



*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 June 2019**

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### **Some Health & Advocacy Awareness Highlights for June:**

[1] [June is National PTSD Awareness Month](#) – partial excerpt from the website -

HOUSTON, May 31, 2019 /PRNewswire/ -- PTSD is the root cause of suicide and is "one of the deadliest wounds of war." Within an hour of you reading this, a veteran will have taken his life. And while we have slept comfortably in our beds, worked an 8-hour shift, safely returned home, eaten dinner with our family, and back to bed again, 22 veterans have committed suicide. Although the real number is higher: 22 is only the reported number as only 22 of 50 states report veteran suicide. In fact, while there are 58,195 names on the Vietnam Memorial Wall in Washington, D.C., since shooting ceased there have been more than 210,000 veteran suicides. Estimates are that 90%-95% result from PTSD. Already there have been more suicides than casualties from fighting in Iraq and Afghanistan.

JUNE IS PTSD AWARENESS MONTH: Suicide is a pandemic among veterans over 55, and they hold the highest suicide rate, higher than those returning from active duty in Iraq, Afghanistan and any/all areas where the American Servicemen are called to serve and protect the freedoms we hold so dear and all too often we take for granted.

[Help Raise PTSD Awareness - PTSD](#): National Center for PTSD - partial excerpt from the website -

There are currently about 8 million people in the United States with PTSD.

Even though PTSD treatments work, most people who have PTSD don't get the help they need. June is PTSD Awareness Month. Help us spread the word that effective PTSD treatments are available. Everyone with PTSD-whether they are Veterans or civilian survivors of sexual assault, serious accidents, natural disasters, or other traumatic events-needs to know that treatments really do work and can lead to a better quality of life.

[2] [LGBT Pride Month](#) – partial excerpt from Wikipedia -

The month of June was chosen for LGBT Pride Month to commemorate the [Stonewall riots](#), which occurred at the end of June 1969. As a result, many pride events are held during this month to recognize the impact LGBT people have had in the world. Bisexual activist [Brenda Howard](#) is known as the "*Mother of Pride*", for her work in coordinating the first LGBT Pride march, and she also originated the idea for a week-long series of events around Pride Day which became the genesis of the annual LGBT Pride celebrations that are now held around the world every June.<sup>[22][23]</sup> Additionally, Howard along with the bisexual activist [Robert A. Martin \(aka Donny the Punk\)](#) and gay activist [L. Craig Schoonmaker](#) are credited with popularizing the word "Pride" to describe these festivities.<sup>[24][42][43][44][45]</sup> Bisexual activist [Tom Limoncelli](#) later stated, "The next time someone asks you why LGBT Pride marches exist or why [LGBT] Pride Month is June tell them 'A bisexual woman named Brenda Howard thought it should be.'"<sup>[27][46]</sup>

Two presidents of the United States have officially declared a pride month. First, President [Bill Clinton](#) declared June "Gay & Lesbian Pride Month" in 1999 and 2000. Then from 2009 to 2016, each year he was in office, President [Barack Obama](#) declared June LGBT Pride Month.<sup>[47]</sup> [Donald Trump](#) became the first Republican president to acknowledge LGBT Pride Month in 2019, but he did so through tweeting rather than an official proclamation.<sup>[48]</sup>

*“I call upon all Americans to observe this month by fighting prejudice and discrimination in their own lives and everywhere it exists.”* – [Proclamation 8529](#) by U.S President Barack Obama, May 28, 2010

Beginning in 2012, [Google](#) displayed some LGBT-related search results with different rainbow-colored patterns each year during June.[\[49\]\[50\]\[51\]](#) In 2017, Google also included rainbow coloured streets on Google Maps to display Gay Pride marches occurring across the world.[\[52\]](#)

[3] [African-American Music Appreciation Month](#) – Wikipedia

African-American Music Appreciation Month is an annual celebration of [African-American](#) music in the [United States](#). It was initiated as **Black Music Month** by President [Jimmy Carter](#) who, on June 7, 1979, decreed that June would be the month of black music.

In 2009, the commemoration was given its current name by President [Barack Obama](#).[\[1\]](#) In his 2016 proclamation, Obama noted that African-American music and [musicians](#) have helped the country "to dance, to express our faith through song, to march against injustice, and to defend our country's enduring promise of freedom and opportunity for all." [\[2\]](#)

[4] [Men’s Health Month](#) - June is the time to celebrate the men in our lives. During June we want to draw attention to the preventable health problems men face and encourage action – behavior changes, early detection and screening, and treatment.

The purpose of Men’s Health Month is to heighten the awareness of preventable health problems and encourage early detection and treatment of disease among men and boys. This month gives health care providers, public policy makers, the media, and individuals an opportunity to encourage men and boys to seek regular medical advice and early treatment for disease and injury. The response has been overwhelming with thousands of awareness activities in the USA and around the globe. [Learn more](#)

*“When someone is mean, don't listen. When someone is rude, walk away. When someone tries to put you down, stay firm. Don't let someone else's bad behavior destroy your inner peace.”* Truth Follower

1] [Sometimes Depression Means Not Feeling Anything At All](#) – VICE by [Philip Eil](#)

I never realized how little I knew about depression until I became depressed. I didn't know, for instance, how depression can snatch away your sex drive, leaving you feeling newly-and involuntarily- asexual. I didn't know that depression attacks your attention span, your energy, and your ability to finish things. During a recent bout, I had trouble finishing magazine articles and movies. The number of emails I sent plummeted. Everyday errands felt like Herculean tasks.

But perhaps most surprising was the emotional numbness. Nothing about hearing the word "depression" prepared me for having a moment of eye contact with my two-year-old niece that I knew ought to melt my heart-but didn't. Or for sitting at a funeral for a friend, surrounded by sobs and sniffles, and wondering, with a mix of guilt and alarm, why I wasn't feeling more.

During my recent depression spell, I experienced this kind of numbness for weeks. Political news that would have previously enraged me left me cold. Music had little effect beyond stirring memories of how it used to make me feel. Jokes were unfunny. Books were uninteresting. Food was unappetizing. I

felt, as Phillip Lopate wrote in his uncannily accurate poem "[Numbness](#)," "precisely nothing."

And this was new to me. Because while I had been in and out of depression before, I still, like many people, didn't fully grasp an illness that [affected 16 million Americans in 2015](#). (That's more than the combined populations of New York City, LA, and Chicago.) "It's ubiquitous," the author of [The Noonday Demon: An Atlas of Depression](#), Andrew Solomon, tells me. "[And yet] I think the public doesn't really understand it well at all."

The *Diagnostic and Statistical Manual of Mental Disorders* [says](#), for a person to be diagnosed with Major Depressive Disorder, they need to experience "Depressed mood most of the day, nearly every day" or "markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day" for a period of two weeks. But this is just the baseline. For a diagnosis to be made, the person must also report at least four additional symptoms from a list that includes significant weight loss or weight gain, an inability to sleep or excessive sleepiness, physical restlessness or slowness ("psychomotor agitation or retardation," in clinical terms), frequent fatigue or energy loss, feelings of worthlessness or excessive guilt, indecision or a diminished ability to concentrate, and recurring thoughts of death or suicide.

"It's truly amazing to me, the longer I've been in the field, how many manifestations of depression there can be in the body," says Jennifer Payne, a professor of psychiatry and director of the Women's Mood Disorders Center at Johns Hopkins School of Medicine. These can range from headaches to GI issues to various pain syndromes, and depression can also exacerbate existing conditions, like diabetes or high blood pressure. "If you take two women with the same breast cancer, one's depressed [and] one's not, the woman who's depressed has twice the chance of dying from her breast cancer," Payne says.

During my conversations with Payne and other medical experts, I began to understand just how vast and multifaceted this illness can be. Depression can be visible or invisible to a person's loved ones. It can last for weeks, years, or even decades. It can affect sleep, concentration, appetite, energy, memory, movement, and—as I know well from trying to write while depressed -a person's facility with language.

A particularly scary aspect is the fact that hopelessness and helplessness are actually symptoms of the illness. Stanford University's David Spiegel, a professor of psychiatry and behavioral sciences and director of the school's Center on Stress and Health, tells me that depression is a common, treatable mental disorder, but people it afflicts can blame themselves for things that aren't their fault. "And so depressed people often feel guilty about being depressed and not performing the way they should," he says. "And that's part of the disease...[that] keeps them from digging their way out, or getting help from people to dig their way out."

And the causes of the illness can be as varied as the symptoms. Emory University's Nadine Kaslow, a professor of psychiatry and behavioral sciences, tells me that, with some people, depression is more genetically driven, while others experience it as reaction to external stress. She runs off a long list of the circumstances that can trigger depression: loss of a loved one, job, or key identity; things that cause feelings of failure, shame, or humiliation; a natural disaster that overturns your life, like the recent hurricanes in Texas, Florida, and Puerto Rico; financial woes and anxiety; child abuse; domestic violence.

We also know that depression can be devilishly impervious to happy events. Readers of William Styron's [\*Darkness Visible: A Memoir of Madness\*](#), may remember how he describes receiving a prestigious literary prize in Paris, a check for \$25,000, and royal treatment from his hosts, all while feeling what he describes as "panic...dislocation, and a sense that my thought processes were being engulfed by a toxic and unnameable tide that obliterated any enjoyable response to the living world."

The more I dug into my reporting, it also became clear how many things depression is *not*. It is not the fault of the person afflicted, nor is it necessarily in their control to "snap out of it" or "pull themselves up by their bootstraps." (These two points really can't be stressed enough.) And it certainly is not merely feeling sad. "People who have never experienced depression think, 'Well, I pulled myself together after a rough time,' and they don't understand the intense physicality, the immediacy, and the incontrovertibility of the condition," Solomon says. It's tempting to envision depression as an extreme point on a mood spectrum, he adds, but it's really the mood spectrum shutting down altogether. The word he used frequently in our conversation was a feeling of "nullity." And in his [TED talk](#) on depression, he repeats the sentence, "The opposite of depression is not happiness, but vitality." The British author Matt Haig recently [tweeted](#), "Everyone is comfortable so long as you talk about mental illness in the past tense." And I admit, it's easier for me to write this piece after my recent bout of depression passed. When I share it with people I know, I can truthfully say, "I feel much better now," and spare us both a less comfortable conversation. But being outside of a depressive spell (at least for now; I have little doubt I'll return at some point) also allows me an interesting journalistic perspective.

One point worth making—and I say this as a mostly non-religious person—is that emotions are a sacred, miraculous thing. You realize this when you lose them. I don't think I've ever felt so happy to feel angry as the recent day when, after reading about some recent political horror, I felt my first stirrings of moral outrage in months. I was offended again—and it was beautiful. Other revelatory moments followed, like household appliances flickering back on after a power outage: the return of that almost-crying lump in my throat during emotional movies, or the burst of spontaneous laughter when I heard a joke. A few weeks ago, I drove home after an errand and stayed in my car for a minute just to soak in the old-but-new joy I found from a song I had recently discovered.

But even as I exit my latest depressive spell, I remain mindful of the people who are still there. I know what it means to smile for a photo and feel like you're lying. I know what it means to feel a vague sense of sadness over not feeling sadness. I know what it means to comb the Internet for a video, an article, a book, that explains what's going on inside your seemingly broken brain. To know depression is to become familiar with one of its paradoxes: the feeling that you're missing out on the full human experience is, in fact, a large part of the human experience.

This is where friends and family can help. Odds are that you know someone who has been, or will be, depressed at some point. And so being a vigilant friend and family member means keeping an eye out for the person who's less and less socially active. Stay aware of the co-worker for whom it appears, as one expert told me, "like the light in their eyes is gone." Check in with them. Call them. Visit with them.

The brain is a complex and crucial organ that represents humans' major evolutionary advantage over other animals, Spiegel tells me. And sometimes it has problems working. When this happens, it's not a judgment on the person affected, he says. "It's a problem that sometimes comes up when you're dealing

with using a complex organ to deal with complex problems in life."

It's easy to fix a bike or a car when they break, he continues, but your brain is complicated. "So get help with it if it's not working right."

[\*Sign up for Coping, Tonic's weekly newsletter about anxiety, depression, and dealing with it all\*](#)

Young people are more anxious and depressed than any previous generation. Sign up here to get advice and true stories about mental health in your inbox every week.

*"Be kinder to yourself. And then let your kindness spread and flood the world."* Pema Chodron

*"Be yourself, everyone else is already taken."* Oscar Wilde

2] [The Evolution of Trauma Treatment @ Psychotherapy Networker](#) by [Bessel van der Kolk](#)

Bessel van der Kolk Shares His Hope for the Future of the Field

Most people think the field of trauma treatment began around 1980, when the diagnosis of post-traumatic stress disorder (PTSD) was first included in the DSM as a result of a movement among Vietnam veterans. But one could actually go back well over a hundred years, to the work of Charcot and Pierre Janet at Salpêtrière in Paris. In fact, Janet in particular articulated most of the relevant issues about trauma that are being rediscovered today, such as getting stuck in reliving trauma, dissociating, and having trouble integrating new experiences and going on with one's life. Janet primarily used hypnosis with hospitalized trauma patients to help them put the experience to rest, but his work was largely eclipsed by that of Sigmund Freud, in part because fully recognizing the devastating impact of trauma tends to be too overwhelming for mental health professionals and politicians alike. For example, Freud and his mentor, Joseph Breuer, wrote some outstanding papers on the nature of trauma in the 1890s, but they later repudiated them because suggesting the occurrence of incest in upstanding middle-class families in Vienna was so disturbing to their colleagues.

Ever since, trauma has had a history of cycling between being recognized for the devastating, long-term role it can play in people's lives and then going underground in the face of resistance to that idea. The horror of trench warfare led to wide recognition of the symptoms of shellshock during World War I, but in 1917 the British general staff put out an edict forbidding the military to use the word shellshock to describe the condition, because they assumed it would undermine the troops' morale. The same thing happened after World War II, when the world quickly forgot the price that we pay for sending young men (and now women) into combat. Yet all the symptoms that we read about in the newspaper—suicides, drug addictions, family violence, homelessness, and chronic unemployment—have been well documented after every war within modern memory, starting with the American Civil War.

Nevertheless, in the 1980s, as a result of the work of many people like Charles Figley—a Marine vet from Vietnam, who wrote a book called *Trauma and Its Wake* and started the International Society of Traumatic Stress Studies—trauma began to attract more and more attention in mainstream psychiatry and psychology. Around that time, Judith Herman and I began to study the relationship between

borderline personality disorder and self-injurious behavior and early years of trauma and neglect at the hands of caregivers. However, in the early 1990s, just as had happened in 1902, 1917, and 1947, as the study of the trauma movement began to gather steam, there came a backlash.

In this case, it came in the form of the false memory movement, which tried to discredit the stories of abuse that our clients told us by calling them the result of therapists' systematically implanting false memories in their minds. Much of this movement was fueled by the Roman Catholic Church as it was facing innumerable charges of priests' sexual abuse of children, and by psychologists who could make a good living in forensic settings disputing the allegations by victims of sexual abuse. After the suits against the church were settled, the false memory industry disappeared with it.

One of the results of the controversy surrounding the false memory backlash was that the trauma field got bifurcated into two parallel areas of development, with basically all the research funding being directed to the military and veterans. The other area of research—child abuse and neglect and women's studies—was underfunded and therefore unable to garner enough high-quality studies to determine scientifically how best to treat this population. As a result, our field became one of passionate claims, but little solid scientific evidence.

Nonetheless, some key developments (or, more precisely, in most cases, rediscoveries) have advanced trauma treatment. One has been the recognition of the role that dissociation plays in the aftermath of trauma and how, in various ways, treatment must address the personality structures that can compete or alternate with each other when someone is traumatized. Another major advance was the emergence of EMDR in the 1990s as the first approach that showed that we didn't need to rely on drugs or the traditional talking cure to get traumatized people to leave their traumatic memories behind. Similarly, body psychotherapists have recognized that "the body keeps the score" when it comes to trauma and have revitalized bottom-up approaches like Somatic Experiencing, Hakomi, and sensorimotor psychotherapy to help shut-down people get unstuck from the fight/flight/freeze response.

Through neurofeedback, we're exploring the capacity to rewire brains that are stuck in freeze and terror, and our first published studies of this process show how traumatized children and adults can learn to change how their brains regulate themselves. We've rediscovered that true change is best made when the mind is open. Mindfulness enables people to become attentive to their body and can enable them to feel safe. In fact, our NIMH-funded research shows that it looks as if yoga is more effective than any medication for treating PTSD.

Being able to be mindful is a necessary precondition for change. Hypnotherapists have long known that getting people into a trance state can facilitate the integration of trauma into their overall consciousness. More recently, Internal Family Systems and approaches that use mind-altering drugs like MDMA have demonstrated how to get people into altered states of consciousness where they can actually observe themselves and develop a sense of self-compassion that enables them to integrate their dissociated self from the past into in a calm state of mind in the present.

While all this has been going on, cognitive behavioral therapy (CBT) has accumulated the most research support, even though we know that the whole cognitive part of the brain shuts down when people are traumatized, triggering the primitive survival part of the brain. So using CBT with trauma is like telling somebody with an amputated leg to take up running. It can certainly give people a sense of

perspective on their coping options when they're in the right frame of mind, but it has limited value with severe trauma.

The most commonly used CBT approach to trauma is exposure therapy, which assumes that desensitizing someone to something that used to trigger them is the best way to help them be less affected by their memories. The problem is that desensitization leads to a global lack of feelings and engagement, so when you get desensitized from your trauma, you also get desensitized to joy, pleasure, engagement, and everything else going on. Desensitizing people shouldn't be the goal of treatment: rather, we should help traumatized clients realize that *Yes, this happened to me years ago, but not today; today is a different day, and I'm no longer the person I was back then.* That kind of integration involves a neural network different from the neural network of desensitization.

My hope for the field of trauma treatment is that we learn how to help people bring their imaginations more fully to bear on their possibilities. For example, I'm involved with several theater programs for highly at-risk kids so they get to experience what it feels like to be somebody other than the identity that they've assumed. They can get the chance to say, "Oh, this is what it feels like to be a powerful general," rather than "Nobody likes me; everybody hates me; I'm going to get hurt."

I think theater and new techniques, like neurofeedback, can play an important role in calming the brain down and helping it become organized and more in touch with the body. In our culture, we too often rely on swigging alcohol and taking drugs to make ourselves feel better. Perhaps the most important contribution the therapy world, including the field of trauma, can make to the wider culture is to give people greater access to their innate self-regulatory systems—the way that they move, breathe, sing, interact with each other—so they can discover their natural resources to regulate themselves in a different way, especially when life gets challenging.

This blog is excerpted from "[Trauma: Retreats and Advances](#)," by Bessel van der Kolk, which appears in the January/February 2017 issue, [The Connected Self: Therapy's Role in the Wider World](#).

*"One interesting thing I found was that if you take an affluent modern society and collapse it during a crisis, like a war or a natural disaster, people begin relating in a more ancient, organic way. They're functioning in small interdependent groups and putting others first. And another irony is that even in terrible times, cooperating makes people feel good."* Sebastian Junger

3] [A suburbia for the homeless exists and they can live there forever](#) By [Christopher Dawson](#), CNN

The world looks a little brighter from the front porch of your own home.

It's a sight more than 200 formerly homeless people are waking up to each morning at the [Community First! Village](#) in Austin, Texas.

And they can take their time getting used to it; residents are invited to stay for the rest of their lives.

Community First! Village is built and run by the nonprofit [Mobile Loaves & Fishes](#) to lift the most chronically homeless off the streets and into a place they can call home.

They live in about 100 RVs and 125 micro homes arranged on streets with names like "Peaceful Path"

and "Goodness Way."

Heavy machinery has broken ground on the neighboring 24 acres to add another 310 housing units. When complete, Mobile Loaves and Fishes believes it will be able to provide permanent homes for approximately 40% of the chronically homeless in Austin.

### **Building a community that cares for each other**

Providing a home is not enough, according to founder Alan Graham.

"We believe that housing will never solve homelessness, but community will," Graham told CNN.

"Because within each of us innately are two fundamental human desires to be fully and wholly loved and to be fully and wholly known and just stuffing somebody into a shelter or a house with four walls and a roof is nowhere near sufficient. It's all about the relationship here."

The 51-acre planned village was designed to create a sense of community. The homes are "micro" on purpose, providing just enough comfort and privacy but small enough to encourage the owners to step outside. There they find front porches dotted along stone-paved paths that lead to community kitchens, laundry and wash rooms, meeting halls, playgrounds, a dog park, a barber shop, an outdoor movie theater, a medical facility and a community market.

"What you're seeing is a 250-bedroom, 18-million-dollar mansion," Graham explains. "And so you come out of your bedroom and down the hallway metaphorically is the media room or the kitchen. They're going to see people at the shared kitchens, the movie theater or out in front of the community market just spending time with each other. So it's really that human interaction that is so critically important. And when that happens, relationships begin to form, and that becomes the power of community."

The village also includes an art studio, an artisan blacksmithing shop, glassblowing, beekeeping, a community garden and a car care shop. These hobbies teach new skills and become a source of dignified income.

"We offer a number of micro-enterprise opportunities on this property that in the past two years has distributed over one million dollars to the neighbors that live in this community," says Graham. "From the bed and breakfast, movie theater and car care business to the pottery, jewelry making, blacksmithing and organic farming operation. All of this is being done by the men and women that are here."

New residents might initially keep to themselves, but it is hard to resist the smell of Texas barbecue on the grill, or the sight of fresh vegetables grown on site and being sliced for the community potluck dinner. Hearing the rhythmic tunes of a jam session in Unity Hall is an open invitation to take a seat, tap a foot, and maybe even add a voice to the chorus.

In the heart of the village is a large community center called Unity Hall where administrators, staff and counselors put together daily activities, counseling services, job placement and mentoring to help residents find their way.

"These men and women coming into our community thrive once they rediscover a purpose in their life," Graham tells CNN. "They need to feel valued as human beings."

### **A movement to end homelessness**

Mobile Loaves & Fishes hopes its efforts will launch a movement across the United States; a compassionate answer to homelessness.

Every quarter, they host a [three-day symposium](#) in Austin that teaches attendees how to build similar communities in their cities.

Similar ideas have already taken hold. Tiny houses have been used to tackle homelessness from [Seattle](#) to [New York](#).

For Mobile Loaves & Fishes, it starts with seeing the homeless as members of the community.

"These are our neighbors. It's all about the community being inspired into a lifestyle, a service with this person," Graham says. "And that starts by going into a relationship with them. So roll the window down, say hello. Go break bread with them at McDonald's. It starts by seeing one another."

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Take a break from the heavy stuff with a weekly collection of the best uplifting, humanity-affirming news. Sign up for The Good Stuff - a weekly newsletter for the good in life.

*"When a person is down in the world, an ounce of help is better than a pound of preaching." Edward G. Bulwer*

*"The concept of recovery is rooted in the simple yet profound realization that people who have been diagnosed with mental illness are human beings." Patricia Deegan*

4] [The secret of being a good father](#) By Sophie Hardach @ BBC Future

**Past child development research often ignored fathers. But new studies are finding that non-maternal caregivers play a crucial role in children's behaviour, happiness, even cognitive skills.**

*Or as Marian Bakermans-Kranenburg of Vrije Universiteit Amsterdam, who is doing a series of studies on new fathers and family relations, puts it: "Half of parents are fathers, yet 99% of the research on parenting focuses on mothers."*

The [Aka tribesmen](#) in the Central African Republic often look after their young children while the mothers are out hunting. They soothe, clean and play with their babies, and spend more time holding them than fathers in any other society. Their devotion has earned them the title of "the world's best dads" from online commentators – which is somewhat ironic given that the Aka are strictly egalitarian and shun rankings.

Still, it shows just how dramatically the wider view of being a “good father” has changed over time.

Today, many dads are celebrated for being sensitive, caring and hands-on. A growing body of research is transforming our understanding of how they can shape their children’s lives from the start, challenging conventional ideas of parenthood and gender.

This is striking given that until the 1970s, the role of fathers in their children’s development was not much studied at all. Their most important job was seen as economically supporting the mother, who would in turn be the emotional anchor for the child.

“There was a lot of focus on how relationships with mothers were very important, and there was very little thought about other social relationships,” says Michael Lamb, a psychologist at the University of Cambridge who has been studying fathers since the 1970s. “The most obvious of those was the father-child relationship – a relationship that was viewed as more important as children grow older, but was always viewed as secondary to the mother-child relationship.”

Or as Marian Bakermans-Kranenburg of Vrije Universiteit Amsterdam, who is doing a series of studies on new fathers and family relations, puts it: “Half of parents are fathers, yet 99% of the research on parenting focuses on mothers.”

Now, new research is showing that the social world of children is much richer, and more complex, than previously thought.

It is not just dads who have moved into the spotlight. Grandparents, same-sex parents, step-parents and single parents have also helped researchers understand what really makes a child thrive – and that it’s not just about one caregiver.

“Part of the argument that I’ve been trying to make for the past 45 years is that actually, no, there are multiple important factors,” says Lamb. “We do want to recognise differences in their importance, but we also need to recognise that – to quote that cliché – it does take a village, and that there are a lot of important relationships that shape children’s development.”

A range of recent studies show how flexible parenting roles can be. Psychologist Ruth Feldman of Israel’s Bar-Ilan University has found that, just like mothers, [fathers experience a hormonal boost](#) when caring for their babies, which helps the bonding process. When dads are the main caregivers, their [brains adapt](#) to the task.

And emotional involvement matters. [Babies with emotionally engaged dads show better mental development](#) as toddlers and are less likely to have [behavioural problems](#) later on, compared to babies whose dads behave in a more detached way. Older children benefit, too. Those whose fathers, or father figures, are more emotionally supportive, tend to be [more satisfied with life](#) and have [better relationships](#) with teachers and other children.

“The factors that lead to the formation of relationships are exactly the same for mother and father,” says Lamb. “It really comes down to the emotional availability, recognising the child’s needs, responding to those, providing the comfort and support that the child needs.”

Past research has found that mothers and fathers do tend to interact differently with small children: mothers bond more through gentle caretaking, while [fathers typically bond through play](#). But that, Lamb says, has less to do with gender and more with the division of childcare.

Studies of same-sex couples and stay-at-home dads have shown that regardless of gender, it is the parent who works during the day, and comes home in the evening, who tends to play wilder games, like picking up their baby and swinging them around. The parent who looks after the baby all day is likely to interact with them more calmly.

In heterosexual couples, the parent who takes on most of the care during the day is often still the mother for a range of social and economic reasons.

One is to do with parental leave. While all OECD countries except the US provide nationwide, publicly-funded, paid maternity leave, [only half provide paid paternity leave](#) that lasts for at least two months. Meanwhile, given the persisting gender wage gap, it often simply makes economic sense for new mothers rather than fathers to stay at home. [Across the OECD, women earn 13.8% less than men](#) (based on median earnings).

This helps to explain why parental leave alone is not the answer. In the UK, where shared parental leave is available, [as few as 2% of couples take it](#).

In fact, even among the much-praised Aka, the women do the majority of the childcare. They hunt and forage with their babies snuggled against them in a sling. But no-one yet has declared them the world's best mothers.

But involving dads more from the start can have many benefits, research has shown. And play, regardless of whether it's calm or boisterous, is particularly beneficial.

“Play is the language of childhood: it's the way children explore the world, it's how they build relationships with other children,” says Paul Ramchandani, who studies play in education, development and learning at the University of Cambridge. He and his team observed fathers playing with their babies in the first months of life, then tracked the children's development. They found that early father-baby interactions are much more important than previously assumed.

Babies whose dads were more active and engaged during play [had fewer behavioural difficulties at age one](#) compared to those with more distant or detached dads. They also [did better in cognitive tests](#) at two, for example in their ability to recognise shapes.

These outcomes were independent of the mother's relationship with the child.

Ramchandani cautions that the results should not be interpreted as a clear causal link. Instead of directly affecting their children's development, the distant dads' behaviour could, for example, be a sign of other problems in the family. Still, he sees the study as an encouragement to play with your child long before they can crawl and talk: “Some dads don't do that when the babies are young because they're unsure about what they should do, or unsure if they're doing the right things.” Of course, new mothers may feel similarly hesitant.

But Ramchandani says it can be as simple as sitting the baby on your lap, making eye contact, and observing what they enjoy.

“It’s the getting involved that’s the most important thing, because you’ll get better at it if you practice it. It’s not something that comes naturally to everybody. Some people are really good at it, but for most people it takes practice,” he says.

In many ways, fathers are [more involved than ever](#). There are fathers’ playgroups, dads-only baby massage classes, and hugely popular online videos of [dad-and-baby dance ensembles](#).

Visit a typical weekday baby group in even a relatively progressive neighbourhood in London, however, and the picture quickly changes. Yes, there are usually one or two dads around, and they are just as competent as the mums. But the bulk of parenting still seems to fall to women. Around the world, women spend [up to 10 times more time on unpaid care work](#) – including childcare – than men.

“I think we’re at a crossroads in terms of how we view fathers,” says Anna Machin, an anthropologist and author of *The Life of Dad*, a book on modern fathering.

Machin argues that while most dads want to be more active at home, the workplace has not really adapted to this. “That’s where the tension is for men at the moment: between needing and wanting to care, and also needing to still provide,” she says.

Given the financial pressures many families face, Machin fears there could actually be a reversal to more traditional roles: “If you’re a dad now, if you want to be involved, you have to be a bit of a pioneer in the workplace. You have to go against all that culture of, ‘men go back to work’. You have to be the one to go, ‘Actually, I want to assert my rights’.

“And that’s quite a hard thing to do.”

A more equal division can have many long-term benefits. Researchers led by sociologists Helen Norman and Colette Fagan at the University of Manchester found that [fathers were more likely to be involved when the child was aged three](#) if they shared childcare equally when the child was nine months old. In Scotland, a study of more than 2,500 families showed that supportive [father-child relationships matter as much as mother-child relationships for children’s wellbeing](#). In another sign of change, the study included father-figures such as stepfathers, whose impact has often been side-lined.

“People did take note, and it’s helping to maintain or increase the profile of fathers in a range of policy discussions,” says Paul Bradshaw, director of the Scottish Centre for Social Research, which undertook the study on behalf of the Scottish government.

Perhaps one day, a male chief executive with a baby sling will be as common a sight as a group of Aka men carrying their infants back from the hunt. In the meantime, dads can take comfort in the fact that there are countless ways of being a good parent.

“One of the points we’ve learned is that there isn’t a model of the ideal father. There isn’t a recipe for what the father needs to do or what sorts of behaviour he needs to emulate,” says Lamb.

Ultimately, he says, it's about being emotionally available, and meeting the child's needs. "Different people do that in different ways. There's been a lot of talk about, 'do dads need to do that in a masculine way?' And the answer is no, they don't need to.

"They need to do it in a way that makes sense for them, that feels authentic, that allows them to be fully and coherently engaged in the relationship with their child."

*"Criticism, like rain, should be gentle enough to nourish a man's growth without destroying his roots."*  
Frank A. Clark

*"I've learned that you shouldn't go through life with a catcher's mitt on both hands. You need to be able to throw something back."* Maya Angelou

5] [Campaign for Trauma Informed Policy & Practice](#) [CTIPP] - *Promoting healthy, resilient communities*

**Mission** - To create a resilient, trauma-informed society where all individuals, families, and communities have the opportunity and support needed to thrive.

**Goals** - 1] To inform and advocate for public and tribal policies and programs at the federal, state, and local levels that incorporate up-to-date scientific findings regarding the relationship between trauma and related social and health challenges across the lifespan.

2] To work in collaboration with government, organizations and citizens to develop trauma-informed, prevention-focused, evidence-informed policies and practices.

**Approach** - CTIPP explicitly focuses on the common underpinnings of many of our most pressing social and health problems. The organization works to expand and continuously improve our coalition across sectors and systems through open engagement. We recognize that sustainable change in policies and programs requires the participation and leadership of not only those responsible for implementation, but the people for whom programs and policies are designed. We are committed to ensuring voice and choice for everyone.

CTIPP embraces a public health framework, addressing the social determinants of health and supporting the integration of promotion, prevention, resilience-building and healing activities. We recognize the importance of historical and intergenerational patterns that affect health across the lifespan as well as the health and welfare of families. We know that people are fundamentally resilient and we prioritize actions and policies that support and build on natural strengths. We believe that trauma-informed approaches address social justice as well as healing.

Our work to help create an equitable, just, and trauma-informed society requires the development of broad-based, systemic solutions and structural reform, in addition to new partnerships and funding mechanisms.

[CTIPP Selected by APA for Distinguished Service Award](#) - By Dr. Sandra Bloom

In May of 2019, CTIPP was selected by the American Psychiatric Association to receive the APA's Distinguished Service Award for meritorious service to the field of psychiatry. It is an honor to receive such praise, especially for a young, entirely volunteer organization. For many of us, our careers have been a Campaign for Trauma-Informed Policy and Practice since the 1980's, long before this organization was formed. When we first gathered together in 2016, the field of traumatic stress studies had grown widely and the scientific basis of understanding stress, trauma and adversity had become voluminous. But we all sensed that something was still missing – an organization to promote a common language and understanding about trauma, to influence and support trauma-sensitive legislation, and to lobby for trauma-resilient communities.

We know now that most of our social problems are related to exposure to childhood adversity and trauma across the lifespan, exposure that is often multigenerational. The big deal about this subject is the challenge of creating the deep change needed to prevent problems instead of simply treating symptoms. Today, when someone is hurt badly, leaving them emotionally, physically, and spiritually scarred, they are labeled as either “bad” (they have done something wrong) or “sick” (there is something wrong with them). If they are “bad”, they go to the criminal justice system; if they are “sick”, they go to the mental health system; and if they are both “bad” and “sick”, nobody wants to deal with them.

What “trauma-informed” really means is that neither of these mental models are helpful. Yet these ideas inform just about everything we do, often without our awareness. We not only need to stop labeling people as bad and sick, we need to understand the nature of psychological injury and what it takes to heal. This was the key learning that my colleagues and I had in the 1980's, captured in a phrase that has become a social “meme” – *“It's not what's wrong with you, it's what happened to you”*.

Trauma-informed care means developing a sensitivity to the lived experiences of those who have been deeply and badly hurt. Human beings do the best we can to cope, but our coping often leads to more problems. Being trauma-informed does not mean that we are making excuses for problem behavior. It means that the scientific findings around adversity and trauma are providing us with better explanations, and better explanations can lead to improved interventions and outcomes – including better financial outcomes.

Humanity is in a position – for the first time in human history – to decide what we want the future to be; whether to improve the wellbeing of all living beings, or regress to an isolated and fearful existence. This decision point parallels the choice that every individual survivor of trauma and adversity must make – to do the very difficult work of healing and recovery, or to stay on a path that ultimately leads to destruction.

CTIPP is building a movement to create a future that is better than what the present has to offer. I remain hopeful that our vision will continue to crystalize as we work to develop systems that promote recovery and post-traumatic growth for individuals, families, communities and societies. We can change the policies and practices that perpetuate negativity. We live in the most advanced and interconnected society this world has ever known. One of the amazing things we have witnessed is that when trauma-informed policies and practices are embraced, positive return is almost immediately felt. Massive expenditures are often avoidable, but to do so requires intentional care and timely preventative steps. If our society would spend as much time working to get to know and help people as

it spends on labeling them, amazing things could happen.

CTIPP is at the center of a consistent effort to move beyond the practices and policies that currently cripple our communities. Change is a long and tiring process. It is amazing to look back at the changes that have happened since we each began this work, and overwhelming to look ahead at all the work left to do. We need to be resilient and to bring positivity into our world. We need to come together and be vulnerable, through the highs and lows. As we continue, solutions will emerge.

I thank the American Psychiatric Association for their recognition of CTIPP. The support we have received in just a few years has been gratifying. I hope that all readers of this post will consider financially supporting our cause and spread our work throughout your networks. Together we can make a difference, and with your help, CTIPP can continue to flourish.

*“Great opportunities to help others seldom come, but small ones surround us every day.” Sally Koch*

*“Being a man or a woman is a matter of birth. Being a man or a woman who makes a difference is a matter of choice.” Byron Garrett*

6] [When Complex Trauma Is Misdiagnosed as Anxiety](#) - The Mighty by Vicki Peterson

### **We Can't Keep Treating Anxiety From Complex Trauma the Same Way We Treat Generalized Anxiety**

I've been living with the effects of complex trauma for a long time, but for many years, I didn't know what it was. Off and on throughout my life, I've struggled with what I thought was anxiety and [depression](#). Or rather, In addition to being traumatized, I was anxious and depressed.

Regardless of the difference, no condition should ever be minimized. If you are feeling anxious or depressed, it's important and urgent to find the right support for you. No one gets a prize for “worst” depression, [anxiety](#), trauma or any other combination of terrible things to deal with, and no one should suffer alone. With that in mind, there is a difference between what someone who has Complex PTSD feels and what someone with generalized anxiety or mild to moderate depression feels.

For someone dealing with complex trauma, the anxiety they feel does not come from some mysterious unknown source or obsessing about what could happen. For many, the anxiety they feel is not rational. General anxiety can often be calmed with grounding techniques and reminders of what is real and true. Mindfulness techniques can help. Even when they feel disconnected, anxious people can often acknowledge they are loved and supported by others.

For those who have experienced trauma, anxiety comes from an automatic physiological response to what has actually, already happened. The brain and body have already lived through “worst case scenario” situations, know what it feels like and are hell-bent on never going back there again. The fight/flight/ freeze response goes into overdrive. It's like living with a fire alarm that goes off at random intervals 24 hours a day. It is extremely difficult for the rational brain to be convinced “that won't happen,” because it already knows that it has happened, and it was horrific.

Those living with generalized anxiety often live in fear of the future. Those with complex trauma fear

the future because of the past.

The remedy for both anxiety and trauma is to pull one's awareness back into the present. For a traumatized person who has experienced abuse, there are a variety of factors that make this difficult. First and foremost, a traumatized person must be living in a situation which is 100 percent safe before they can even begin to process the tsunami of anger, [grief](#) and despair that has been locked inside of them, causing their hypervigilance and other anxious symptoms. That usually means no one who abused them or enabled abuse in the past can be allowed to take up space in their life. It also means eliminating any other people who mirror the same abusive or enabling patterns.

Unfortunately for many, creating a 100 percent abuser-free environment is not possible, even for those who set up good boundaries and are wary of the signs. That means that being present in the moment for a complex trauma survivor is not fail-proof, especially in a stressful event. They can be triggered into an emotional flashback by anything in their present environment.

It is possible (and likely) that someone suffering from the effects of complex trauma is also feeling anxious and depressed, but there is a difference to the root cause. Many effective strategies that treat anxiety and depression don't work for trauma survivors. Meditation and mindfulness techniques that make one more aware of their environment sometimes can produce an opposite effect on a trauma survivor. Trauma survivors often don't need more awareness. They need to feel safe and secure in spite of what their awareness is telling them.

At the first sign of anxiety or depression, traumatized people will spiral into toxic shame. Depending on the wounding messages they received from their abusers, they will not only feel the effects of anxiety and depression, but also a deep shame for being "defective" or "not good enough." Many survivors were emotionally and/or physically abandoned, and have a deep rooted knowledge of the fact that they were insufficiently loved. They live with a constant reminder that their brains and bodies were deprived of a basic human right. Even present-day situations where they are receiving love from a safe person can trigger the awareness and subsequent grief of knowing how unloved they were by comparison.

Anxiety and depression are considered commonplace, but I suspect many of those who consider themselves anxious or depressed are actually experiencing the fallout of trauma. Most therapists are not well trained to handle trauma, especially the complex kind that stems from prolonged exposure to abuse. Unless they are specially certified, they might have had a few hours in graduate school on Cluster B [personality disorders](#), and even fewer hours on helping their survivors. Many survivors of complex trauma are often misdiagnosed as having [borderline personality disorder](#) (BPD) or [bipolar disorder](#). Anyone who has sought treatment for generalized anxiety or depression owes themselves a deeper look at whether trauma plays a role.

### **MORE ABOUT ANXIETY:**

While everyone experiences some level of anxiety, not everyone has an anxiety disorder. For those with anxiety disorders, anxiety can become so severe and persistent, it interferes with their daily life and functioning. Anxiety disorder symptoms include excessive worry, panic attacks and other physical symptoms including shortness of breath, nausea, headaches and tremors. [Click here to join our anxiety community](#) and connect with people who get it.

**Vicki Peterson is a Certified Trauma Recovery Coach.** She blogs as a survivor of narcissistic and emotional abuse at [You Have Something To Say](#) – Resources for Transformation After Narcissistic and Emotional Abuse

*You are resilient. You are creative. You are smart, intuitive, and kind. You want to reclaim your voice and express yourself.*

*You are a survivor. You are no longer defined by what happened to you, but where you want to go. You are ready to discover your unique talents and embrace who you truly are.*

*You are seen. You are heard. You matter. I care.*

*“Love is the most ethically consistent experience, because selfishness and altruism no longer seem opposed or in conflict.” Peter Breggin*

*“We are a conspiracy of hope and we are pressing back against the strong tide of oppression which for centuries has been the legacy of those of us who are labeled with mental illness. We are refusing to reduce human beings to illnesses.” Patricia Deegan*

7] [How Does Trauma Affect Sleep?](#) - Trauma - the blanket term for any physically or psychologically damaging experience is sadly common in our society. According to the National Center for PTSD, [roughly 60% of men and 50% of women](#) will experience at least one traumatic event during their lifetimes. Trauma can cause a wide range of long-lasting, negative health effects, including insomnia and other sleep-related problems.

*I've always marveled how I got by on 5 - 6 hours of sleep all of my life, now in my later years, the all too frequent wakings disturb the small amount of sleep I get, never put two and two together that all of the trauma and abuse played havoc with my sleep, and then the damn head traumas/concussions only exacerbated that. As my friend used to say, "**child abuse, the gift that keeps on giving**".*

*I find listening to these at night helps calm me down - [528Hz - Whole Body Regeneration - Full Body Healing | Emotional & Physical Healing](#) & [Deep Sound Healing ~ 432Hz Theta Binaural Meditation ~ Transcending Trauma](#)*

*Take care, Michael.*

8] [6 yoga poses that will help you fall sleep faster](#) – NBC News, Health

If you have a hard time winding down at night, these moves will relax your muscles and help you sleep more soundly.

9] [Dementia risk tied to these commonly prescribed drugs in a new study](#) By [Jacqueline Howard](#), CNN

Commonly prescribed drugs are tied to nearly 50% higher dementia risk in older adults, study says

10] [Ava DuVernay Focuses On The Central Park 5's Perspective: 'Now People Know'](#) : Fresh Air with Terri Gross, NPR Podcast

DuVernay's Netflix series, *When They See Us*, tells the story of how five black and brown teenagers were manipulated into confessing to a brutal rape they did not commit.

11] [Stonewall Inn Veteran and Gay Rights Activist Scott G. Brown Reflects on 50th Anniversary](#) | WBGO Podcast By [Alexandra Hill](#)

The 50th anniversary of the Stonewall Inn uprising that many say was the beginning of the Gay Rights Movement in not only New York City but around the globe. Author and gay rights activist Scott G. Brown was there. Brown recalls the night of June 28th 1969 and the NYPD raid that sparked the movement.

12] [Michael Skinner - Survivor Knights Event - "Sorrow"](#) – YouTube – Live performance

A song I wrote for everyone who has been told to, "get over it", "it's in the past", etc...

Off the Album: [Pirates](#) two minute sample clip posted at page.

*"Where words fail, music speaks." Hans Christian Andersen*

*"My heart, which is so full to overflowing, has often been solaced and refreshed by music when sick and weary." Martin Luther*

***Thank you & Take care, Michael***

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

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

*A diagnosis is not a destiny*

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

[The Surviving Spirit Facebook Page](#)

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

