



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 January 2020

Hi Folks,

Greetings and wishing everyone a Happy New Year and good health for 2020.

Strange weather here in New Hampshire land, freezing cold for several days, lots of snow, then warmer temperatures, up to the 40's, 50's and 60's for December and January, then major rain storms. I think it's doing a number on the plant life and the animals, especially the bears, they are staying quite active and enjoying everyone's bird feeders. I have finally learned my lesson and bring them in at dusk.

I'd like to share a little musical reprise from the Survivor Knights event at the Rotunda in Philadelphia, PA, March 2019 - Live performance of "**Pirates**" and "**When Your Heart Follows A Lie**" - <https://www.youtube.com/watch?v=E1J7llqObqw>

Some tunes of mine addressing the traumas ["**Pirates**"] of life & the lies and the beliefs I [perhaps you have as well] have followed and then finding some truth...and love. These are some of the reasons these songs came to pass.

[“PIRATES” © Michael Skinner Music – title track](#)

Walking down to the dock of the bay
Just take care in selecting you ship, moored at the quay
A sturdy ship from those at hand will help your passage
Deliver you to a new land
Before you set sail, remember why you chose to leave this place
Changing your mind in a storm tossed sea
Keeps you, floundering upon that misery sea

- Chorus -

Taking shots from a cannonade
High seas pirates chasing your sails
Throw your caution to the wind
Position your ship so the sun shines in their face
And though your crew has abandoned the sails
I can still feel the wind and the waves, at your hand

And though your crew has abandoned the sails
I can still feel the wind and the waves at your hand, at your hand

- Middle break –

- Chorus -

Taking shots from a cannonade
High seas pirates chasing your sails
Throw your caution to the wind
Position your ship so the sun shines in their face
And though your crew has abandoned the sails
I can still feel the wind and the waves at your hand
And though your crew has abandoned the sails
I can still feel the wind and the waves at your hand, at your hand

Before you set sail remember why you chose to leave this place

“WHEN YOUR HEART FOLLOWS A LIE”© Michael Skinner Music – *hope to record onto a new album this year*

See your life unfold, wasting away
All those things you thought, they’ve been betrayed
I seemed so sure, of what I felt
Little did I know, soon that ice would melt
I have seen the fire and I’ve felt the rain
Love that felt so good, that too betrayed
All the mysteries of life, I’ve wanted to taste
My pursuit of truth and life, soon laid to waste

Chorus

And yet what I find, is not what I thought
Have I been so blind, in what I lived for
Now I know I was blind
Now I know I was blind

You feel so all alone, in this space
Try so hard to hang on, what’s left of your faith
Your hand reaches out, they slap it away
Once more you feel that knife, you’ve been betrayed

Chorus

And yet what I find, is not what I thought
Have I been so blind, in what I lived for
When your heart follows a lie

When your heart follows a lie
When you follow people of the lie
When your heart follows a lie

- Middle break

Chorus

And yet what I find, is not what I thought
Have I been so blind, in what I lived for
And now I know, I was blind
Oh now I know, I was blind
When your heart follows a lie
When your heart follows a lie
Now I follow truth, love and light
No more following a lie
We shall follow truth, love and light
We shall follow truth, love and light

As always, thank you for being a part of this newsletter list and for sharing with others. Michael

Contents List:

- 1] Just Being Outside Can Improve Your Psychological Health, and Maybe Your Physical Health Too by Zoë Schlanger @ Pocket Worthy - Stories to fuel your mind.
- 2] PTSD: Civilians Struggle To Find Effective Therapy : Health News: NPR by Caroline Covington
- 3] Meet the Music Manager Who Helps Struggling Addicts on the Road to Recovery by James Patrick Herman @ Variety
- 4] A Letter to Niyah: Trauma Under the Bridge – YouTube 9:54 minutes
- 4a] One Woman’s Rise From Living Under a Bridge, To A Radiant Life Filled With Renewal And Hope
- 5] Building a Life Worth Living by Marsha M. Linehan: Penguin Random House Books
- 6] Self-Esteem Growth: Stay True to Your Roots, Not Your Leaves By Vicki Botnick, MA, MS, MFTI, @ Good Therapy
- 7] Brushes with the law: how teaching art to women in prison changed their outlook by Joanna Moorhead @ The Guardian
- 8] Ronan Farrow's Brief But Spectacular take on interrogating the truth PBS – You Tube 4:29 minutes

9] Childhood Trauma Can Manifest As

10] How Treating People With Brain Injuries Helped Me Forgive My Mother by Shelby Vittek

“Your vision will become clear only when you can look into your own heart. Who looks outside, dreams; who looks inside, awakes.” Carl Jung

1] [Just Being Outside Can Improve Your Psychological Health, and Maybe Your Physical Health Too](#) by [Zoë Schlanger](#) @ [Pocket Worthy](#) - Stories to fuel your mind. & [Quartz](#)

Hello. It's the weekend. Maybe you should go outside? Here's why.

Reason one: Just being in a wooded area boosts your immune system.

Consider the scientifically backed practice of [forest bathing](#), which is, more or less, just standing in the woods. As told by Quartz reporter Ephrat Livni:

From 2004 to 2012, Japanese officials spent about [\\$4 million dollars](#) studying the physiological and psychological effects of forest bathing, designating 48 therapy trails based on the results. Qing Li, a professor at Nippon Medical School in Tokyo, measured the activity of human natural killer (NK) cells in the immune system before and after exposure to the woods. These cells provide rapid responses to virus-infected cells and respond to tumor formation, and are associated with immune system health and cancer prevention. In a [2009 study](#), Li's subjects showed significant increases in NK cell activity in the week after a forest visit, and positive effects lasted a month following each weekend in the woods.

This is due to various essential oils, generally called phytoncides, found in wood, plants, and some fruit and vegetables, which trees emit to protect themselves from germs and insects. Forest air doesn't just feel [fresher and better](#)—inhaling phytoncides seems to actually improve immune system function.

Trees were found to bolster the spirit, too. A study on forest bathing's [psychological effects](#) surveyed 498 healthy volunteers after each spent an average of two hours and 20 minutes in a forest in one day, split up over two trips, and then twice again on a day each participant didn't visit a forest:

The subjects showed significantly reduced hostility and depression scores, coupled with increased liveliness, after exposure to trees. “Accordingly,” the researchers wrote, “forest environments can be viewed as therapeutic landscapes.”

Reason two: Dirt has a microbiome, and it may double as an antidepressant.

As we've come to understand better over the past decade of research, our immune system depends on the health of our gut microbiome - which in turn depends partly on how much of the natural world's microbiome we let infiltrate our bodies. Evidence is growing to suggest our immune system is linked to our brain, which means it's likely that nature's microbiome plays a big role in our mental health, too.

Exposure to the bacteria in soil, specifically, appears to be good for mental health, and is being investigated as a treatment for depression. Let me [re-introduce](#) you to the common soil bacteria *Mycobacterium vaccae*:

The world of biomedical research has already fallen in love with the promising realm of the human gut microbiome. A body of emerging evidence tells us the millions of microbes in our digestive tract influence our immune systems, our smells, our [mood](#), and possibly even our attractiveness to [mosquitoes](#)—and [to other people](#). But *M. vaccae* expands this thinking to the microbiome of the pile of mulch in your backyard.

There's now pretty good evidence to draw at least an outline of a conclusion: Breathing in, playing in, and digging in dirt may be good for your health. Our modern, sterilized lives in [sealed-off office buildings](#) and homes are likely not. Researchers have already found clear evidence that childhood exposure to outdoor microbes is [linked to a more robust immune system](#); for example, Bavarian farm children who spent time in family animal stables and drank farm milk had [drastically lower rates of asthma](#) and allergies throughout their lives than their neighbors who did not.

But the rest of us, not raised on farms, may be missing out on that sort of protection. Some counterbalance, like spending time in a garden, might change that.

The research is promising: When a neuroscientist at the University of Bristol injected *M. vaccae* into mice and subjected them to a series of stress tests, those animals inoculated with the bacteria showed [far less stressed behavior](#) than their untreated counterparts.

Another paper found that feeding mice [M. vaccae-laced peanut butter sandwiches](#) gave them a significant brain boost; they were able to navigate mazes far faster than the untreated mice. Next up: Researchers plan to study whether a probiotic with similar properties to *M. vaccae* could benefit veterans suffering from PTSD and mild traumatic brain injury.

The more we learn about the health benefits of exposure to the outdoors, the more it seems like a good idea to spend more time in them. Researchers have found that just *looking* at the [sea](#) or at [trees](#) can have health benefits. Plus, your [office might be making you sick](#), simply by being a closed environment. So maybe, once again, you should go outside.

“First keep the peace within yourself, then you can also bring peace to others.” Thomas à Kempis

“Take rest, a field that has rested gives a beautiful crop.” Ovid

2] [PTSD: Civilians Struggle To Find Effective Therapy](#) : Health News: NPR by [Caroline Covington](#)

Because so many patients think PTSD is mostly a military problem, psychologist Bira says, they encounter a roadblock to recovery.

Lauren Walls had lived with panic attacks, nightmares and flashbacks for years. The 26-year-old San Antonio teacher sought help from a variety of mental health professionals — including spending five

years and at least \$20,000 with one therapist who used a Christian-faith-based approach, viewing her condition as part of a spiritual weakness that could be conquered - but her symptoms worsened. She hit a breaking point two years ago, when she contemplated suicide.

In her search for help, Walls encountered a psychiatrist who diagnosed her with [post-traumatic stress disorder](#). As a result, she sought out a therapist who specialized in trauma treatment, and that's when she finally experienced relief.

"It was just like a world of difference," Walls says.

Seeing herself as someone with PTSD was odd at first, Walls recalls. She isn't a military veteran and thought PTSD was a diagnosis reserved for service members. But her psychologist, Lindsay Bira, explained that Walls most likely developed the mental disorder from years of childhood abuse, neglect and poverty.

PTSD has [long been associated with](#) members of the military who have gone through combat and with first responders who may face trauma in their work. It's also associated with survivors of sexual assault, car accidents and natural disasters. But researchers have also learned [it can develop](#) in adults who have experienced chronic childhood trauma - from physical, emotional or sexual abuse by caregivers or from neglect or other violations of safety.

Walls was fortunate to find a therapist trained to treat PTSD. Outside of military and veterans' health facilities, finding knowledgeable help is often difficult.

A limited number of the [more than](#) 423,000 mental health counselors, therapists, psychologists and psychiatrists in the U.S. are trained in two key therapies, called cognitive processing therapy and prolonged exposure therapy. These are treatments recommended as part of a patient's care by the [American Psychiatric Association](#) and [the Department of Veterans Affairs](#), which has studied treatments for PTSD since it affects many service members.

There is no definitive tally of people trained in these therapies, and neither the American Psychiatric Association nor the American Psychological Association tracks those data. A [2014 study by the Rand Corp.](#) found that only about a third of psychotherapists had the training. The VA says [over 6,000](#) of its therapists have, though rosters for the [CPT](#) and PE organizations list just a few hundred total practitioners.

Nonetheless, the [VA's National Center for PTSD](#) wants to expand access to these treatments, and regional groups, including those in Texas, are following its lead. Texas has a need for more PTSD providers: It [ranks No. 2 nationwide](#) in the number of human-trafficking victims; it's the leading state for refugee resettlement; it has the most unaccompanied child migrants of any state; and it's second only [to California](#) in the number of military service members - all factors that raise the risk of PTSD.

UT Health San Antonio, a research and academic center that is part of the University of Texas System, teaches community mental health providers how to provide the two PTSD therapies through its Strong Star Training Initiative. Funded by the Texas Veterans + Family Alliance grant program and the Bob Woodruff Foundation, the initiative has trained 500 providers since it started in 2017. Most training takes place in San Antonio, and many of the mental health professionals who participate are Texas-

based, though they also come from Florida, Illinois and other states.

In February, about 20 therapists gathered in a conference room at the medical school for instruction. Calleen Friedel, a San Antonio-based marriage and family therapist, was one of them. She said she is seeing more people with PTSD and often felt inept at helping them.

"I would just do what I know and do my own reading," Friedel said. "And what I was taught in graduate school, which was, like, over 20 years ago."

The group learned about one of the mainstream therapies, [prolonged exposure therapy](#), which gradually exposes patients to trauma memories to help reduce PTSD symptoms. Strong Star also teaches [cognitive processing therapy](#), which involves helping the patients learn to reframe their thoughts about the trauma. But both therapies — often called "evidence based" because of the research backing their effectiveness — have been [slow to gain traction](#) among psychotherapists because they require the therapist to follow a script and they [differ from the common therapeutic approach](#) to mental health issues.

Edna Foa, who created prolonged exposure, said in a 2013 journal article that many psychotherapists believe delving into a patient's inner life and history is central to their work. By contrast, the highly structured, evidence-based treatments — with their pre- and post-session evaluations and their focus on symptom relief — can seem "narrow and boring," she wrote.

In addition, [some people living with PTSD](#) have complained that the treatments don't work for everyone. But Foa and others say the focused approach targets the brain mechanisms that cause PTSD symptoms, and symptom relief is what many living with PTSD [want](#).

Edwina Martin, a psychologist in Bonham, Texas, says treatments such as the ones she is learning at Strong Star weren't mainstream when she finished graduate school more than 10 years ago. She is now employed at a VA health center after working for a decade in prisons, and she says she wants these PTSD therapies in her "tool bag."

The push to expand the trained workforce coincides with a growing understanding of trauma's effects. The National Council for Behavioral Health, a nonprofit organization of mental health care providers, calls trauma a "[near universal experience](#)" for people with mental and behavioral health issues.

Because so many patients think PTSD is mostly a military problem, psychologist Bira says, they encounter a roadblock to recovery.

"I get that all the time," Bira says. "The beginning stages in treatment that I find with civilians are really about educating [them] about what PTSD is and who can develop it."

[Kaiser Health News](#) is a nonprofit news service covering health issues. It is an editorially independent program of the Kaiser Family Foundation that is not affiliated with Kaiser Permanente.

"Trauma... does not disappear if it is not validated. When it is ignored or invalidated the silent screams continue internally heard only by the one held captive." Danielle Bernock

“Since the trauma you experienced was mostly invisible, you have difficulties gaining recognition for the trauma you have endured.” Imi Lo

3] [Meet the Music Manager Who Helps Struggling Addicts on the Road to Recovery](#) by [James Patrick Herman](#) @ [Variety](#)

He fought through his own addiction, and knows what it takes to get sober.

Longtime music manager Jeff Jampol is known as one of the top estate representatives in the world. He’s made a career out of monitoring — and monetizing — the brands and assets of such legends as Jim Morrison, Janis Joplin and the Ramones, among many others. But Jampol is just as well-regarded by his peers for being the go-to person for those struggling with addiction. He’s beloved in the industry for his tireless work to provide guidance, connections and motivation so that others can get clean, just as he did 30 years ago.

“I’ve known Jeff for much of my career in the music business,” says Steve Berman, the vice chairman of Interscope Geffen A&M Records, home to Lady Gaga, Maroon 5 and Eminem. “But what many people don’t know — and that’s because Jeff doesn’t make a big deal about it — is that he’s helped dozens and dozens of executives and artists on their path to recovery from addiction issues. He is, as they say, ‘of service’ to an enormous number of people in recovery, many of whom go on to help others as part of their process. The ripple effect of positivity and healing created by Jeff is simply incalculable.”

Jampol’s own struggle started during college, when he dropped out of Sonoma State University after a year “to manage punk bands and deal cocaine,” he says. “Unfortunately, I was my own best customer, so that didn’t go so well as a commercial venture.” Heroin soon proved to be his drug of choice. “I got as close to death as you could possibly get, and almost had my leg amputated.”

Employed at Warner Bros. sales and distribution during the music biz’s boom years in the 1980s, Jampol — who already stands out at 6’8” — didn’t want to walk into work with track marks on his arms, so he shifted to veins in his leg. The result wasn’t pretty: “Hundreds of abscesses started joining together to create one huge open cave on my leg,” says Jampol, who wound up in the ER due to an exposed tibia bone. “They said, ‘If we don’t amputate, he’s definitely going to die; he might still die after we amputate, but we’ve got to do it,’” he recalls. Luckily for Jampol, the anesthesiologist refused — Jampol’s tolerance level to opiates was too high — and he landed in the detox unit, where enough tissue growth allowed for reconstructive surgery.

Two skin grafts and another stint in detox later, Jampol was finally sober. But he was still an addict. Ultimately, he couldn’t resist the temptation to shoot up — in the same leg — once again. “With every IQ point I now possess,” Jampol points out, “so clearly it’s not an intellectual issue. As I was preparing the syringe and thinking, ‘This is a really bad idea,’ I plunged the needle right in my leg. It’s a very powerless state of being.”

It took Jampol four trips to treatment to achieve long-term sobriety. One of his first jobs in recovery was selling computer printer ribbons over the phone for \$150 a week. “I had lost everything, and I was sleeping on floors for over a year,” he says. “But I decided to make a commitment to recovery.” It was

a decision made not only for himself but for others, and it paid off exponentially: One of the people he met on the road to recovery was Danny Sugerman, manager of the Doors — which led to a friendship and then a blossoming business partnership that filled an industry void and modernized the legacy artists market.

Even by the standards of the music industry, Jampol Artist Management is unusual. First there's the mantra: "Wisdom comes from good judgment and good judgment comes from experience and experience comes from really bad judgment." And Jampol proudly declares: "I'm one of the most experienced guys you'll probably ever meet." But what sets his business apart from every other management firm in town is its foundation on "spiritual principles," such as honesty, faith, commitment, courage, willingness, perseverance and, Jampol's favorite, service. "As an addict, I was completely dishonest and self-centered and manipulative," he says. "I took so much out of the world and people that when I got this gift of recovery, it was really important to me to give back."

Many other high-profile people in the industry were happy to talk about Jampol's service work — off the record. They stay sober by regularly attending 12-step recovery meetings, where community anonymity is the only price of admission. Jampol even hosts weekly meetings at his home in the Hollywood Hills, which is a short drive from his HQ on Sunset Boulevard. Flashy symbols of success adorn his office: the Grammy he won for producing a documentary on the Doors (along with the Diamond award for the band's greatest hits album, which sold more than 10 million copies); a multiplatinum plaque for Joplin's "Pearl"; a Robert Graham bust of Charlie Parker, yet another client.

Jampol is known to walk out of meetings whenever an addict in crisis calls, which can be a daily, sometimes hourly, occurrence, say colleagues. Explains Jampol: "I can be with a label chairman or a publishing company president, and I'll get a call or a text — somebody in recovery who needs help — and I'll interrupt to take that call." Often the person on the other end of the line is a stranger. "I've put many people in treatment and not even met them until later when they have a year or two clean," he says. Jampol estimates that he has also made "hundreds and hundreds" of house calls for personal intervention over the years.

When it comes to advising addicts on how to get clean, what Jampol brings to the table is expertise through experience. "What usually happens in these cases is the whole team knowingly or unknowingly is enabling the addict," he says. "I can do something that no therapist or doctor or judge can do, which is just one addict helping another — that beautiful principle of empathy. I can sit with the hardest of the hardcore addicts and literally in four to six minutes I can gain their confidence.

"Because," he says, "I'm them."

"Worry never robs tomorrow of its sorrow, it only saps today of its strength." A.J. Cronin

"Adulthood is an attempt to become the antithesis of the wounded child within us." Stewart Stafford

4] [A Letter to Niyyah: Trauma Under the Bridge](#) – YouTube 9:54 minutes

A short documentary film about Sharon Wise's remarkable story of overcoming addiction and homelessness, working through her mental health challenges, reuniting with her children and becoming

an advocate and an inspiration.

4a] [One Woman's Rise From Living Under a Bridge, To A Radiant Life Filled With Renewal And Hope](#)

[OC87 Recovery Diaries](#), a website dedicated to bringing awareness about mental health through storytelling has released a new short documentary entitled "[A Letter To Niyyah: Trauma Under the Bridge](#)". Sharon Wise's remarkable story of overcoming addiction and homelessness, working through her mental health challenges, reuniting with her children and becoming an advocate and an inspiration.

Glenn Holsten, an award-winning filmmaker, whose career is dedicated to producing short and feature-length films about mental illness, has teamed up with Sharon Wise, a mental health advocate, peer facilitator, author, playwright, and artist for his latest, moving project.

In "[A Letter To Niyyah: Trauma Under The Bridge](#)", Sharon, first diagnosed with a mental illness at age nine and hospitalized in over thirty psychiatric facilities, takes us to a place where she spent her youth, under an urban highway overpass. While recounting her story, she recites the letters she wrote to her daughter, Niyyah, whom she surrendered years ago, unable to care for Niyyah and her brother.

The letters to Niyyah provide the narrative for this tremendously sad yet remarkably hopeful film. They chronicle Sharon's lowest points of despair and most optimistic days of possibilities.

Today, Sharon has emerged from life under that bridge a confident, life-affirming woman. She uses her traumatic experiences to teach and train peers, government officials and others about Trauma-Informed Care and substance abuse prevention.

Through this film, and others like it, OC87 Recovery Diaries seeks to bust stigma and educate people about mental health through creative storytelling.

"Watching "[A Letter To Niyyah: Trauma Under the Bridge](#)" is chilling because, with a slight change of circumstances, Sharon's story could be any of ours. We are incredibly humbled by Sharon's journey and her dedication to helping others. It is people like Sharon who make a difference in how our country cares for, and looks upon, those vulnerable and misunderstood because of their mental illness," said Gabriel Nathan, Editor in Chief of OC87 Recovery Diaries

ABOUT OC87 Recovery Diaries mission is to bust stigma surrounding mental illness. The website aims to touch as many lives as possible and shed light on the lived experiences of recovery from a mental illness: what matters, what helps, what hurts, and what might be next?

Original content is developed by the OC87 Recovery Diaries production team. In addition, the site commissions stories about mental health recovery journeys from those who have lived experiences and a story to tell.

"One who gains strength by overcoming obstacles possesses the only strength which can overcome adversity." Albert Schweitzer

"Today's Reminder - What prompts me to do or say things that cause trouble? Why do I concentrate on

someone else's shortcomings instead of my own? To such questions I can find the answers – if I dig deeply and honestly enough.” Al-Anon

5] [Building a Life Worth Living by Marsha M. Linehan](#): Penguin Random House Books

Marsha Linehan tells the story of her journey from suicidal teenager to world-renowned developer of the life-saving behavioral therapy DBT, using her own struggle to develop life skills for others.

“This book is a victory on both sides of the page.” Gloria Steinem

“Are you one of us?” a patient once asked Marsha Linehan, the world-renowned psychologist who developed Dialectical Behavior Therapy. “Because if you were, it would give all of us so much hope.”

Over the years, DBT had saved the lives of countless people fighting depression and suicidal thoughts, but Linehan had never revealed that her pioneering work was inspired by her own desperate struggles as a young woman. Only when she received this question did she finally decide to tell her story.

In this remarkable and inspiring memoir, Linehan describes how, when she was eighteen years old, she began an abrupt downward spiral from popular teenager to suicidal young woman. After several miserable years in a psychiatric institute, Linehan made a vow that if she could get out of emotional hell, she would try to find a way to help others get out of hell too, and to build a life worth living. She went on to put herself through night school and college, living at the YWCA and often scraping together spare change to buy food. She went on to get her PhD in psychology, specializing in behavior therapy. In the 1980s, she achieved a breakthrough when she developed Dialectical Behavioral Therapy, a therapeutic approach that combines acceptance of the self and ways to change. Linehan included mindfulness as a key component in therapy treatment, along with original and specific life-skill techniques. She says, ***“You can’t think yourself into new ways of acting; you can only act yourself into new ways of thinking.”***

Throughout her extraordinary scientific career, Marsha Linehan remained a woman of deep spirituality. Her powerful and moving story is one of faith and perseverance. Linehan shows, in *Building a Life Worth Living*, how the principles of DBT really work—and how, using her life skills and techniques, people can build lives worth living.

[Free Listening on SoundCloud - Building a Life Worth Living by Marsha M. Linehan, read by Hillary Huber, Stephen Mendel](#) by PRH Audio 5:04 minutes

[Book excerpt at the website also](#)

Marsha M. Linehan, PhD, ABPP, is the developer of Dialectical Behavior Therapy and a professor of psychology, adjunct professor of psychiatry and behavioral sciences, and director of the Behavioral Research and Therapy Clinics at the University of Washington. Her primary research interest is in the development and evaluation of evidence-based treatments for populations with high suicide risk and multiple severe mental disorders. Dr. Linehan’s contributions to suicide research and clinical psychology research have been recognized with numerous awards, including the Gold Medal Award for Life Achievement in the Application of Psychology from the American Psychological Foundation, the Scientific Research Award from the National Alliance on Mental Illness, the Career/Lifetime

Achievement award from the Association for Behavioral and Cognitive Therapies, and the Grawemeyer Award for Psychology. In 2018, Dr. Linehan was featured in a special issue of Time magazine, “Great Scientists: The Geniuses and Visionaries Who Transformed Our World.”

“Abuse is never deserved, it is an exploitation of innocence.” Lorraine Nilon

“When you can identify the insecurities inside the person that is hurting you then you can begin to heal. It isn’t about you. It is about their past.” Shannon L. Alder

6] [Self-Esteem Growth: Stay True to Your Roots, Not Your Leaves](#) By Vicki Botnick, MA, MS, MFTI, @ [Good Therapy](#)

If I asked whether you spend most of your day feeling cool and confident, you’d probably laugh at me, right? We’re all constantly working on knowing who we are and feeling OK about ourselves. And too much of the time we’re looking for this feedback from the outside-other people, accomplishments, a number on the scale-instead of looking inside ourselves.

There’s a metaphor I love to describe this phenomenon. I liken people to beautiful, old oak trees. Our trunk is where our strength and sense of self is. It’s literally grounded, connected to the earth through a network of roots, and it’s solid, hefty, and multilayered. Up higher are the branches, and at their ends lay the leaves, constantly blown around by wind or rain. If we think of other people’s opinions (or traffic, or problems at work, or financial worries, etc.) as the weather, and our sense of self as the leaves, we can see how quickly and often we get battered.

When we “live” up in our leaves, we feel that we’re easily swayed or, worse, hammered by outside influences. If we can work on “living” in our trunks, we feel solid, unable to be knocked down. So how do we get out of our leaves? First, we recognize what we’re doing. For instance, if you’re feeling a lot of anxiety and depression, this could be a clue that you’re worried about how other people see you. Anxiety commonly carries a message of “I have to be perfect or other people will feel let down.” Depression often sounds like “I’m not good enough.” Both of those statements, and the hundreds of other, similar ways we beat up on ourselves, lose track of how we feel about ourselves, and instead are all about the way we think we come across to others.

When you recognize that you’re being hard on yourself because you’re worried how others will perceive you, label that: I’m doing it again-I’m in my leaves. Then turn your attention to your trunk.

Your idea of your trunk will take some time to develop, but it can be a fun project. First, come up with an image. You can look online for a lovely photograph of a tree, remember one you grew up with, or create your own fantasy picture. Next, think about the qualities that make you unique, and that you feel good about. Your values, strengths, and dreams are a good place to start. By making lists and spending some time considering these characteristics, you may come up with a stronger sense of who you really are and what you like about yourself.

Values are how we decide what’s important to spend our time on, and if our lives fill us with a sense of purpose. If we’re not clear on where our values lie, that can make us feel lonely, alienated, or confused, and open us up more to being manipulated. Thinking about your values can get you in touch with your

spiritual beliefs, lessons from relatives or mentors you admired, or books or movies you've felt inspired by. You can use a worksheet, such as this one, to calculate how you prioritize aspects of life.

Listing strengths can be really challenging for people battling low self-esteem. If you're one of them, this exercise may take some time. You can use an online tool like the ones at the [Institute on Character](#), or you can just sit and try to list 15 things you like about yourself. Fifteen is an important number. Many people can list five pretty easily, and then can strain to come up with 10. Fifteen takes thought, creativity, and commitment, and the mere act of investing the time often makes people feel better. If you truly can't finish the list, ask relatives, friends, or coworkers to help.

Finally, look into your dreams. What did you want to be when you were a kid? Was there anything you felt passionate about as a young adult? For many of us, we tend to be our most idealistic in our teens and twenties. We find causes or have goals that are lofty and principled. By looking at those, or remembering them, we can get in touch with what fires us up and makes us feel committed—and passion and commitment are two of the most important qualities shared by happy people, according to the field of positive psychology.

By turning our attention from our leaves (the outside judgments of other people, the annoyances of daily life) to our trunk (the inside assets and standards we appreciate about ourselves), we can worry less about what other people think of us and concentrate more clearly on who we know ourselves to be. Which is the very definition of self-esteem.

“Changing is not just changing the things outside of us. First of all we need the right view that transcends all notions including of being and non-being, creator and creature, mind and spirit. That kind of insight is crucial for transformation and healing.” Thich Nhat Hanh

“The friend who can be silent with us in a moment of despair or confusion, who can stay with us in an hour of grief and bereavement, who can tolerate not knowing... not healing, not curing... that is a friend who cares.” Henri Nouwen

7] [Brushes with the law: how teaching art to women in prison changed their outlook](#) by [Joanna Moorhead](#) @ [The Guardian](#)

“It's too simplistic to see women in prison as bad and us as good.” Mim Skinner

Mim Skinner spent two years teaching prisoners. Now she's written a book, *Jailbirds*, to change our view of incarcerated women – and how we can support them on the outside.

If Britain was hit by an apocalypse, Mim Skinner knows the people who would make it through. “The prisoners I've worked with are the most flexible, the most adaptable, the most inventive and the most entrepreneurial individuals it's possible to imagine,” she says. “They're survivors – they'd be the last ones standing. There's a misconception out there that prisoners are defeated characters. Well, not in my experience.”

For Skinner, this is one of many truths about prison life she's keen to share because, she says, people are locked up in the name of all of us, but most of us don't have the faintest idea about what goes on behind the high walls and barbed wire fences. She spent two years as an art teacher inside a top-

security women's prison ("I can't say which one, but there only is one of them...") and the shock of what she discovered inside was matched by her shock of how little people knew from the outside. She's now on a mission to change that. Her book *Jailbirds* is published next week and is now being developed as a BBC series. No surprises there, really: some of the most successful TV series ever made were set in women's prisons – *Prisoner*, *Cell Block H*, *Orange is the New Black*, *Wentworth* – and Skinner's book is full of nitty-gritty details of life inside, and peppered with stories (some tragic, some funny, some poignant, all real) of the women who make up Britain's female prison population.

They are not many in number – only 5% of the UK's prison population is female – and the main point Skinner wants to make, when we meet for lunch in Chester-le-Street near Durham where she's based, is that these women are every bit as sinned against as sinning. Most of them, she says, have been the victims of crimes more serious than the crimes they've perpetrated. More than half have experienced emotional, physical or sexual abuse during childhood; around the same number have committed an offence in order to support the drug use of someone else (often, a partner; sometimes, an abusive partner). The vast majority (84%) are there for non-violent crimes, and seven in 10 are incarcerated for six months or less. "Enough to lose a tenancy, have children taken into care, but not long enough to make significant progress around rehabilitation," Skinner points out.

She admits the thing she found hardest was keeping an emotional distance – "I was just useless at it, actually" – and what she most wants to do is get others to see prisoners as she saw them, and to truly care. "I want to take people inside with me," she says. "I want them to find out a bit about daily life behind the walls, and I want them to get to know some of the bravest people I've ever met."

Being inside a prison, she says, is like being in a foreign country where people speak a different language; her book has glossaries. "Pad" means cell; a "pad-spin" is a cell search. The "bully book" is where staff write comments about prisoners' challenging behaviour. Products have quite different uses from the way they're used on the outside: sanitary towels are used as draught excluders and insoles, tampons become make-up brushes. Coffee whitener dabbed with water becomes glue, and Buscopan, a muscle relaxant prescribed for irritable bowel syndrome, becomes a smoke which gives you a "gouch", or consoling downer. ("My uni friends who are doctors were really amazed at that one – they're like, 'They *smoke* Buscopan...'"")

It's the system, and not the staff, that Skinner wants to put in the dock. She has, she says, the highest regard for prison officers. "It's hard work, demanding work, it's not well-paid, and they give a lot of themselves. I remember one woman saying she'd been in the grip of psychosis and an officer stayed with her holding her hand, right through the night; the woman said that was what had got her through. Prison officers aren't people who don't care, they're people who often care a lot. When I first went into prison to teach art I thought we were the pastoral people and the staff were there to lock them up and make life difficult for them. I was wrong."

But if society typecasts prison officers, it does the same only magnified to prisoners. "Of course there is always choice, and I accept that, but it's much too simplistic to think of women who are in prison as 'bad' and the rest of us as 'good'." Women in prison have had the odds stacked against them from day one, from before day one: women like Ellie (all the prisoners have pseudonyms in the book) who told Skinner she'd woken up several times at a party and known someone had had sex with her, but had no idea who. When Skinner said that was rape, Ellie replied it was her own fault, and that was what her

foster carer always told her: “If you keep putting yourself in these situations then you’ve only got yourself to blame.”

Women like Vivian, who grew up with a voice in her head that told her she was worthless. “My dad was violent and we grew up in and out of refuges,” she writes, in one of the “guest chapters” in Skinner’s book. “And now my partner is violent. He calls me a fat slag every day. After a while you believe it, don’t you? I want it all to change, but I don’t feel good enough to be around decent people sometimes... Well, all the time really.”

Skinner’s art classes gave the women space to think about, and in time articulate, some truths and realities about their lives, often for the first time. “They weren’t conventional art classes, although we did plenty of art and craft projects. The classes counted as a woman’s job inside, and the women who were sent along tended to be the ones who’d been sacked from other jobs for swearing too much or for being late. And we did have a lot of challenging women – some of them would be using drugs before and after the classes, others would be silent, withdrawn, refusing to engage.”

But the art room was a kind of haven in the prison and most women realised they were in a “safe space” where feeling could be shared, and experiences unpacked. “I’d say to them, what’s going on for you? If you can’t talk about it you might like to write it down, or draw it. And later they’d say, no one has ever asked me that before. They said they felt as though someone was interested in them for the first time in their life. We had one woman who talked in the group about an abusive partner, and by the end of the classes she said she had written to him to say she wouldn’t be going back to him when she was released: sharing her story had helped her to see it in a different way, and to find the strength to move on.”

The art classes were all about helping women who had been crushed by life begin to find some confidence and resilience; in time, they would be moved on to work in other areas of the prison again.

Surprisingly, there were no prison officers present during the sessions. Skinner is tiny and quietly spoken, but occasionally you get a glimpse of her steel, and in the book she relates how she sometimes had to lay down the law and get out the bully book.

She grew up in a middle-class family in Surrey: it was moving to Durham to study philosophy and politics that brought her close to disadvantage, and she made some radical choices around that.

“After graduation I was living with some other ex-students and we decided to double up and share bunk beds to free up rooms for homeless people,” she says. “We started out as [Night Stop](#) hosts, offering temporary accommodation to people who needed it, but in time homeless people moved in long-term.” Her parents, who both died recently, role-modelled taking direct action: “They always invited people in, were always welcoming and gave them a seat at our table.”

Working with homeless people brought her into contact with the criminal justice system, because so many vulnerable women ricochet between prison and the street. For some women, prison is preferable, especially when being on the street means being vulnerable to abusive men. Skinner tells the story of Catherine, who goes on a shoplifting spree in the hope of being returned as quickly as possible to the safety of her pad – only to have her hopes dashed.

“I’ve been walking out [of shops] with bigger and bigger things I don’t even want. Walking past the security guard, looking them in the eye. But they’re just not noticing me,” she explained to Skinner.

Another woman had camped in a bus shelter outside the prison gate on release, simply because she had nowhere else to go. “I think the fact that prisoners aren’t housed when they leave is the most shocking thing for people who have little knowledge of the prison system,” says Skinner. “My friends assumed there would be support post-prison, as well as therapeutic work and counselling when they’re inside. And there is some of that, but a lot less than you’d hope or imagine.”

Although she no longer spends time inside a prison, Skinner’s work today is every bit as tuned to women and the criminal justice system: she’s helping to run a café and pay-what-you-can supermarket called [REfUSE](#) in Chester-le-Street, with food donated that would have been binned as surplus to requirements. Providing jobs for ex-prisoners is a big part of her work, she explains. “In many ways this is where it really matters. I’ve come to realise there’s a much greater need for through-the-gate support than support inside, because what happens next is crucial. The biggest gap is when women are released, and what happens to them after that.”

Jailbirds: Lessons from a Women's Prison by Mim Skinner

“Trying to suppress or eradicate symptoms on the physical level can be extremely important, but there’s more to healing than that; dealing with psychological, emotional and spiritual issues involved in treating sickness is equally important.” Marianne Williamson

“It’s when we start working together that the real healing takes place... it’s when we start spilling our sweat, and not our blood.” David Hume

8] [Ronan Farrow's Brief But Spectacular take on interrogating the truth](#) PBS – You Tube 4:29 minutes

For investigative reporter Ronan Farrow, the ability to produce a story hinges upon the courage of his interview subjects. But the chance an abuse survivor has to exact justice is tied to the wealth and stature of those they accuse, and we need the transparency and accountability journalism demands to expose this imbalance. Farrow shares his Brief But Spectacular take on interrogating the truth.

“A day wasted on others is not wasted on one’s self.” Charles Dickens

“Kindness in words creates confidence. Kindness in thinking creates profoundness. Kindness in giving creates love.” Lao Tzu

9] Childhood Trauma Can Manifest As....Unknown

The overachiever that is super ambitious & always accomplishing it all but can never acknowledge their process.

The people pleaser that says yes to everything in fear of making others upset.

The strong one that doesn't cry or express emotion and keeps their problems to themselves.

The perfect child who sets extreme standards for their physical body and outward appearance in order to keep up a mask.

The caretaker who sets out to 'help' everyone around them, but ends up self abandoning.

"You can't expect to be old and wise if you were never young and crazy!" Unknown

"In this delicate and potentially precarious process, compassion is essential. Before we generate compassion for anyone else, however, we must learn to cultivate self-compassion." Unknown

10] [How Treating People With Brain Injuries Helped Me Forgive My Mother](#) by Shelby Vittek

After a lifetime of resentment, working with other T.B.I. patients finally helped me understand the riddle that is my mother's mind.

I sat across the table from my client Matt, watching as he clicked away on his Kindle keyboard, presumably searching through his notes for clues as to what we had discussed during our session a week prior. "Ah, yes, found them," he said a minute later. "It says here we planned a studying schedule for my physics final."

"Did you follow the study plan we worked on?" I asked.

He paused, waiting for a cue. "I have no idea," he said after realizing I wouldn't be filling in the gap for him. "Let me search my notes."

A minute passed as he searched his Kindle again, and then another while he scrolled through the emails and calendar on his phone. "I did not record any studying in the last week," he said. "So according to my notes, I did not."

"O.K.," I said, recording his answer in my own notebook. "How did you feel after taking the exam?" I observed his eyes scanning the wall behind me, his face wearing the recognizable look of someone who is trying to grasp those just-out-of-reach answers.

"I have no idea," he said and let out a sigh. "I don't remember taking it at all."

A year earlier, while out for a jog in his Philadelphia neighborhood, Matt (whose name has been changed to protect patient confidentiality, as have the names of other patients mentioned) had been hit by a car. His physical injuries were minor – a few broken bones and small scrapes – but a few days into his recovery, it became evident he had sustained a more serious injury. Every time he'd fall asleep and wake up again in the hospital, he'd ask where he was and how he got there.

Matt had sustained a traumatic brain injury, or T.B.I. His memories from before the accident were accessible, but he struggled to retain new ones, like what he ate for lunch yesterday, or the names of any new people he met, or how confident he felt about a test he'd taken last week.

This was not uncommon among patients recovering from a T.B.I., I was learning. I was a junior in college, and had recently started a new job as a brain injury therapist intern, working in a community re-entry program at an outpatient brain injury rehabilitation center in North Philadelphia.

A semester earlier, I had learned about traumatic brain injuries in a physiological psychology class I took at Drexel University, where I was majoring in psychology and on the pre-med track. This is when I first discovered my fascination with the human brain's structures, and how physical damage to those structures can affect a person's perceptions and behaviors.

It was also the first opportunity I had to think critically about my own mother's brain, and the traumas it has endured throughout her life. I remember poring over different case studies, searching for any recognizable symptoms that might be associated with the parts of her brain that had been damaged, anything that would help me understand my mother better.

Long before I was born, when my mother was 17, she collapsed in her high school's hallway after suffering a massive aneurysm when a tangle of blood vessels burst in her right frontal lobe, bleeding into her brain.

She doesn't remember anything between hearing her classmates say she shouldn't be drinking at school just before passing out and coming to two weeks later in the hospital. Though she'd been conscious the whole time to answer questions the hospital staff had asked, the nurses and doctors startled her when she gained awareness again. She had no memory of them.

My mother was lucky that she didn't have to relearn how to walk or talk. Though, like some of my clients at the brain injury center, she did experience some short-term memory loss – like not remembering whether she had taken her medicine that morning, or repeating the same story or question over and over again.

Of course, my mother would sometimes come to mind at the brain injury center, though I tried to stay focused on the same mundane tasks interns in all kinds of offices are given: filing, organizing, and ordering lunches. I also got to shadow other brain injury therapists and, eventually, was allowed to work one-on-one with clients like Matt in hour-long sessions. It was a rare opportunity for someone who didn't yet have an undergraduate degree.

Our collective duty at the center was to help patients who had experienced brain injuries re-learn skills necessary in their daily lives, such as cleaning and cooking, organizing a shopping list, training for a new job, or managing personal finances. Our job was to help people rebuild their lives, one step at a time.

A few years before I started the internship, during the summer before my senior year of high school, my mother had abandoned us. After marrying a man she'd met on eHarmony, she packed up and left me and my 15-year-old sister, Lindsay alone in our house – without any prior discussion or warning. Her new husband's home was closer to where she worked, in a town a little more than 20 miles away, though she didn't check in on us often. Our father, who lived 500 miles away, was oblivious to the situation the entire time. We were too afraid he'd make us move in with him, and so we kept it all a secret.

At the age of 17 – the same age my mother was when she experienced her brain aneurysm – I stepped up into the parent role. I worked as a manager at a nearby grocery store, where I'd shop for our groceries. I was the one who made sure Lindsay finished her homework as I drove us to school each morning, and forged our mother's signature on any school forms that required it. I took us to the doctor when we got sick. With each day that passed, I collected more resentment toward my mother. She didn't understand how cumbersome it was for us to navigate daily tasks without her, how painful it was to not have our mom around. She couldn't seem to grasp that we still needed her, and I was too stubborn to admit I wanted her to come home.

I managed to get myself into college, where I majored in psychology – not for any particular reason, though looking back on it now, I can't help but see it as the first step of my attempt to understand my mother.

Two years later, I helped Lindsay do the same. She joined me in Philadelphia, where she started coursework in advertising at a nearby college, and we attempted to rebuild our lives. We could look ahead to the future, and were finally allowed to imagine what might be possible for us, and for our careers. But we were both still living in the fallout of our mother's abandonment. We were stuck in survival mode, lost and craving guidance, in need of someone to help us see that our goals were, in fact, reachable.

Feeling distant from my mother was not a new experience for me. Throughout my childhood and adolescent years, I'd often felt as if there was a wall between us. I vividly remember coming to her when I was 12 or 13, frustrated about something – maybe I was annoyed with my sister, or had just had an argument with a friend, or even likelier, was upset because of a boy. My mother was lying on the couch reading a book as I stormed into the living room with tears running down my face.

She looked up from her book and laughed in reaction to my despair, offering only one of her frequent refrains of “oh, it's not a big deal” or “life isn't fair” as comfort. Being dismissive of my emotions and concerns was typical for my mother, as was her cold affect, and I never got used to it. The emotional rejection hurt each time.

In the developmental psychology class I took during my sophomore year at Drexel, I learned about attachment theory, how crucial it is for a baby's development to bond with their mother after birth, and how important it is for their emotional development that they feel safe in her arms. As I sat in that lecture hall, scribbling down notes from our professor's slides, my thoughts returned to my mother. I'd been told I was a difficult newborn with bad colic, and knew my mother had gone back to work when I was only a couple of months old – two things that explained our lack of connection, or so I wanted to believe.

I raised my hand, eager to find out whether it was ever too late to start forming that bond. By the time my professor called on me, I was too ashamed to ask.

At the brain injury rehab, I'd sometimes suggest the patients and I play a card game like War, Solitaire, or Kings, which proved useful as a way to see how long they were able to maintain focus, noting what they could or couldn't remember about how to play. To test a client's spatial awareness, I might ask them to assemble blocks into a certain shape, like a tower. To test their organizational abilities, I might hand a client a stack of postcards marked with different zip codes and ask them to sort them.

I'd frequently act out mock scenarios with clients, like when I assisted Laurie, a single mother of four, with planning a meal from start to finish. We met in the quiet back room that had a computer. "What recipe would you like to make for dinner?" I asked.

"Something simple," said Laurie. "I get lost if there's too many steps."

"O.K., simple is good. We can also print out the recipe for you to follow step by step at home," I reminded her, and then walked her through using Google to search for possible recipes. Once she had decided on one, we worked on writing out a shopping list.

Over the course of the next few weeks, I helped Laurie work through all the steps involved in booking a vacation, from budgeting expenses to looking up flights and hotels. We discussed what to do if she got a call from the school nurse and one of her children was sick, and typed up a list of tips in her phone's Notes application for her to reference in the future. When she entered the job-training phase of her treatment, we talked about how she might explain her brain injury to her new coworkers, and if she was even required to do so. She was training for an office job, so we practiced tasks like sorting and filing folders, making copies, and alphabetizing names in a Rolodex.

Some patients grew frustrated easily and gave up. Others, like Matt and Laurie, were motivated to finish the task at hand, but sometimes seemed confused about how to do so. It was my job to help encourage them, providing cues when necessary, repeating steps and reinforcing rules – all a great lesson in patience, a trait my mother had always reminded me I didn't have.

When I started the internship, my new supervisor explained that some of the most common behavioral and emotional problems people with a T.B.I. can experience include verbal or physical outbursts, poor judgment and disinhibition, impulsive behavior, egocentricity, and a lack of empathy.

"You might feel shocked the first few times you experience an inappropriate behavior," she warned. "You'll get used to it."

But there wasn't much "getting used to it" that I had to do. I had been raised by a woman who lacked inhibition, a woman who said what she felt and thought at all times, unaware of how it might make another person feel, including her children. I had survived her biggest impulsive act. I was more prepared for the job than I ever should have been.

When I had to fend off aggressive or inappropriate comments, or correct a client's inappropriate behavior – like when one wanted to know if I was dating my male colleague (I was not) – I'd remind myself they didn't know any better. Their brains had experienced trauma, and now they were moving through the world differently. They needed to relearn and regain different skills, which required time, patience, and guidance.

One afternoon I was walking through the hospital with Jeremy, a client who was volunteering in the maintenance department as part of his job-training program. As he pushed his cart beside me, he tried to fill the quiet hallways with conversation.

"So, when we gonna hang out?" he said. "You're pretty hot, you know."

My initial reaction was shock and embarrassment, and if I wasn't supposed to be the professional one in the situation I might have turned around and run down the hallway. I managed to stumble out a response.

"That's inappropriate and unprofessional, Jeremy," I said. "You don't speak to people you work with like that."

"O.K., O.K.," he said with his head down, embarrassed. "Got it."

Once my knee-jerk shock reaction subsided, I felt something else for Jeremy. As I was teaching him how to interact in the world again after his injury, he was teaching me a lesson in empathy. And maybe, if I could learn to understand and feel compassion for what Jeremy was experiencing, I could learn to feel empathy for my mother, too.

In the end, the internship didn't lead me anywhere career-wise. I never made it to medical school, but the experience did unlock my ability to re-think and write about my life – and helped salvage my relationship with my mother.

It's taken years, but I'm finally beginning to understand and appreciate that she's a complex person, like all of us are. I now see she's not only someone who has caused trauma for me, but also a person who has endured and survived trauma herself. Like some of my impulsive clients, my mother's frontal lobe had been damaged as a result of her brain trauma, an injury that likely impaired her judgment and ability to perceive other's emotions. Maybe she couldn't be blamed for her character flaws.

Sometimes I worry I'm just trying to impose a narrative on something that's unexplainable, but knowing it might not have entirely been her fault has helped me forgive her, bit by bit, and we're finally working to build the bond I've always felt was missing.

A few months ago, I went to visit my mother in the Poconos where she and her husband now live. We went out for dinner, just the two of us, and I ordered a bottle of red wine for us to share. I'd been reading a significant book about trauma called *The Body Keeps the Score*, I told her, and had lately been thinking a lot about how trauma is something we have in common.

"Yours might be physical, and mine emotional," I said, "but they're both considered trauma."

I watched as she sipped her glass of wine. She nodded with a little smile of recognition. "And we both survived," she said. "We share that, too."

It wasn't the warm, motherly embrace I've always dreamed of, but after years of working to be able to see my mother, I was finally able to feel seen by her.

They say the human brain is a mystery, an unknowable enigma, and for so much of my life my mother has been exactly that: a riddle I've never been able to solve. But the brain is resilient, too, with the ability to repair damaged cells and grow new neurons, capable of creating connections where there used to be none.

[Shelby Vittek is a writer and editor](#) based in New Jersey. Her work has appeared in Longreads, Catapult, the Washington Post, Wine Enthusiast, Bon Appétit, National Geographic, The Kitchn, and The Smart Set, among others. She is currently the associate editor for New Jersey Monthly.

"Today I pray for the wisdom to build a better tomorrow on the mistakes and experiences of yesterday." Thomas à Kempis

"Character cannot be developed in ease and quiet. Only through experience of trial and suffering can the soul be strengthened, ambition inspired, and success achieved." Helen Keller

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

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](#)

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

[@SurvivinSpirit](#) Twitter

[Michael Skinner Music](#) - Hope, Healing, & Help for Trauma, Abuse & Mental Health - Music, Resources, & Advocacy

Live performance of "Joy", "Brush Away Your Tears" & more @ [Michael Skinner – You Tube](#)

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