



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 May 2020

Hi Folks,

Hoping all is well for you in your world during these trying times...no complaints here.

Well, maybe one, what happened to the weather here in New Hampshire land? My heat has been running in MAY!! Yikes...flannel sheets and temperatures down to the 30's and 40's at night...again, in May??? Oh well. Maybe spring will arrive in July.

Without further adieu, on to the resources of folks doing the right thing, to help heal the world.

Take care, stay safe and best of health, Michael

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“Don't let one cloud obliterate the whole sky.” - Anais Nin

1] [Compassion at the Mirror](#) - Psychology Today by Dr. Tara Well

[Dr. Tara Well](#) is an associate professor of psychology at Barnard College of Columbia University where she developed the mirror-based meditation called “a revelation” in the New York Times.

“Having compassion for our own distress has been found to strengthen our ability to refocus and consciously activate self-regulation systems that create feelings of safety as opposed to feelings of threat and distress.” - Tara Well

You’re standing in front of the bathroom mirror saying “I love you,” “Today is a new beginning,” or “You’re gonna rock this interview.” We’ve all done it. When we look in the mirror, we can choose to offer ourselves criticism or reassurance and kindness. The obvious choice is love. But does it really work?

Repeating positive affirmations in front of a mirror as a way to increase self-acceptance has been extensively described and recommended for years in numerous psychology books, websites, and [self-help](#) resources, most notably Louise Hay’s *Mirror Work*, but its effectiveness has not been empirically tested - until recently.

Self-compassion practices now play a central role in the growing fields of [mindfulness](#) and [meditation](#). Therapeutic approaches, such as Compassion Focused [Therapy](#) (Gilbert, 2014) and Mindful Self-Compassion training (Neff & Germer, 2013), have been developed with the aim of increasing self-compassion as an antidote to self-criticism. One of the practices is compassionate [self-talk](#), in which people are asked to become aware of the content and emotional tone of their internal dialogue when they face setbacks, and then to intentionally make their self-talk more compassionate, encouraging, and non-judgmentally accepting. Creating compassionate self-statements after self-criticism has been found to increase positive feelings, without undermining people’s willingness to accept responsibility for the negative actions (Leary, Tate, Adams, Allen, & Hancock, 2007). Generating and reading aloud positive self-statements, instead of neutral ones, has been shown to reduce self-deprecatory thoughts and increase [self-esteem](#) in a group of low self-esteem subjects (Lange, Richard, Gest, Vries, & Lodder, 1998).

Having compassion for our own distress has been found to strengthen our ability to refocus and consciously activate [self-regulation](#) systems that create feelings of safety as opposed to feelings of threat and distress. These self-soothing activities operate through the stimulation of particular types of positive emotion like contentment, safeness, and lovability that are associated with our innate motivations for caring and [attachment](#).

In research, feeling safe is measured by increased heart rate variability (HRV), which reflects the dynamic balancing of the sympathetic and parasympathetic nervous systems, and is linked to the regulation of the fight/flight response. Higher HRV is associated with a greater ability to self-soothe when [stressed](#), and greater capacity to act compassionately toward others by facilitating engagement with the suffering (in ourselves and others), while inhibiting the distress-related tendencies to fight with or withdraw from suffering. Interestingly, research finds that that increased HRV is specifically connected to the emotional state of compassion and not to positive emotions in general (Stellar, Cohen, Oveis, & Keltner, 2015),

Can the mirror amplify the effects of compassionate self-talk? - The capacity of mirrors to induce a state of self-focused [attention](#) has made them useful tools for studying self-awareness and self-focusing. But research on the general effects of mirror exposure has found mixed results. In teaching

people to use mirrors as a meditation tool, I am struck by how *unkind* people can be to themselves when they first look in the mirror. The mirror tends to magnify our internal state, and looking at yourself without a clear intention often evokes self-critical inner dialogue as a default. Can a mirror be useful as a therapeutic conduit for compassionate self-talk?

Nicola Petrocchi and colleagues (2017) set out to answer that question. They conducted a study to test whether a mirror could enhance the efficacy of compassionate self-talk. The research participants were asked to generate four phrases they would use to soothe and encourage their best friend. Then they were asked describe an episode in which they criticized themselves and were assigned to one of three conditions: (1) to repeat the four phrases to themselves while looking at the mirror; or (2) repeat the four phrases to themselves without the mirror; or (3) look at themselves in the mirror without repeating the phrases.

Here are some examples of compassion phrases:

- *The parts of yourself that you don't like are parts of you that need your attention and love.*
- *You've been strong in the past, and you will be able to find your strength now too.*
- *I'm here and I will be here forever; I'll always try to help you in any way possible.*
- *Think about all the positive things that you did and will do.*

The results of the study showed that participants who said the phrases in the mirror reported higher levels of soothing positive emotions. They also had more heart rate variability (HRV) compared to participants in the other two conditions. So it appears the mirror does boost the soothing effects of compassionate self-talk.

Why does the mirror amplify compassionate self-talk? - Compassion involves our hardwired self-regulation system that enables us to approach suffering instead of fighting or fleeing – that is, we orient outside of ourselves to see suffering and are then moved to act to alleviate it. So compassionate self-talk might be amplified by the use of a mirror as a way to externalize the object of our compassion (i.e. the self). The mirror might also magnify the effects of positive self-talk because eye-gaze and facial expressions are salient components of our [empathic](#) responses (Cowan, Vanman, & Nielsen, 2014). Considering that self-related stimuli (e.g. our own face) are more relevant to us than stimuli related to others, and that our sense of self seems to be inherently linked to our own face, looking at our own eyes and face while experiencing compassion towards ourselves seems to impact our psychophysiology more than just verbalizing self-compassionate phrases.

Try it for yourself - Make a list of positive, soothing, compassionate phrases or sentences that you would say to comfort a beloved friend, or those phrases and sentences that you'd most like to hear when you're feeling upset or down. Have them handy and say them to yourself in the mirror when you need a boost in self-compassion. Then try saying these phrases to a loved one while looking into her or his eyes when the person needs some calming and reassurance.

And consider this: Before you begin your compassionate self-talk in the mirror, simply notice the general emotional tone that your reflection evokes in you as you look at yourself. And see if you can have compassion for your lack of compassion.

Learn more self-compassion mirror exercises [here](#). Copyright 2019, Tara Well, PhD

1a] [TEDx Talks -What Mirror Meditation Can Teach You](#) by Tara Well - YouTube 11:11 minutes

1b] Also, [Author of The Clarity](#) - From focus to deep engagement

Today's reminder – Today I will try to view every conflict as an opportunity to heal. I will honor myself by responding with courtesy. - Courage to Change

“The highest form of wisdom is kindness.” The Talmud

2] [Peer Support Approaches for Responding to Fear](#) by Martha Barbone, Interim Director of Operations National Association of Peer Supporters, Inc (iNAPS)

Many in our community may be feeling extra stress with all of the talk about the Coronavirus outbreak, officially now called COVID-19. As peer supporters, we are in a position to support others around their own fears as well as the general fear in our communities. Encouraging people to discuss their fears is a great practice. Our discussions can provide accurate information, and it can help others find accurate information from appropriate sources. In this way, people can decide what they need to do to in order to minimize their risk of becoming infected, and it also can have their minds put at ease if they realize that they have already taken necessary precautions.

We can respond to fear with compassion and also offer constructive support. Fear can be a lifesaver that protects us from real danger and spurs us toward positive action, but it also has the power to deeply disturb and limit us. Worst of all, fear can erode our trust in ourselves, in the goodness of others, and the joy in living.

Constructive responses to fear:

1] Put fear into perspective – our perception of fear is often increased by what we see, hear, and read in the media. It is important for us to become knowledgeable consumers of information, and be able to differentiate between accurate news and exaggerated, scary sound bites of skewed information and wrongly-projected statistics. Staying informed and choosing reliable resources, such as the Centers for Disease Control and the World Health Organization will help. Resource link:

<https://www.cdc.gov/coronavirus/2019-ncov/>

2] Media breaks - the key is to stay informed without being overwhelmed by a constant flow of upsetting information. Catch up on the news at a time of day you feel most rested, relaxed, and supported. Watch the news with a supportive friend.

3] Interrupt fear - interrupting fear can limit its power. When we are fearful we may also feel out of control. Doing usual tasks such as washing dishes, exercising, or talking with friends reminds us that we can be fearful but still make meaningful choices. Each task accomplished lessens fear's grip and restores our confidence and trust that we can cope with life's circumstances.

4] Use all of our senses - when fear takes hold of our thoughts, small concerns can grow large and take over. Awareness of all five senses can help us be in the present moment instead of losing ourselves to

the “what-ifs” which can be circling around our brains. Breathing exercises, mindfulness routines, coloring, cooking, and practicing other ways of being in the “here and now” with the help of our senses is helpful.

5] Find your joy - turning to joy does not mean ignoring your own suffering or the suffering in the world. Finding your joy means being willing to remember that connection to others is one of the most important ways of restoring life’s meaning. James Baraz sums it up this way in his book, *Awakening Joy*, “*Focusing only on the terrible things can lead us to pull back from life and fall into despair. Staying in touch with the well of joy within us enables us to be part of the solution rather than the problem.*”

What helpful strategies do you have that help you to calm your fears?

2a] [National Association of Peer Supporters, Inc \(iNAPS\)](#) - is a 501(c)(3), non-profit organization. It was begun by a small group of peer specialists in Michigan interested in what was happening in other states. Founded in 2004, the organization now includes members from every state and several countries outside the US. Members of this network can come together to share their ideas and innovations, exchange resources and information based on real world application, and add their voice to others when concerns and issues affecting all of us require a global response from a global community. We are actively and intentionally working on making iNAPS a more inclusive and safe space for individuals who have historically been marginalized.

The Call for Proposals has been updated and we would love to get your submissions. The deadline for proposal submission is June 1st, 2020. We Count! Uniting the Peer Support Workforce is the theme of this year's conference, which promises to be an exciting and inspiring event.

[CALL FOR PROPOSALS FORM](#)

Conference workshops will be held on two days, Tuesday, October 13 and Saturday, October 17. There will also be other virtual activities that week including Global Peer Support Celebration Day, Thursday, October 15.

Please watch our website for more information. Registration will open soon.

We will still need sponsors and exhibitors! We are actively reworking the sponsorship packages to align with our new virtual format and will have information available soon. This is a great opportunity to reach a much wider audience and also support a great conference.

2b] & **Don't Miss Our Next Webinar** - Thursday, May 28 1-2:30pm (ET)

Webinar 43: The “Alternatives to Suicide” Approach – Paradigm Shifts Rooted in Peer Support Values Presented by Caroline Mazel-Carlton and Sean Donovan

[Please Visit Our Website for More Information](#) & [Register in advance for this meeting](#)

[View previously recorded webinars](#)

“One's destination is not a place, but a new way of seeing things.” - Henry Miller

“The only courage that matters is the kind that gets you from one moment to the next.” - Mignon McLaughlin

3] [Step Inside the Circle](#) - Compassion Prison Project on Vimeo – 6:52 minutes

“Adverse Childhood Experiences [ACE] are the single greatest public health threat facing our nation today.” - Dr. Robert Block

Unaddressed childhood trauma changes how we respond to the world and when triggered, we make choices that sometimes have devastating consequences including domestic violence, addiction, murder and prison.

I, too, would have been incarcerated had I not had the privilege and support system I lucked into.

Let's shift the paradigm of how we incarcerate, isolate and dehumanize the most traumatized members of our society. - Fritzi Horstman

Step Inside the Circle Documentary - On February 12, 2020, 23 Crew Members, including Academy-Award nominated Director of Photography Rodrigo Prieto and Grammy-Award winning producer Fritzi Horstman, began filming the documentary “*Step Inside the Circle.*” Filmed at a maximum security prison in Lancaster, California, the focus of the day was one of our cornerstones of prison reform: filming the Compassion Trauma Circle where 235 incarcerated men stepped inside the circle for each traumatic event they experience in their childhood.

Compassion Trauma Circle - We form a circle.

For each ACE (and forms of toxic stress) we have experienced, we take one step forward.

When the circle is complete, we see that we are not alone, part of a community, our pain is shared, and that almost all of us have been victims of inhumanity and violence. This is prison reform.

3a] [Compassion Prison Project](#) - *Bringing Compassion, Childhood Trauma Awareness and Creative Inspiration to the men and women living behind bars*

“When you study prison populations, you see a preponderance of childhood trauma and mental illness. The two go together. So what we have in prisons are the most traumatized people in our society.” - Dr. Gabor Mate

Our Initiatives

Adverse Childhood Experiences Behind Bars - 65% of Americans have experienced at least one Adverse Childhood Experience (ACEs). 98% of the incarcerated men we surveyed experienced at least one ACE and over 70% had scores 4 or higher ACEs (the national average is 17%).

Compassion Library - In the United States there are:

1,719 Prisons * 102 Federal Prisons * 1852 Juvenile Facilities * 3163 Local Jails * 80 Native American Jails

We want to make sure each facility has a trauma-informed , social-emotional and spiritual library of books to encourage self-inquiry, self-empowerment, forgiveness and healing. Reading = Healing = Prison Reform

The Giving Back Project - Every man and woman living in prison that we have spoken to want desperately to give back to the communities they've harmed.

The Giving Back Project is a cooperative effort to find ways to give back to the communities that have been harmed. Initiatives include: Prison Mural Painting, Breast Cancer Walk-A-Thon, Art Fundraisers and other creative ways to restore the harms of the past.

Trauma-Informed Prisons - Trauma informed care, prison reform, community healing and rehabilitation, regeneration of the spirit and the end of punitive warehouses is the vision. Now. Let's change how we treat our most traumatized members of our community and begin to heal our society.

OUR MISSION - Engendering prison reform and ending recidivism through compassion, childhood trauma awareness, creative and educational programs which uplift and restore our inherent humanity to our incarcerated brothers and sisters.

“Alone we can do so little, together we can do so much.” - Helen Keller

“Blessed is the influence of one true, loving human soul on another.” - George Eliot

4] [Pat 'Mother Blues' Cohen uses her voice to perform acts of kindness during pandemic](#) – American Creators - PBS News Hour – You Tube 5:34 minutes

Musician Pat “Mother Blues” Cohen has long met adversity with music. She lost her New Orleans home to Hurricane Katrina and relocated to North Carolina with assistance from the Music Maker Relief Foundation, a group that supports blues musicians. But now, the coronavirus pandemic has hit very close to home. Jeffrey Brown reports for our American Creators series on rural arts.

“Everybody has a currency, and everybody's currency is different. My currency is my voice.

You don't have to do what I do, but do something nice for somebody else. And that makes you feel good. And that's contagious by itself.” - Pat “Mother Blues” Cohen

4a] [In a green-space separating wings of the Citadel nursing home on Monday afternoon](#), Pat “Mother Blues” Cohen told all those within earshot to “lay back and listen.”. by Liz Moomey, Salisbury Post

Cohen, whose blues singing has taken her to Europe, Australia, South America and New Orleans, set up her sound system and laptop on an air conditioning unit outside of her brother George’s residence. She

started off the set by making sure Duke, as she calls her brother, was listening. She then began her concert, letting her rich voice carry across the spring afternoon.

She sang out “Alone in a room, it’s just me and you.” And residents nearby cracked open their windows and turned down their TVs. Steve Dean, a resident at Citadel, called Cohen a blessing in a “blah time.”

Cohen has been performing at nursing homes around Rowan County for years, but she generally sings inside the residences for an hour. At Compass in Spencer, she performs every week. The COVID-19 outbreak at the Citadel changed her usual routine. She continues her performances while practicing social distancing — where residents can remain in their rooms and hear her from their windows.

“I may not have cash money,” Cohen said. “My voice is my currency, so I give what I have. I think everyone should do that. Some people think they can’t give anything because they don’t have money, but you have something you can give. Just a small act of kindness.”

She does small acts of kindness, much-needed amid the COVID-19 pandemic, with her voice. “If everybody would just be kind these days. This is a time where we all need to stick together,” Cohen said. “We all need to stick together. We all need to work together. It’s a time to show kindness to somebody with what you have.”

Cohen has received national attention for her singing, too. She was featured in a recently published Rolling Stone’s story “[Meet the Blues Singer who won’t stop brightening seniors’ lives.](#)” She was also interviewed CNN, which will air sometime this week.

Cohen also plans to return to the Citadel Wednesday at 1:30 p.m. and then perform at Compass at 3:30 p.m. Cohen said she enjoys returning to the nursing homes to perform. “It’s the gift that keeps on giving,” Cohen said. “It helps me learn different tunes. I can do anything.”

She sings jazz, blues, gospel and show tunes. The residents can listen, sing along or dance.

In March, the Sweet Potato Queens helped her. The women reached out to her to perform at their Mardi Gras Gala as they raised money for the Wallace Cancer Institution. Cohen wasn’t given compensation, but at the end of the gala a collection plate was passed around. Enough money was raised for her to buy a new PA system, a Bose S1, that is easy to carry and has a big sound.

Cohen said she was excited and “tickled” for the sound system that made it possible for her to perform during the pandemic.

Cohen lived in New Orleans for 13 years while performing there. She moved to Rowan County after being displaced by Hurricane Katrina in 2005. She currently lives in East Spencer.

Cohen gets some assistance from Hillsborough-based Music Maker Relief Foundation. She wants to get a second sound system and is soliciting donations through a Go Fund Me page: gofundme.com/f/b5hndq-senior-love.

It’s not about the money, though, for Cohen, who believes if you love what you do you’ll never work a day in your life. Many of her performances are done at no charge because the nursing homes can’t

afford entertainment.

“It’s not about the money,” Cohen said. “It’s about helping the seniors out.”

“We can't always choose the music life plays for us, but we can choose how we dance to it.” - Unknown

“In the midst of chaos, there is also opportunity.” - Sun Tzu

5] [Dropping Keys - Stories of Recovery and Hope](#) - Dropping Keys is a community built on the belief that we all have not just the capacity, but the responsibility to help others on their journey. Sharing our own stories represents a milestone in our road to recovery, wholeness, or on our spiritual journey. It signifies that we have made progress and hold wisdom that can help others. We share to inspire others and to reassure ourselves that we have, in fact, experienced personal growth.

Whether you have struggled with mental illness, substance abuse, fostering, or adopting, your experiences and wisdom can serve others.

Topics posted - AA, Abuse, ACA, Addiction, Adoption, Alcohol, Anxiety, Art, Bipolar, Borderline Personality Disorder, Cocaine, Coping, Death, Depression, Drugs, Eating Disorder, EMDR, Family, Foster Care, Grief, Hope, Love, Mania, Marriage, Medication, Meditation, Mindfulness, Mother, Music, Obsessive Compulsive Disorder, OCD, Panic, Psychiatrist, Psychosis, PTSD, Recovery, Schizophrenia, Self Harm, Stigma, Suicide, Therapy, Trauma, Treatment, Writing, Yoga

5a] [Submit Your Story](#) - We are on a mission to build a collection of personal stories that speak to those who are seeking inspiration and answers. We seek stories of [recovery](#), transformation, and freedom. We have all experienced the weight of the cages that others put around us. Around our childhood, our sexual orientation, our emotional suffering, our journey towards wholeness, and our addictions.

But we also all hold the keys

We have experienced moments of deep realization and personal growth. We have the keys to open the locks, the keys that will result in our freedom and the freedom of our fellow prisoners.

As human beings who are constantly seeking growth, sometimes it furthers our journey and solidifies our progress to share our stories; the pain and the victories. By [submitting your story](#), you drop a key for others on similar journeys.

Many people use art to help them get through difficult times. Art is a trusted avenue for personal growth. You can [share your art here](#), and add to a growing body of resources for those who are struggling.

“You don't have to suffer continual chaos in order to grow.” - John C. Lilly

“The soul always knows what to do to heal itself. The challenge is to silence the mind.” - Caroline

Myss

6] [Campaign to End Loneliness](#) - The Campaign to End Loneliness believe that people of all ages need connections that matter.

There are nine million lonely people in the UK and four million of them are older people. Many older people find constant loneliness hardest to overcome. They lack the friendship and support we all need.

We've been experts in the field of loneliness and connection since 2011. We share research, evidence and knowledge with thousands of other organisations and the public to make a difference to older people's lives.

We inspire everyone to connect and bring communities together across the UK.

We're hosted by Independent Age, supported by National Lottery funding through the National Lottery Community Fund, and also funded by the Calouste Gulbenkian Foundation, The Tudor Trust and donations from the general public.

Together, we can End Loneliness. The Campaign to End Loneliness believes that nobody who wants company should be without it. We want to make this happen by ensuring that:

1. People most at risk of loneliness are reached and supported
2. Services and activities are more effective at addressing loneliness
3. A wider range of loneliness services and activities are developed

What we do

Evidence-based campaigning to commissioners - Much of our time is spent campaigning: communicating with, convincing and persuading those who make choices about health and care spending to tackle and prevent loneliness. We provide a strong voice to commissioners of services and activities at a local and national level. We invite our supporter network of 2500+ organisations and people to campaign with us.

Facilitate learning on the front line - The Campaign to End Loneliness offers organisations who want to tackle loneliness a chance to learn from each other. We provide the latest research, opportunities to meet through events, and regular information to share the motivation and momentum behind this issue.

Building the research base - We gather together and offer to policy makers and practitioners the latest evidence on loneliness and isolation. We draw on research through our Research Hub which engages academics and specialists from across the world. With these academic partners, we work to make new research as relevant and practical as possible for organisations that are working directly to support older people, or making commissioning decisions.

Public campaigning - Thanks to funding from the National Lottery Community Fund, in 2017 we began to engage businesses and the public as part of our campaign. To kick start this work we launched [The Loneliness Project](#), a film that has been seen over 85 million times worldwide and is one of the most watched and engaged with charity campaigns of 2017.

In 2018 we launched [Be More Us](#). Be More Us is a movement that celebrates small moments of connection, like saying hello to someone in your local shop or smiling at someone on the bus. We all need a sense of belonging, no matter how old we are. Our [Be More Us launch video](#) has had over 100 million views worldwide and is one of the most seen UK charity videos of 2018.

Whether you're a charity, business or member of the public, join our movement and [sign up to Be More Us](#).

6a] [Let's Talk More](#) - Together, we can end loneliness – YouTube 2:17 minutes

Comedian Andy Parsons spent a day in a shopping centre encouraging people to get off their smartphones and have a chat. Secret cameras captured the moment surprised shoppers were approached by Andy.

Loneliness and isolation are on the rise, with nine million lonely people in the UK. Over half of British adults feel it's been a long time since they made a connection or a new friend. Almost half (49%) of UK adults say that their busy lives stop them from connecting with other people.

But we can all do something to tackle loneliness. And it's incredibly simple. Small moments of connection, like saying hello to someone in your local shopping centre or smiling at someone on the bus, are an important way to tackle loneliness and can make a huge difference to someone's day.

We have launched the Let's Talk More video to encourage people to make these small moments of connection happen. Small moments can make a huge difference. For many people who are isolated and alone, that small moment of connection could be the first conversation they've had in weeks.

Conversation and connection are good for us. Let's celebrate the art of small talk and have a good natter. Let's Talk More. Let's Be More Us. <http://bemoreus.org.uk/>

"You can search throughout the entire universe for someone who is more deserving of your love and affection than you are yourself, and that person is not to be found anywhere. You yourself, as much as anybody in the entire universe deserve your love and affection." - Buddha

"We are never so defenseless against suffering as when we love." - Sigmund Freud

7] [The Gifts of Adversity: Reflections of a Psychologist, Refugee, and Survivor of Sexual Abuse](#) by Dr. Carolee Tran

*"The Gifts of Adversity is a love song to diversity and an urgent call to action." - Mary Pipher, PhD, New York Times bestselling author, *Reviving Ophelia*, *The Middle of Everywhere*, and *Women Rowing North**

In *The Gifts of Adversity*, Dr. Carolee Tran vividly recounts her harrowing escape out of Vietnam with her family during the fall of Saigon and the obstacles they faced in pursuing the American dream, including the traumas of the Vietnam War, polio, forced relocation to the U.S., bullying, and

experiences of racism. She also describes her history of sexual abuse by a Catholic priest for seven years, its impact on her life, and how she found the strength to extricate herself from the perpetrator's control. Dr. Tran reflects on how overcoming these adversities have given her some great gifts - what she refers to as "the gifts of adversity." This moving and inspiring book is a human story about trauma, hope, resilience, and the power of the human spirit to survive and thrive under the most difficult circumstances.

This book is a valuable resource for the lay public, including those who have experienced abuse and other traumas, and for mental health providers and educators.

The Gifts of Adversity is available on Amazon in paperback and Kindle

Paperback: <http://www.amazon.com/dp/1734686804>

Kindle: <http://www.amazon.com/dp/B0872JM1BL>

Dr. Tran is a refugee and the first Vietnamese woman to earn a PhD in clinical psychology in America. She received her doctorate from Boston University and completed her internship at Harvard Medical School. She teaches at the UC Davis Medical School Department of Psychiatry and Behavioral Sciences and has a private practice in Sacramento, California. Her segment in the documentary series *My Vietnam War Story*, produced by PBS station KVIE and aired in conjunction with Ken Burns' *The Vietnam War* documentary, was nominated for a Northern California Emmy in 2018.

7a] [Local Author Carolee Tran And Her New Memoir 'The Gifts of Adversity' - Insight With Beth Ruyak](#) on capradio.org 15:59 minutes

Insight creates conversation to build community, exploring issues and events that connect people in our region. Insight covers breaking news and big ideas, music, arts & culture with responsible journalism, civil discussion and diverse voices.

The 'Fall of Saigon' on April 30, 1975, marked the end of the Vietnam War and one of the most crushing defeats in U.S. military history.

Local psychologist Dr. Carolee Tran was a child at the time and, together with her family, was able to escape Vietnam. Tran sees parallels in life then and now, and wrote about her experience in a new memoir "*The Gifts of Adversity: Reflections of a Psychologist, Refugee, and Survivor of Sexual Abuse.*"

"The worst crime, being expected not to tell." - Darrell Hammond

"Today I will spend some time exploring the most intimate relationship I will ever have – my relationship with myself." Courage to Change

8] [Advance Parenting](#) - Advancing Parenting is a small nonprofit organization pioneering a new kind of parenting education...one that reaches everyone, everywhere, all the time. We place fifty-one concise and unambiguous parenting norms in public spaces, including but not limited to windows of stores, offices, restaurants, and vehicles. This, in an effort to elevate and level the quality of parenting in communities, prevent adverse childhood experiences (ACES), and improve educational outcomes for

children.

Everyone gets the opportunity to be a parenting educator!

Below are a few examples. We began with parenting norms on bumpers and windows because it was the least expensive way to get things rolling. Turns out they're wonderfully effective. At stoplights drivers and passengers point, nod, and smile. Conversations begin and often a phone is used to take a picture of the bumper sticker.

It's also a way for individuals and organizations to participate. Every school, daycare, business, agency, doctor's office, clinic, hospital, etc. should have sets of these fifty-one parenting norms bumper stickers on a counter or table so parents, customers, and clients can help themselves. Parenting norms on vehicles will be read thousands of times by thousands of different people of all ages for years to come.

Click on [The Norms](#) above to see the complete list of the fifty-one bumper stickers.

Ten of The Fifty-One Parenting Norms Bumper Stickers:

1. Parents have engaging conversations with their children by listening attentively and responding thoughtfully.
2. Parents praise their children's effort, behavior, and achievement sincerely and appropriately when they deserve it.
3. Parents find suitable alternatives to corporal punishment.
4. Parents love their children and express that love frequently in little ways. Hugs, caresses, a smile, a hand on the shoulder can often communicate feelings as effectively as words.
5. Parents severely restrict their children's screen time.
6. Parents make their children aware of their strengths and don't draw attention to their weaknesses.
7. Parents set fantastic examples for their children.
8. Parents raise kind, thoughtful children by modeling selflessness, empathy, and altruism.
9. Parents assign their children age-appropriate chores beginning when they're old enough to pick up their toys and continue this practice until they leave home.
10. Parents establish a code of conduct. If they don't their children will adopt one that may endanger their lives and the lives of others.

*** *Parenting norms may not be appropriate for children with special needs*

"Nothing in this world is to be feared.... only understood." - Marie Curie

Today's reminder - Will power cannot eliminate in a day troubles that have taken root and flourished in my life for decades. Things take time. - Courage to Change

9] [This couple is delivering backpacks with pandemic supplies to N.Y.C.'s homeless](#) by Julie Compton @ NBC News

With their nonprofit, [Backpacks for the Street](#), they're crisscrossing the city in a rented U-Haul delivering masks, gloves, sanitizer and other essentials.

A simple backpack has become a symbol of hope to the tens of thousands of homeless men and women throughout New York City, the epicenter of the nation's coronavirus pandemic.

A volunteer movement called Backpacks for the Street is crisscrossing the city's boroughs in a rented U-Haul, delivering backpacks filled with masks, gloves, hand sanitizer and other essentials to New York's homeless. Since the COVID-19 crisis began ravaging the metropolis, where the virus has killed over 15,000 people since March, 1,200 backpacks have been handed out, according to Jeffrey Newman, who started the group with his fiancé, Jayson Conner, in 2018.

"For the people out on the street, the biggest thing when you talk to people out there is that they feel invisible, and they feel like nobody sees them as a human being," Newman, 52, told NBC News. "The thing about a backpack is that it gives people hope, it says, 'Hey, we see you, and you matter.'"

Newman said the number of backpacks the group typically gives out has quadrupled since March. Before the pandemic, the nonprofit depended on about 10 volunteers to help hand out about 30 backpacks a day. In order to maintain social distancing, it now depends on just four volunteers, including Newman and Conner, who together are now handing out about 100 backpacks a day. On Friday, the group traversed about 80 miles of city streets over the span of 16 hours.

"I feel like we're working 10 times as much as we did before," Newman said. "We're very happy to be doing it; it's a labor of love."

Currently, there are estimated to be over [60,000](#) people in New York City without homes, according to the Coalition for the Homeless, but they're not always easy to find. Newman and Conner spend much of their time scouting the streets, wearing masks and gloves to protect themselves as they search for homeless wherever they can find them. They often depend on word-of-mouth to find those who've bedded down in out-of-sight areas.

And not only are they handing out vital supplies, they're also educating people about how to stay safe. Usually, if a person who is homeless already has a mask on, "it's really dirty and old, and it will have a hole in it," Conner said. When they are handed a backpack, they are "ecstatic," he added. "They don't get that from anywhere else ... they really don't."

The couple said the pandemic has turned New York City into a "ghost town." Streets once brimming with people are nearly empty. Many homeless are afraid to go into shelters for fear of catching COVID-19, the couple said. According to the New York City Department of Social Services, at least 657 homeless people have contracted the virus, and at least 52 have died. While the city has managed to house homeless people in about [1,000 hotel rooms](#), the couple said it's still not enough to support the

overwhelming number of people who feel they have nowhere safe to go.

“They are pretty damned scared, because they don’t know where to go, they don’t know what to do,” Conner said.

Conner, 42, is no stranger to the streets. Before he met Newman in 2004, who at the time ran his own internet business, Conner was struggling with a drug addiction while living on and off the streets, often couch surfing in friends' apartments to survive. Now a restaurateur, Conner said it “really hurts” to see people living on the streets, especially during a public health crisis.

Newman and Conner decided to start Backpacks for the Street after volunteering at a soup kitchen for several years. They said they launched their nonprofit, officially named Together Helping Others, after raising small donations from friends. Since then, the nonprofit has given out 4,000 backpacks filled with necessities such as toiletries, toothpaste, clothing, feminine hygiene products and food, according to Newman. Thanks to a recent grant from the TJX Foundation, they plan to set up pop-up stations where people can get their backpacks refilled, but Newman said the program is delayed due to the pandemic.

Newman said many have misconceptions about the homeless, including the perception that they are people who don’t want to work, but he said economic inequality and financial hardship are what's fueling the crisis.

“It’s just hardworking people who just had a bad streak and a bad moment and their circumstances are different, but they are no less worthy of being cared for and being saved and not getting coronavirus or worrying about food or going without shelter,” he said.

He said many Americans are just one or two paychecks away from becoming homeless. “What we are trying to get across to people, is the guys you see on the street, the women you see on the street, could be any one of us,” he said.

9a] [Backpacks For The Street](#) - A grassroots movement to bring compassion and dignity to the streets, and make the lives of the homeless better.

“More smiling, less worrying. More compassion, less judgment. More blessed, less stressed. More love, less hate.” - Roy T. Bennett

“All I ever wanted was to reach out and touch another human being not just with my hands but with my heart.” - Tahereh Mafi

10] [The Irish are sending relief to Native Americans](#), inspired by a donation from a tribe during the Great Famine By [Harmeet Kaur](#), CNN

People in Ireland inspired by an act of generosity committed more than 170 years ago are paying it forward.

In 1847, the Choctaw people collected \$170 to send to people in Ireland who were starving during the potato famine.

The struggles experienced by the Irish were familiar to the tribal nation: Just 16 years earlier, the Choctaw people had embarked on the Trail of Tears and lost thousands of their own to starvation and disease.

Now, donations are pouring in from people across Ireland for a [GoFundMe campaign](#) set up to support the Navajo Nation and Hopi reservation during the coronavirus pandemic.

"From Ireland, 170 years later, the favour is returned!" a message from one donor reads. "To our Native American brothers and sisters in your moment of hardship."

Irish have donated about half a million, organizer says - The donations from Ireland seem to have started after [The Irish Times journalist Naomi O'Leary](#) shared the Navajo and Hopi fundraiser on Twitter, garnering thousands of likes and retweets.

"Native Americans raised a huge amount in famine relief for Ireland at a time when they had very little," O'Leary wrote on Saturday. "It's time for is [sic] to come through for them now."

Ethel Branch, the fundraiser's organizer, estimated on Tuesday that Irish people had donated about half a million dollars to the relief efforts so far, which goes toward food, water and other necessary supplies for Navajo and Hopi communities.

The campaign had raised more than \$2 million, as of Tuesday evening.

"It's very unexpected, but it's just incredible to see the solidarity and to see how much people who are so far away care about our community and have sympathy for what we're experiencing," Branch told CNN.

The Navajo Nation has seen more than 2,400 confirmed Covid-19 cases and more than 70 deaths, the tribal nation [announced on Monday](#). The Hopi reservation, which is surrounded entirely by the Navajo Nation, [has reported](#) 52 positive cases.

The gift was an act of solidarity - In 1845, a fungus devastated Ireland's potato crop, which the Irish depended on for food. The [Irish potato famine](#) would go on to cause widespread starvation and disease, killing hundreds of thousands of people and having a catastrophic effect on the country.

News of the Irish potato famine was first [reported in American newspapers](#) later that year. As coverage of the famine continued to ramp up, newspapers appealed to the American public to provide relief for those affected in Ireland -- and Americans responded by sending funds.

The news eventually reached the Choctaw people in 1847, when Major William Armstrong came to Oklahoma for a meeting intended to raise money "for the starving poor of Ireland," according to [historian Turtle Bunbury](#). Those assembled at the meeting included missionaries, traders and chiefs of the Choctaw Nation.

The Choctaw leaders in the crowd had already experienced their own tribulations.

In the 1830s, between [12,500](#) and [15,000](#) Choctaw forcibly relocated from their ancestral home in Mississippi to Oklahoma, walking thousands of miles on the Trail of Tears. As much as a quarter of the tribe's population was lost on the journey, and effects of the relocation were felt long after, according to Choctaw Nation Chief Gary Batton.

So when the Choctaw heard about the plight of the Irish, they dug into their own pockets, Batton said. "We felt their pain," Batton told CNN. "We sensed what they were dealing with."

Much of the \$170 - the equivalent of more than \$5,000 today - raised at the meeting in Oklahoma that day came from the tribal nation, [Bunbury wrote](#).

Irish and Native American solidarity continues - The act of kindness was never forgotten, and the solidarity between the Irish and Native Americans has continued over the years.

In 1992, 22 Irish men and women walked the Trail of Tears to raise money for famine relief efforts in Somalia, according to Bunbury. They raised \$170,000 -- \$1,000 for each dollar the Choctaw gave in 1847. A Choctaw citizen reciprocated by leading [a famine walk in Ireland](#) seven years later.

In 2017, the town of Midleton in Ireland [unveiled a sculpture](#) commemorating the Choctaw's 1847 gift. In 2018, Irish Prime Minister Leo Varadkar [announced a scholarship program](#) for Choctaw people to study in Ireland while he was visiting the tribal nation in Oklahoma.

The GoFundMe donations are just the latest example of the longstanding relationship. As one Irish donor on the fundraising page wrote:

"You helped us in our darkest hour. Honoured to return the kindness. Ireland remembers, with thanks."

10a] [The Real Legacy of Crazy Horse](#) by Alia Wong @ The Atlantic [*great article, long read, but worth it! MS*]

The Oglala Sioux leader prophesized an economic, spiritual, and social renaissance among Native American youth. Now the Seventh Generation is here - and they're determined to live up to the legend.

"Courage. Kindness. Friendship. Character. These are the qualities that define us as human beings, and propel us, on occasion, to greatness." - R.J. Palacio

"Emotional pain cannot kill you, but running from it can. Allow. Embrace. Let yourself feel. Let yourself heal." - Vironika Tugaleva

11] [13 Virtual Train Rides From Around the World That You Can Experience Right Now](#) by [Evie Carrick](#) @ Travel + Leisure

Need a change of scenery?

Watching people, clouds, and birds pass your window is only entertaining for so long. After a while, a change to your limited, self-quarantined reality may be necessary. And while you can virtually [visit museums](#) and even [national parks](#) from your couch, they've got nothing on a brisk train ride through

the [Swiss countryside](#) or journey around the [Arctic Circle](#).

Virtual train rides offer viewers the chance to zone out and calm the mind, while seeing new landscapes, some of which many people will never experience in real life, quarantine or not. Plus, you don't have to worry about train fare or if the [onboard amenities](#) are up to par - just pour yourself a hot cup of tea (or a [cocktail to fit the destination](#)) and hop aboard.

“What a lovely surprise to discover how un-lonely being alone can be.” - Ellen Burstyn

“But one thing for sure, if you do not address your trauma, it will undress you.” - Sharon Wise

12] [The implicit bias of, “Mental Illness” and “mentally ill”, a lexicon of hurt.](#) By Michael Skinner

How can we heal from the implicit bias of “Mental Illness” and “mentally ill”?

I hear these words and it sounds like fingernails scraping down the chalkboard.

“The stain of dehumanization colors the mind, body and spirit and it is not so easily washed away.” - Michael Skinner

Recently I read a blog post at the [ACEsConnection](#) website, “Erasing My ACES” by Sirena Wheeler. It was posted on April, 19, 2020. It struck a chord with me, many in fact and it put me on a spiral down memory lane. It was a trip that I did not want to embark upon, I had other plans. But, that is the inherent nature of trauma and how it comes-a-calling in my life.

For several days I have wanted to respond, but I couldn't, due to all of the intrusive thoughts, memories and feelings that were dredged up. And my good friend dissociation also came to visit. Dissociation, a useful coping skill as a child and teenager when being hurt, but a pain in the butt as an adult. And yes, I have a wealth of coping skills to help me get through it. I have found that patience, time and being in the moment, the best that I can, to be the healing balm I need. Strong doses of walking and being in nature are also key.

I would gently urge a reading of Serena's post and all of the ensuing comments of support and praise for her in writing the article. I will share a snippet of the piece to help set the table.

[Erasing My ACES](#) @ ACEsConnection by Sirena Wheeler

“The new doctor greeted me cheerfully when entering the room, smiled while hearing what brought me in, and efficiently told me she'd have me fixed, back up and running in no time. And then, this appointment changed to reflect many of my recent interactions with healthcare professionals. She opened my medical record, and scanned the contents for any particular warnings and red flags. She paused, noting my ACE score. I watched as her expression darkened, and she seemed to bank all the hope she'd had for me to a reserve for other patients. The mood of the room became somber, with, “I see you have an ACE score,” setting the tone. Setting me up. The quick, assured solutions offered to me just moments before evaporated, leaving a bare recognition that I am a long-suffering human, who is just suffering a little more in a particular area at the moment. No future, only a product of my past. The

quick change in direction was brushed aside with a murmur of explanation stating, “You may not respond to therapies as well as other patients.” I was handed a far less expensive, but more difficult to endure treatment, and told that there would be no further ‘care’ offered at this practice if I did not fully comply. My questions about follow-up were ignored. And then, the door closed. Like others had before, after re-traumatizing me through grilling questions about my street drug use, my latest suicide attempts, if I was being honest with a psychiatrist, and whether I had sexual partners outside of my marriage. Nothing in my personal record pointed towards these interrogations, they were a product of my physicians’ bias. Answering in the negative was met with skepticism that meant I wasn’t believed. It was hinted that answering in the positive would only allow the physician to pass more responsibility for my care on to others in my medical team because the lifestyle complexities meant that it was “not their department.” Crestfallen, with no offer of support, I alone was responsible for the coordinating of my care.

I had to wonder, what in the world was an ACE score, and why was it causing this pain? It turns out, that I had been labeled with an Adverse Childhood Experiences Score, a number that helps to explain a person’s risk for later health problems and challenges. Given to me early on, never explained, but recorded, and copied; over and over, office to office, with every transfer of my medical records. In contrast, a medical diagnosis in my records directs a prescriptive means of treatment for the condition it describes. A label simply summarizes, “Here is a victim, likely difficult or impossible to succeed with any treatment.” Assume the worst of her lifestyle and ability to cope, offer the least in treatments- she is likely already overtaxing the system. Keep her from affecting the measurable outcomes of your practice.” - Sirena Wheeler

And an excerpt of Cissy White's comments - “...Despite that and my work, I've only had one positive experience in a medical setting talking about past trauma. Usually, sharing leads to being treated with less care, compassion, dignity or be written off or discriminated against when someone only sees a diagnosis or a label which can be PTSD, an abuse history, or high ACEs. Or, sometimes, the discomfort of the provider is so palpable that it permeates all else.

I've shared about my ACEs with a functional medicine nurse practitioner who I had an hour with. I did that only after she gave space, respect, and shared info. with me. It was the best appointment I ever had and made me feel spectacular; seen, and motivated me to get more invested in my own wellness. But often, sharing has been met with confusion, ignorance, or people over assuming and under assessing the cause of health issues.

For me, the sharing that has been most possible has happened outside of medical settings with family, friends, survivor circles and parents.”

.....While many hope and maybe assume a trauma-informed setting would always be safe, compassionate, equitable, etc. that assumption has to be checked and compared with the real experiences of people with ACEs, in patient settings, not just what providers say, intend, and report.

There are lots of past and present experiences showing that equity, respect, compassion and good care result from sharing about the cause and impact of traumatic stress from ACEs as well as other neglect, violence, and injustice. Hopefully, things will change, people will change, systems will change. But, til

then, sometimes it's safe and wise to erase our ACEs in some settings, in order to get the best treatment.” - Cissy White

These are the comments of two people and yet, their experiences are echoed by countless others. That says something is drastically wrong with the treatment providers in the medical and mental health community. They may be “trauma-informed”, but not trauma-informed practicing.

I have been advocating on the matters of trauma, abuse and mental health since 1993. I would like to share some of what I have learned from so many across this country and a few of my experiences when seeking help and the backlash for doing so.

Despite a history of enduring protracted and severe emotional, physical and sexual abuse at the hands of my parents and some of their perverse friends as a child and teenager, I found a way to make a living as a professional musician and support a stay at home wife and three daughters. At the age of twenty eight I started my own business, representing rock bands and musicians. I still continued to perform as a drummer in a rock band on the weekends. Eventually I opened up a sound and lighting company and had a small record company. As a professional musician, it was a working class income, but good enough to provide and own a home. As a business owner, I was very successful, and financially, our family, now with five daughters, appeared to be set for life.

Then my past trauma came calling. In January of 1993 I suffered a nervous breakdown or breakthrough. It was time to heal the injuries from the past.

And that is when the re-traumatization, dehumanization and mistreatment of me as a human being started. I was a husband, a dad, a professional musician and business owner who was only seeking help to heal, to get my life back on track. And then I heard those two words, incessantly, that still cause me to feel nauseous and damn angry - *“you're mentally ill, you have a mental illness and you will never work again, blah, blah blah”*. All of these encouraging words came from most of the mental health providers. I became an object of derision and contempt because I was presumed to be weak. And no, they did not say they held me in contempt or thought less of me, but their actions let me know every time I would voice a concern, a desire to live life again, to be a musician, to work, etc. Even those who thought they were being kind and compassionate in their delivery of - *“No Michael, you cannot do that, maybe someday you might be able to volunteer in a music store or maybe, a book store that sells records, but you cannot work again because you are mentally ill.”* - were hurtful.

I lived in a world of silence, shame and blame for all of my life due to the horrific trauma of my childhood. And now, these caregivers were only reinforcing what I felt inside. That I was less than human.

On top of the degradation of my psyche, came the regimen of drugs....I never took any illegal drugs in my life. But now I was over-medicated on anti-psychotics and other psychotropic medications to help my PTSD and depression. I was never psychotic and the medications caused all kinds of side effects, including suicidal ideation. But they don't tell you those things, just take the medications, they will help you, because you are *“mentally ill.”* *“You have a diseased brain, it's in your genes...blah, blah, blah...”*

I am not anti-medication, I am against being over-medicated and in favor of letting people know of the possible side effects. For some people, the meds work great, for many of us, not so. And for some, they

lose their efficacy.

Now I had labels, PTSD and depression. And those bring their own inherent re-traumatization, dehumanization and mistreatment from medical providers. A visit to a doctor because of a urinary tract infection was more than an unpleasant experience. When the doctor questions your infection and the pain and discomfort you are experiencing, it sucks the oxygen out of the room. And once again you feel the shame and the blame. *“Mr. Skinner, you're mentally ill, this is most likely all in your head.”* It took a lot of pleading with him and the nurse, please do the test. Yes, I did have an infection, no apology, but I got the prescription. Ditto to a visit to the dentist for tooth pain, same scenario all over again. Those are only some of the many experiences I had when seeking medical help.

There were kind people in these medical and mental health systems, who did not look down upon me with derision and contempt. But they were part of the system and this is all they knew or were forced to practice.

And you truly come to understand the devastation of those words, *“mentally ill and mental illness”* when you are in divorce court. When your soon to be ex-wife, your partner of twenty one years, uses those powerful words in her pleadings and her attorney drives that message home, over and over again, then you know how truly low you are on the human being scale of life. And let's not forget, throw in a good dose of, *“he was sexually abused as a child, I'm afraid to leave him alone with our daughters”*.

The reality of my being able to be engaged with my children was driven home, when my attorney asked to approach the bench with me in tow. *“Your honor, Mr. Skinner has never had a history of violence or abuse at his wife or his children....”* Judge's response - *“I know Mr. Skinner is not violent or abusive, he's mentally ill.”*

What were my crimes of being *“mentally ill”*; dealing with flashbacks, staying in my bedroom, several voluntary hospitalizations and zoned out from the meds and the depression, but that was not all of the time.

There was a period of time that I worked with abused and neglected kids and troubled youth as a court advocate and mentor. I learned how the New Hampshire Division of Child, Youth And Families had an unwritten rule, *“any mentally ill parent was an unfit parent”*. I heard this echoed from several staff members, so I certainly did not disclose my own labels.

I've read articles that report how, 70 percent [and higher] of children with a mentally ill parent are removed from their homes and placed in foster homes - even when the court has found no evidence of neglect or abuse. I've learned that one out of five people will deal with a mental health concern in their lifetime, but two thirds will not seek help because of the stigma and discrimination. It has been documented that within the mental health systems of care, many have bias against the very folks they are trained to help.

I understand that this is a blog post and not a book chapter, so trying to share the experiences of degradation and indifference over the past twenty seven years cannot be accomplished here. The sad reality, I continued to experience this mindset, that I must be imagining these symptoms due to my mental illness, over and over again. So whether it is the Ace Score or the label of mental illness in your chart, the outcome is still the same, you are dehumanized by their mistreatment.

In the late nineties I experienced a brutal assault and beating by five to six individuals, in the wrong place at the wrong time. A counselor I was seeing, well versed in trauma, told me that something else was going on with me besides the PTSD and depression, that I needed to see a doctor. Well, I did and by now you the drill of what was said to me by several treating physicians and psychiatrists. When I finally met a neurologist who listened to me and administered several tests, he let me know that I was dealing with Traumatic Brain Injury. I wanted to hug him and his assistant because they listened to me.

Eventually, I stopped disclosing to medical providers that I deal with PTSD and depression and had adverse experiences to several psychotropic drugs.

In those twenty seven years I have heard too many similar experiences from folks I met in support groups, whether it was for mental health or sexual abuse. That damn label of “*mental illness*”, causes one to suffer even more when dealing with physical concerns because you are ignored. A friend of mine became an advocate because of what her mother experienced. While in a psychiatric hospital her mom was ignored every time she raised the concerns about the pains in her foot and leg. She eventually lost her leg to amputation, due the diabetes she was suffering from.

Please pause to consider the amount of people in the prisons, the new holding cells for those labeled “*mentally ill*”, the vast majority of whom are dealing with significant trauma, and how their needs are being denied.

Many years ago, I forget where and how, but perhaps an event I was part of for the National Center for Trauma Informed Care, Dr. Felitti of the ACE Study invited me to write an article about my experiences with medical providers for the Kaiser Permanente Journal. I was honored because of my great respect for him and his colleagues. Despite many attempts to write the piece, I could never finish it, I would fall apart from all of the feelings that came crashing down. I'm in a better place now, but drafting this has been taxing upon me for the past several days. Being maligned is a hurt with a lasting legacy....especially when your childhood was no picnic.

I know that the majority of those raising the awareness of Adverse Childhood Experiences mean well and are trying to do the right thing, but please know, the language of “*mental illness*” and its stigma and discrimination, only helps to add one more trauma for so many of us who already have enough ACE Scores.

As an advocate, I want to see people treated better and given help and skills to have a life of peace and joy. Personally, I feel something is missing in the treatment for so many struggling with chronic and complex trauma, especially in most of the mental health centers across this country.

“*Nothing about us, without us*”. Many of us have known great suffering and trauma, we were hurt in life, we weren't sick in the mind. Our whole being was impacted by these hurts of life. We need to be in the discussion of how we feel about the label of mental illness, for there is great disdain, still.

A few thoughts from some of my friends and fellow advocates - “a mental health injury, mental health condition, psychological injury, major emotional distress, mental health challenges, trauma survivor, behavioral health issues, distress. A condition which extends us outside our comfort zone would be a “discomfort,” which is a bit less harsh way of saying an “illness”, “disorder”, or “dysfunction”.”

In the attached video, I share some thought on what helps for healing the hurts of life.

Michael Skinner - Empowerment, Voice and Choice - YouTube 2:46 minutes - <https://www.youtube.com/watch?v=IwZlcvbwxtQ>

This article was also shared @ the [ACE's Connection](#) with comments from readers.

Thank you & take care, Michael Skinner

“Highly sensitive people are too often perceived as weaklings or damaged goods. To feel intensely is not a symptom of weakness, it is the trademark of the truly alive and compassionate. It is not the empath who is broken, it is society that has become dysfunctional and emotionally disabled. There is no shame in expressing your authentic feelings. Those who are at times described as being a 'hot mess' or having 'too many issues' are the very fabric of what keeps the dream alive for a more caring, humane world. Never be ashamed to let your tears shine a light in this world.” - Anthon St. Maarten

“There is no exercise better for the heart than reaching down and lifting people up.” - John Holmes

13] [Project Parachute Provides Free Mental Healthcare to Front-Line Workers](#) by Amanda D'Ambrosio @ MedPage Today - Started in one college town, effort now has 500 volunteer therapists in 37 states, all offering pro bono therapy sessions to front-line health workers - including physicians, nurses, custodial staff, management, and others.

“Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment, or the smallest act of caring, all of which have the potential to turn a life around.” - Leo Buscaglia

14] [PeerGalaxy](#) - Welcome to our humble beginnings for great destinies

Check out the calendar for lots of online support groups and wellness resources, individual peer supports and educational activities!

Though it is Oregon-centric at this time in the sense that the time zones for events are generally listed in PST (Pacific Time), many of the calendar items are available to people across the country and beyond. Similarly, the COVID-19 resources items generally start with Oregon-specific ones, but many are national and/or international. We are grateful to see its promotion and benefit for as many peers as able and the connections that pass geographic areas are invaluable. Oregon groups are seeing greater participation from people outside of Oregon.

“Love and compassion are necessities, not luxuries. Without them, humanity cannot survive.” - Dalai Lama

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