to change and get better, I am a prisoner of my own pain and there is no key. I can’t find permanent accommodation because I can’t afford to live by myself and no one can stand to live with me. I can’t walk past a store without spending whatever small amount of
money I have saved for bills or food on something to numb the pain.

It never stops and I don’t know where this disorder ends and I begin. Realizing what was causing my life to be so hard also made me realize I don’t know who I am, but I know who I’m not.

I’m not J. Jarvis anymore. Maybe I never really was.

I lost her somewhere between the sixth drink and the second pill. After the nightmares started happening while she was awake and the sun went down permanently.

I’m not the stand-up comedian or the soccer player or the writer I once prided myself on being.

I’m not anyone’s friend or anyone’s housemate or someone you met at a party once.

All I am is pain and loneliness and defeat swirling around in an underweight, scarred and tired shell. I’m only 20-years-old and already my life feels over. I want it to be over.

If you know someone with BPD please, just give them a hug because for that three to five seconds, you’ll make the unbearable agony inside of them endurable, and that’s all we are trying to do. We have no other choice. Every poor decision, every attention-seeking action is us trying to endure.

If you or someone you know needs help, see our suicide prevention resources.

If you need support right now, call the Suicide Prevention Lifeline at 1-800-273-8255.

“Life is an echo. What you send out, comes back. What you sow, you reap. What you give, you get. What you see in others, exists in you. Remember, life is an echo. It always gets back to you. So give goodness.” Unknown

6] The Creative Activist Virtual Summit - The Creative Activist, Rae Luskin

Do you believe you were put here to Serve a Higher Purpose?

Would you like to Make a Difference, but need help Finding Your Path?

Is your goal to be a Change Agent, while Reaching for Your Big Dream?

Join Me and 24 Featured Guest Experts!

Why you should attend...

With 24 guest expert interviews, the 2016 Creative Activist Virtual Summit will provide the practical tools, fresh ideas, and inspiration to creatives, change agents, and community leaders looking to find their voice, begin a new initiative or expand an existing one. Unlike any other summit you may have attended, we will show you How One Person CAN Make a Difference! Discover what makes you come alive!
Not only will you hear compelling stories and inspirational messages from our Summit Expert Guests, an amazing group of artists, musicians, dancers, actors, and community activists, you will also learn how to overcome the challenges that face us all as Activists and Change Makers in our communities. By the time this Global Summit comes to a close, you will not only Feel Inspired – you will have all of the tools you need to become an Empowered, Effective Advocate for Change in your community, and the world – yourself a Creative Activist!

Who are Creative Activists?

We…

- Initiate courageous conversations
- Ignite creativity and innovation
- Invite connections and collaborations
- Inspire contribution and leadership
- Improve lives

Ready to Meet our Amazing Experts?

- **Amy Oestreicher** - TEDx Speaker, Author, Playwright, Actress, Artist
- **Angela Rose** - Founder/Executive Director of PAVE: Promoting Awareness, Victim Empowerment.
- **Anne K. Ream** - Author, Founder of The Voices and Faces Project, girls360
- **Arthur Gogatz** - Co-founder, Director at World Innovation Team, Associate Professor, Consultant, Speaker
- **Crystal Mann** - Musician, Organizer at The Sanctuaries DC
- **Curt L. Tofteland** - Founder & Producing Director of Shakespeare Behind Bars
- **Cynthia Kersey** - Founder of The Unstoppable Foundation, empowering lives through education
- **Ellyzabeth Adler** - Multidisciplinary Artist, Founder/Executive Director Danztheatre Ensemble: performance with a purpose
- **Emanuel Kuntzelman** - Founder Greenheart International and Greenheart Music
- **Grishma Shah** - Co Director ReelAbilities Film Festival Chicago
- **Heather Biermann** - B.F.A and MA with a specialty in eco-art therapy.
- **Heidi Basch-Harod** - Executive Director, Women's Voices Now
- **Judith Smith** - Artistic director AXIS Dance Company
- **Kathy Barbin** - Founder/Producer/ Big Voice Pictures
- **Kathy Eldon** - Journalist, film and television producer, author, Founder of Creative Visions Foundation
- **Laurie Marshall** - Artist, teacher, author, dedicated to transforming violence in schools through creativity and collaboration
- **Marianne Williamson** - Internationally acclaimed author, speaker on spiritual personal and political issues & Founder of Project Angel Food
- **Mary Graziano** - Writer, poet, blogger on child abuse
- **Mary Rockwood Lane** RN, P.H.D - Author, Artist. Founder of Arts in Medicine Program
- **Michael Skinner** - Musician. Healing Trauma, Abuse and Mental Health
Each interview will run 30-45 minutes and will include personal stories that led the guests to creative activism, their challenges and successes, as well as practical solutions to break though creative blocks, and will share their vision to make the world better for future generations.

It’s time to stop dreaming of making changes for a better world. It’s time learn how YOU can make an impact!

The Worldwide Creative Activist Summit is FREE and runs from August 15-22, 2016

Reserve Your Spot Today! As a Creative Activist - One Person CAN Make a Difference!

“Never be discouraged from being an activist/advocate because people tell you that you will not succeed. You have already succeeded if you're out there representing TRUTH or JUSTICE or COMPASSION or FAIRNESS or LOVE.”  Doris Haddock [Granny D]

7) Supportive Housing Helps People Get Back On Their Feet  Health News : NPR

For An Artist, A Room Of His Own Is A Lifesaver

These days you can find William Kitt in a small, bright solarium on the corner of 150th Street and Edgecombe Avenue in Manhattan, where he lives. Most hours on any day he sits here, sketching over a desk cluttered with colored pencils and pastels. What you could not know from looking at Kitt, a slender, laughing man who wears a beret and surrounds himself with drawings, is that he spent decades living on the streets.

Kitt says he spent 34 years of his life being homeless and maddened by drug-induced hallucinations. Now he lives in an apartment owned by a housing nonprofit called Broadway Housing Communities, which was founded in 1983 and owns seven buildings housing over 600 tenants.

Like most supportive housing projects, Broadway Housing Communities provides apartments and medical, psychiatric or other services to people who, like William Kitt, have physical or mental health problems or are low income. Kitt, now 65, has leased a room from this Broadway Housing property on Edgecombe Avenue for the past 13 years.

He's alive today in part because of this Harlem building. "He was so not well when he first arrived that had he not been in Broadway Housing, he would not have had long to live," says Russell Baptist, a social work manager who has worked with Kitt. "Maybe just of his own neglect."

Kitt says he became homeless right after he turned 18. He was living in New York City with his mother. "Yeah, I came home one day and the house was dark and everything was gone. The rent was paid for the end of that month. I didn't know how to pay no bills or nothing like that," he says. His mother had
just left without a word. "She ain't sit down and talk to me. She didn't want to give me the option of saying, hey I'll go with y'all."

He moved into a New York City homeless shelter and made money from scheming. He stole cans out of recycling bins and forged identities to make cash. He says he made a lot of money this way. "But I was a drug addict. Heroin. Cocaine. Crack," he says. "All the money went into the habit."

That's when Kitt says he started having strange thoughts, sometimes even hallucinations. "You could walk by the park and spirits would come out and the devils start playing with your mind," he says.

It was like this until he was in his 50s, when he met a social worker who told him that she could help him find a place to live. She told him it would be subsidized and permanent, so he agreed to work with her. From others, he had heard that the city was giving preference to people with a mental illness. So he says he decided to do what had kept him alive for the last three decades — come up with a scheme that would ensure a place in one of the city's new supportive housing projects. "I had to act crazy," he says.

An unnecessary move, according to Ellen Baxter, the executive director and founder of Broadway Housing Communities. She says people don't have to have a mental disorder to live in the units, and many of the tenants have no mental health diagnoses.

Baptist says that Kitt really was very mentally unstable at the time, and Kitt himself admits that he wasn't the same person he is today. "Coming in off the street for 34 years, you a wild - a wild dude, you know what I mean? It took me about five years before I started letting [other people] in," he says.

After three decades of homelessness, Kitt was extremely socially withdrawn. "He would just stay in his apartment and not come out," Baptist says. "He was just so disorganized. That's how I'll put it. He was so disorganized he couldn't come upstairs to the social services. He needed a worker to take him, to transport him everywhere."

But Baptist says that after five years of effort by him and other social workers, Kitt started to change. "Just little by little, he started coming out," Baptist says. "And then he asked for paper. He said I want to draw. And we brought him some papers and charcoal and pencils, and he threw himself into that artwork. He became alive. He began to talk, to trust. It was amazing."

Services for most residents at Broadway Housing are paid for by the state and city of New York and private foundations. Housing is subsidized from the same sources, and many residents, like Kitt, pay their rent from some combination of welfare, Social Security or work income.

Supportive housing projects like Broadway that provide permanent housing and social support to people who were homeless, many of whom have neglected physical or mental health needs, are often more cost-effective than emergency shelter or medical services. Broadway Housing officials say that supportive housing for one person costs taxpayers $12,500 a year, compared with $25,000 for an emergency shelter cot; $60,000 for a prison cell; or $125,000 for a psychiatric hospital bed.

Kitt says the social services were incidental to his transformation. He says he had decided to extradite himself from his own wildness and "domesticate" himself, as he puts it. Now he says he's found his calling in art. He's working on creating four collections of street portraits. And Baptist says Kitt is an
ambassador for the building, a model tenant.

Baptist says in a way it's true that Kitt pulled himself up by his own bootstraps. "He didn't have to comply. Nobody can tell you to stop using drugs. He did do it on his own." But there's another part of it. "Being stable at Broadway Housing and knowing he had a place to live," he says, "helped him become the man you see today."

“Maturity is the capacity to withstand ego-destroying experiences, and not lose one's perspective in the ego-building experiences.” Robert K. Greenleaf

8] Broadway Housing Communities - History, Mission and Model

Broadway Housing Communities is a community-based nonprofit nationally recognized for pioneering high-impact approaches to the challenges of inequality and homelessness in the under-served New York City neighborhoods of West Harlem and Washington Heights.

Since 1983, BHC has provided permanent homes for thousands of adults, children and families; high quality early childhood programs that improve outcomes for resident and community children; and opportunities for local artists to exhibit their work and engage the community.

The success of our model is rooted in community, and a commitment to insuring that the adults, children and families we serve receive the support they need to live independent, stable lives.

With the opening of our first housing initiative for 55 formerly homeless single adults in 1986, BHC demonstrated that permanent, dignified housing with services for those who need them is the most effective-and most cost-effective-approach to homelessness including for those challenged by mental illness, a history of addiction and other risk factors.

The alarming rise in family homelessness beginning in the 1990s led BHC to adapt the supportive housing model to serve families with young children.

Dorothy Day Apartments in West Harlem was the first building in New York State intentionally developed to provide permanent housing for formerly homeless families and single adults. This groundbreaking initiative included an on-site early childhood center, educational advocacy and mentoring services and a robust cultural arts program. Since opening in 2003, the stability rate at Dorothy Day has been well over 90%, vastly superior to the 60% citywide return-to-shelter rate. More importantly, high school graduation and college enrollment are the norm for children growing up at Dorothy Day.

BHC’s most recent initiative, the 191,000sf mixed-use development known as The Sugar Hill Project, represents a bold step toward fulfillment of our core beliefs: that housing stability, educational opportunity, cultural engagement, and social support are essential elements to the well being of individuals and families and the creation of thriving communities.

We are proud to serve as a resource and a model locally, nationally and globally, and welcome the opportunity to host site visits for other providers, funders, policy makers and community leaders.
Related Story - Geel, Belgium, a town that has been taking in strangers with mental illness for centuries. Health News : NPR

“When the whole world is silent, even one voice becomes powerful.” Malala Yousafzai

Additional Resources:

9] The Key Role Your Nervous System Plays in Trauma Recovery By Lisa Danylchuk, EdM, LMFT, E-RYT @ GoodTherapy.org

10] Intentional Peer Support – Articles - “Peer support is about social change”

11] 5 Powerful Self-Care Tips for Abuse and Trauma Survivors - Self-Care Haven by Shahida Arabi

Shahida Arabi is the bestselling author of The Smart Girl's Guide to Self-Care and Becoming the Narcissist's Nightmare: How to Devalue and Discard the Narcissist While Supplying Yourself. She graduated summa cum laude with a graduate degree from Columbia University where she studied the effects of bullying across the life-course trajectory. As an undergraduate student at NYU, Shahida also studied English Literature and Psychology and was President of its National Organization for Women [NOW] chapter.

She is the founder and editor of the blog, Self-Care Haven, which has over 1.6 million views and has been shared worldwide in all 196 countries. Her viral blog entry, "Five Powerful Ways Abusive Narcissists Get Inside Your Head," has also been shared worldwide and her work has been endorsed by numerous clinical psychologists, mental health practitioners, bestselling authors, and award-winning bloggers. She also hosts a popular YouTube channel on narcissistic abuse called Self-Care Haven.

12] Childhood trauma leads to lifelong chronic illness so why isn’t the medical community helping patients? ACEs Too High


Sera Davidow is the Director of the Western Massachusetts Recovery Learning Community, a filmmaker, and a regular blogger at Mad in America.

The Western Mass Recovery Learning Community (RLC) creates conditions that support healing and growth for individuals and the community as a whole through learning opportunities, advocacy, peer-to-peer support and the development of regional and national networks. We believe that human relationships are often at the center of what heal people who have experienced extreme emotional distress, trauma, psychiatric diagnoses, addiction and a variety of other challenges in life. We also believe that we are a part of a civil and human rights movement and that real change does not happen on a sustainable level unless everyone is involved in the process and issues like discrimination, poverty, imbalances of power and acceptance of natural diversity are addressed.

RLC is made up of PEOPLE (not places) and is wherever and however YOU and others from the community may choose to connect. Together, we offer a variety of events, workshops, trainings,
advocacy and leadership councils, as well as a peer support line, four resource centers (Springfield, Greenfield, Holyoke and Pittsfield) and a Peer Respite in Northampton. Above all else, we create space for anyone who has a genuine interest in taking part in our community and holding its values to share and find connection, information, ideas and opportunities to make change in their own lives and/or the community around them. Our shared experiences and ‘humanness’ are what unite us. Our stories, collective wisdom and strength are what guide us and our community forward.

14) An Alternative Form of Mental Health Care Gains a Foothold by Benedict Carey - The New York Times

“Make the most of yourself by fanning the tiny, inner sparks of possibility into flames of achievement.”
Golda Meir

Take care, Michael, Mary, 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

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@SurvivinSpirit Twitter

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