



Healing the Heart Through the Creative Arts, Education & Advocacy

Hope, Healing & Help for Trauma, Abuse & Mental Health

“Out of suffering have emerged the strongest souls; the most massive characters are seared with scars”. Kahlil Gibran

The Surviving Spirit Newsletter June 2020

Newsletter Contents:

- 1] I desperately miss human touch. Science may explain why. By Diana Spechler, a novelist and essayist @ The Guardian
- 2] Neuroscience Says Doing This 1 Thing Makes You Just as Happy as Eating 2,000 Chocolate Bars by Melanie Curtin @ INC. & Pocket Worthy
- 3] The Coronavirus and Post-Traumatic Growth by Steve Taylor @ Scientific American Blog Network
- 3a] The Leap by Steve Taylor
- 4] Ayron Jones Signs to Big Machine, Releases “Take Me Away” by Macie Bennett @ American Songwriter
- 4a] Ayron Jones - Take Me Away (Lyric Video) – YouTube 4:12 minutes
- 4b] A blast from his past - Ayron Jones & The Way – performing Jimi Hendrix's Little Wing – YouTube
- 5] Intersections of Trauma, Difficult Events & Psychosis - We are asking you to take part in a research study that is called: Trauma, Voices and Beliefs: Exploring the Dynamic Relationship
- 6] Hallucinations Are Everywhere by Joseph Frankel @ The Atlantic
- 7] From Depression to Dementia, Inflammation Is Medicine’s New Frontier by Edward Bullmore @ The Guardian & Pocket Worthy
- 7a] The Inflamed Mind: A Radical New Approach to Depression by Edward Bullmore
- 8] ‘Start Your Workday Mindfully’ meditations led Ruth Colon-Wagner.
- 9] Raising Awareness Through Theater by Phil Hutinet @ Capital Community News
- 10] Living Wage Calculator by Dr. Amy Glasmeier @ MIT

11] Izidor Ruckel, Orphan Advocate

11a] Romanian orphan tries to 'close the chapter' on his troubled past – YouTube 11:04 minutes

11b] Abandoned for Life: The Incredible Story of One Romanian Orphan Hidden From the World : His Life. His Words. by Izidor Ruckel @ Goodreads

11c] The Romanian Orphans Are Adults Now by Melissa Fay Greene @ The Atlantic

12] Brave and Unbroken Podcast - Mike Skinner - Child Abuse Survivor vs. Mentally Ill Labels

12a] Brave and Unbroken - Home Page

13] Manchester couple hopes to bring awareness to impact of fireworks on veterans with PTSD – WMUR News, Manchester, NH

14] Veterans Raise Awareness about PTSD and Fireworks – YouTube 2:25 minutes
KABB Fox San Antonio, TX

1] [I desperately miss human touch. Science may explain why.](#) By Diana Spechler, a novelist and essayist @ The Guardian

For people who live alone, lock-down means ‘touch starvation’ as we go days without hugs, handshakes or other contact

My friend Hannah tells me her therapist said: “A person should be hugged 10 times a day.”

For many of us, that’s now unsafe. It was even unlikely before. Pre-quarantine, I was one of [35.7 million Americans](#) who lived alone. My daily hug average hovered around two. Maybe four. Sometimes zero. I’m not a mom or a girlfriend or a self-identified “hugger”. My last hug transpired in the surreal middle of March, as toilet paper lost all meaning and we learned a foreign language: *N95, PPE, Wuhan, Covid, shelter in place*. States of emergency were declared. I kept misreading “pandemic” as “panic”. I hugged my niece without fanfare.

Now it’s late May. I’m healthy, food-secure, sheltered. Yet I feel a squirmy discomfort, my skin rebelling against its seclusion. When I described the sensation to the neuroscientist Dr Katalin Gothard, she speculated that I could be experiencing withdrawal. “Social touch stimulates the release of opioids and oxytocin in the brain,” she said; without touch, the brain has less oxytocin and fewer endogenous opioids, whose effects are similar to opioid drugs.

Leah Schnelbach, a New York City resident who is 11 weeks into solitary quarantine, told me that her sense of “touch starvation” has become “almost like a physical presence”. She added: “It’s part of my life, it takes up its own space, and I’m trying to live with it like it’s a roommate until I’m able to throw it out.”

Of course, not all touch is welcome. Whether because of sensory issues or a history of trauma or a

simple need for extra space, some people are enjoying the touch reprieve social distancing offers. Many mothers of young children, far from feeling deprived, dream of time without hands on their bodies. And this is to say nothing of domestic violence victims locked down with their abusers.

“In Chile, by cultural norm, women have to greet people with a kiss on the cheek,” Monse Sepulveda, a resident of Santiago, told me. “This is often quite uncomfortable if the man gives us a bad vibe or we have a weird history with him. But now, we don’t have to kiss anyone! I’ve talked about it with many women jokingly, but in all seriousness, it’s quite a relief.”

The touch we’re missing is the soothing kind – a supportive pat on the back, a sincere hug, an empathetic stroke of the arm, a friendly hand squeeze, a lover’s kiss. “Those who are suffering the most right now are those who were already affection-deprived,” Kory Floyd, a communication professor at the University of Arizona who studies personal relationships, told me. “But that population is also more likely to have coping skills. Most people, used to a certain amount of touch, are suddenly without it. Through an evolutionary lens, if we consider how dangerous it once was to be shunned or otherwise separated from the pack, it makes sense that touch-deprivation would register as a threat.”

I suppose that’s why we flail around: We screen-kiss. We adopt dogs. We say “when this is over ...” no matter how many times we’re disabused of the notion. An [article](#) about a woman embracing her great-grandchildren through a “hug time” contraption goes viral. Sales of [teledildonics](#) (smart vibrators) thrive. “Yesterday I held my right hand with my left,” Elisa Díaz Castelo, a poet in Mexico City, told me. “I was trying to remember what it’s like to be touched because I fear I might forget.”

Countless studies prove the necessity of social and emotional touch, both of which, by releasing oxytocin, boost the immune system and lower the heart rate. “Touch is the first emotionally meaningful sense to appear when you’re born,” said Gothard, “and the last to go before you die. The newborn understands touch much better than he understands sight or sound. The elderly lose their vision, their hearing, their balance. But they don’t lose touch.”

The dying relax if their hands are held. Among the angels of the Covid-19 era are the [nurses](#) who offer that very service when families aren’t allowed near the death beds. Such heroism has a precedent: “During the plague of Antonine, which may have killed 5-10 million people between 165 and 180 CE,” historian John Kelly, author of [The Great Mortality](#), told me, “early Christians rushed *to*, not away from, the plague-stricken. They believed in hands-on healing as a noble duty that would earn them ascendance to heaven.” They martyred themselves through touch.

The rest of us turn to fantasy. Gothard notices that when she sees her friends’ kids, she instinctively hugs herself. I struggle to sleep these days without arranging a pillow against my back, clasping another to my chest. “I imagine putting my hand on someone’s arm or putting my hand over theirs or even just sitting shoulder to shoulder with a friend,” said New York City resident Blaise Allysen Kearsley.

Dr Colter Ray, assistant professor of interpersonal and health communication at San Diego State University, said: “When we’re deprived of something we need, our bodies signal us. When we can’t address those signals and meet those needs, we might fantasize. Imagining touch when we don’t have it is like imagining water when we’re thirsty.”

“There are no substitutes,” said Marian Houser, a communication studies professor at Texas State University and co-founder of [Living Mental Wellness](#), “but we have to do what we can right now to stimulate the reward center in the brain. If we don’t feel rewarded, we don’t release serotonin. Without serotonin, we feel unhappy, even depressed.”

Houser suggested adopting a pet, though she acknowledges that cuddling with a dog won’t replace cuddling with a person. “It’s not the same,” she said, “because humans and animals lack a shared understanding of what touch means.” She recommended asking outright for compliments from loved ones, or writing a letter and sending it, or connecting through a video chat, though Gothard warns that Zoom connections won’t suffice: on Zoom, we can’t make eye contact. Looking at the camera creates for the other person the impression of eye contact, but we can’t focus on both the eyes and the camera at once.

I would love to conclude by reporting on which day, at which hour, it will be safe to cup a face between hands, to pluck a loose eyelash from someone’s cheek. But the future remains invisible. What I do see is the absence of fingers on elbows, of arms around waists, of lips on foreheads. I see constant affronts from the “leaders”, from the conspiracy theorists, from the billionaires, from the “protesters” who serve as vectors for the disease they claim to flout. I see the dead and the dying. I see the poor getting poorer, the defenselessness of the already defenseless, the prisoners, the rampant greed, the chilling predictions: *eventually we’ll all get it*. Perhaps what we crave is not just touch – the release of oxytocin, the stimulation of C-tactile fibers – but its embedded and unspeakable message: *it’s going to be OK*.

“And I felt like my heart had been so thoroughly and irreparably broken that there could be no real joy again, that at best there might eventually be a little contentment. Everyone wanted me to get help and rejoin life, pick up the pieces and move on, and I tried to, I wanted to, but I just had to lie in the mud with my arms wrapped around myself, eyes closed, grieving, until I didn’t have to anymore.” - Anne Lamot

“I’ve learned that people will forget what you said, people will forget what you did, but people will never forget how you made them feel.” - Maya Angelou

2] [Neuroscience Says Doing This 1 Thing Makes You Just as Happy as Eating 2,000 Chocolate Bars](#) by Melanie Curtin @ INC. & Pocket Worthy

It also gives you the same neurological boost as receiving \$25,000.

Wanting to be happier is a universal trait. It's rare to find a person whose reply to, "How would you like to feel today?" is, "Morose, please."

The scientific study of happiness (aka positive psychology) has mushroomed over the last two decades. Major research institutions have taken on substantial and often thought-provoking forays into the joy of joy, with surprising and often enlightening results.

One such study took place in the UK, where researchers used electromagnetic brain scans and heart-rate monitors to generate what they called "mood-boosting values" for different stimuli. In other words, they had participants do, look at, or listen to different things, and measured how happy it made them.

One thing trumped all else. It emerged as giving participants the equivalent level of brain stimulation as up to 2,000 chocolate bars. It was just as stimulating as receiving up to \$25,000. What was this magic stimulus?

A smile.

Smiling, as it turns out, has truly remarkable effects. First, doing it actually makes you feel good even if you're not feeling good in the moment. A 2009 [fMRI study](#) out of Echnische Universität in Munich demonstrated conclusively that the brain's happiness circuitry is activated when you smile (regardless of your current mood). If you're down, smiling actually prompts your brain to produce feel-good hormones, giving credence to the adage, "fake it til you make it" when it comes to your state of mind.

Smiling is also a predictor of longevity. In a 2010 out of Wayne State University, researchers looked at Major League baseball card photos from 1952. They found that the span of a player's smile actually predicted his lifespan - unsmiling players lived 72.9 years on average, while beaming players lived a full seven years longer.

Similarly, a 30-year longitudinal study out of UC Berkeley examined the smiles of students in an old yearbook, with almost spooky results. The width of students' smiles turned out to be accurate predictors of how high their standardized tests of well-being and general happiness would be, how inspiring others would find them, even how fulfilling their marriages would end up. Those with the biggest smiles came up on top in all the rankings.

Finally, [research](#) demonstrates that when we smile, we look better to others. Not only are we perceived as more likable and courteous, but those who benefit from our sunny grins actually see us as more competent (something to keep in mind while giving presentations or interacting in the office).

Want to know where you stack up when it comes to smiling? Know this: under 14% of us smile fewer than 5 times a day (you probably don't want to be in that group). Over 30% of us smile over 20 times a day. And there's one population that absolutely dominates in the smile game, clocking in at as many as 400 smiles a day: children.

So there you have it: smiling makes you feel good, makes you look good, and gets you a better marriage in the end.

Seems like something to smile about.

"Kindness in words creates confidence. Kindness in thinking creates profoundness. Kindness in giving creates love." - Lao Tzu

"Nothing on earth consumes a man more completely than the passion of resentment." - Friedrich Nietzsche

3] [The Coronavirus and Post-Traumatic Growth](#) by Steve Taylor @ Scientific American Blog Network

Surviving an awful experience can lead to some surprisingly positive psychological effects in many people

On March 6, 1987, a ferry traveling from England to Belgium capsized, causing the death of 193 people. In the months after the disaster, many of the approximately 300 survivors suffered symptoms of post-traumatic stress disorder, including upsetting dreams; anxiety; emotional detachment and numbness; and difficulties with sleep and concentration.

However, in time, some of the survivors reported some surprising positive effects. Three years after the disaster, psychologist Stephen Joseph, then a Ph.D. student, carried out a survey which found that, although PTSD was still common (albeit with diminished symptoms), 43 percent of the survivors reported that their view of life had changed for the better. They reported that they no longer took life for granted, that they valued their relationships more, that they lived each day to the full, that they felt more experienced about life, and so on.

This was one of the first studies of a concept which has become very important in psychology in recent years: post-traumatic growth.

Post-traumatic growth (or PTG) is the idea that, in the long run, traumatic events and experiences—like illness, accidents, bereavement, addiction and divorce—can have beneficial effects. Often, after the initial shock and pain of a traumatic situation has faded away, people report feeling more appreciative of their lives, and sensing a new inner strength and confidence. They feel that their relationships are more intimate and authentic, and that they have a new sense of meaning and purpose. They often become less materialistic and more altruistic, more concerned with the well-being of others than with their own success and status. They develop a more philosophical or spiritual attitude to life, with—in the words of Richard Tedeschi and Lawrence Calhoun, two of the pioneers of the theory of PTG—a “deeper level of awareness.”

Overall, it appears that nearly half of people who experience such traumatic events are likely to experience PTG in the aftermath.

POST-TRAUMATIC TRANSFORMATION - Over the last 10 years or so, my own research has focused on what I call post-traumatic transformation. I have found that psychological turmoil and trauma may not simply bring about growth, but a dramatic transformation. After a period of intense suffering (such as a diagnosis of cancer or a long period of depression or addiction), a person may undergo a sudden shift of identity.

All of a sudden, they feel like a different person inhabiting the same body, with heightened sensory awareness, an increased sense of compassion and connection, and new values or goals. For example, a woman who experienced post-traumatic transformation after the death of her daughter told me that she felt like she had broken through “to another state. I’ve moved up to another level of awareness which I know is going to stay with me.”

As I showed in my book [*The Leap*](#), many people could specify a particular moment at which transformation occurred, often at the moment when they shifted into an attitude of acceptance of their predicament. For example, a man told me how, as an alcoholic undergoing the Alcoholics Anonymous recovery process, he experienced transformation at the moment when he “handed over” his problem. Another person had become severely disabled and underwent a shift at the point when he heard an inner voice say, “Let go, man, let go. Look at how you’re holding on. What do you think life’s telling

you?” A woman who went through a period of intense postnatal depression, entering into a psychotic state, which led to four nights without sleep. In the midst of this turmoil, she had an argument with her husband, which suddenly triggered what she described as “feelings of such perfect joy and peace. I remember thinking afterward ‘so that’s what I’m supposed to feel like!’ Within that one instant, you are forever changed.”

TRANSFORMATION OF COMMUNITIES - However, post-traumatic growth (and post-traumatic transformation) can happen to *groups and communities*, as well as to individuals.

When a crisis occurs in a community (such as a war or a natural disaster), people often react by becoming more interconnected. They become friendlier, more cooperative and altruistic. People feel a common sense of purpose, and a spirit of cooperation begins to replace normal competitiveness. For the community, this often equates to a kind of post-traumatic growth. The whole community shifts into a higher level of integration. It’s as if, rather than existing as isolated individuals, people fuse together into a whole. One study showed evidence of collective post-traumatic growth after natural disasters such as earthquakes and floods. In these situations, people developed communal coping strategies and had more collective gatherings.

I witnessed this phenomenon about three years ago, following a terrorist attack in my home city of Manchester, England (in which 23 people died, when a man detonated a homemade bomb at a train station). In the days and weeks after the attack, there was a strong sense of togetherness. People were talking more and helping each other more. Different ethnic groups were interacting more. Barriers and boundaries seemed to fall away. There was a sense of trust and empathy in the community. Of course, the sense of togetherness began to wane, but I don’t think it has faded away completely. I think the event brought about a new kind of integration that is still present today, at least to a degree.

PTG AND THE CORONAVIRUS - This doesn’t always happen of course. Sometimes crises can have the opposite effect, and lead to a kind of post-traumatic stress, in which social bonds fall away and people become more selfish and individualistic. Perhaps communal post-traumatic growth following a crisis is roughly as common as individual PTG.

However, my feeling is that post-traumatic growth will be one of the aftereffects of the coronavirus epidemic. Many of us will surely undergo individual growth (and perhaps even transformation). In the midst of the suffering and challenge of our present predicament, we may develop a heightened sense of appreciation, more authentic relationships, and a new sense of resilience and confidence. We may slow down and learn to live in the present rather than filling our lives with incessant activity and constantly rushing into the future.

But we will surely undergo some degree of communal growth as well. In the United Kingdom, there are signs that this is happening already. People appear to be valuing each other more, appreciating the different contributions we are making and letting go of grievances and disagreements. Despite social distancing, we appear to be feeling more empathy for each other and acting more altruistically. In Manchester, I can sense the same spirit of togetherness that arose after the terrorist attack.

But perhaps post-traumatic growth will occur at an even higher level too—that is, at a global level. One of the most salient aspects of the virus is its global nature. It reminds us that we are one species, and that

differences of nationality, ethnicity and religion are meaningless labels. We are all in this together, and we will only overcome the crisis through cooperation. Conflict and competition will only lead to more suffering and discord.

During a time of increasing individualism, in which many governments have been taken over by narcissistic and sociopathic autocrats intent on asserting their own individual power and identity, post-traumatic growth up to the global level is precisely what the world needs.

When this is all over, we may find that we are stronger and closer to each other than before.

The views expressed are those of the author(s) and are not necessarily those of Scientific American.

[Steve Taylor](#), PhD, is a senior lecturer in psychology at Leeds Beckett University. He is the author of [Spiritual Science: Why Science Needs Spirituality to Make Sense of the World](#).

3a] [The Leap by Steve Taylor](#)

Description - What does it mean to be enlightened or spiritually awakened? In *The Leap*, Steve Taylor shows that this state is much more common than is generally believed. He shows that ordinary people - from all walks of life - can and do regularly “wake up” to a more intense reality, even if they know nothing about spiritual practices and paths. Wakefulness is a more expansive and harmonious state of being that can be cultivated or that can arise accidentally. It may also be a process we are undergoing collectively. Drawing on his years of research as a psychologist and on his own experiences, Taylor provides what is perhaps the clearest psychological study of the state of wakefulness ever published. Above all, he reminds us that it is our most natural state - accessible to us all, anytime, anyplace.

Reviews - “Life always gives you what you need, and right now it has given you this book to use as a guide or companion through challenging times. It contains a great deal of precious wisdom, expressed in the straightforward, clear, and down-to-earth language that Steve Taylor is so good at.”

- from the foreword by Eckhart Tolle, author of [The Power of Now](#) and [A New Earth](#)

“A human being is a part of the whole called by us universe, a part limited in time and space. He experiences himself, his thoughts and feeling as something separated from the rest, a kind of optical delusion of his consciousness. This delusion is a kind of prison for us, restricting us to our personal desires and to affection for a few persons nearest to us. Our task must be to free ourselves from this prison by widening our circle of compassion to embrace all living creatures and the whole of nature in its beauty.” - Albert Einstein

“You never find yourself until you face the truth.” - Pearl Bailey

4] [Ayron Jones Signs to Big Machine, Releases “Take Me Away”](#) by Macie Bennett @ American Songwriter

Rock singer and guitarist Ayron Jones hasn't had an easy life. He was a foster child under the state by the age of four and was left to deal with his parents' addictions which pegged lifelong issues of abandonment for Jones. With neglect and betrayal lingering on him, Jones turned his frenzied past into a bright future as a rock artist.

Today, the Seattle born-and-bred musician releases his first single as a signed artist. “Take Me Away” is a song built on those same memories and abandonment that Jones was forced to confront at such a young age. And instead of writing a downtrodden, sob-story, Jones wanted to give kids that are suffering his same childhood fate, an anthem to escape in.

“The lyrics were kind of born out of this almost never-ending echo in my life that has to do with some of the abandonment I faced as a child and how that has had an impact on relationships and how I navigate my life,” Jones told *American Songwriter*. “And on top of that, is discovering different realities of being a black American, touring, and coming into contact with those obstacles.”

“I was looking to write a song that would almost be an anthem,” he added. “I want little kids, brown kids in the hood, white kids in the hood, people who have been disparaged in this country, to feel something and relate to the song.”

Equipped with the best players he could round up from Seattle’s local scene and some well-known artists as well, he was able to conceptualize the song. Recorded and produced by Eric Lilavois at London Bridge Studio in Seattle, Jones recruited bassist Bob Lovelace, Andrew Joslyn for strings, drummer Barrett Martin of the Screaming Trees and local singer Scarlett Park.

“It was cool to bring in some local names but then go all the way to the top and I think it’s what makes the track so special. I couldn’t have asked for any better,” Jones said.

Jones’ position to be a voice for disadvantaged people and young kids, is rooted in his deep connection to music and what he described as his way out.

“Music has been my saving grace,” he said. “It’s been my wings. It’s hard to get out of situations you don’t have control over, especially just average people trying to make it day by day with three or four jobs, just trying to live. Music was my way to break out of that cycle and inspire others to do the same.”

Jones remembered always being inspired and affected by music in those same ways. Growing up in Seattle, a major hub for rock and ground zero for grunge, he was always involved in arts and music, but his journey into professional music started when he was 19. His path was illuminated with his opportunity to work with artist Janelle Monae’s Wondaland, a project he witnessed from the ground up and recalled as a huge inspiration.

After this experience, Jones quickly figured out music was what he wanted to do. He began gigging anywhere that had a stage and branding a name for himself, which would ultimately lead him to great heights and many shots to work alongside some of rock and pop’s biggest figures.

“To make a name for myself, I just played as much as possible. I picked up every single gig I could. First time I stepped on stage; I was 21 and played at a blues club. Ever since that moment I was trying to play all the time. And once I figured out what I wanted to sound like, I put out an independent album in 2013, that I worked with Sir Mix-a-Lot on. It was my first album and really got the word out.”

Quickly gaining acclaim among circles, Jones went on to release a second independent album in 2017

with Screaming Trees' drummer Barrett Martin. The collaboration would go on to develop into a worthwhile friendship and working relationship in music, allowing Jones to open for Guns N Roses, BB King, Jeff Beck and others.

“That opened a bunch of doors for me because Barrett Martin was in the grace of members of Guns N Roses, Duff McKagan and people that were just really into the grunge scene,” Jones said. “My indie career was very successful and kind of got me the right attention of Big Machine/John Varvatos Records.”

Forging a new relationship with his label, Jones says the journey so far has been “wonderful,” and has made his creative process run much smoother, now that he has more support and can get his music out to the world.

“It’s a good feeling and a blessing,” Jones said about the deal. “Starting out doing this, you don’t really know where you’re going to end up, but you know where you want to go.” Jones’ fierceness has led him exactly there, now gearing up to release his first full-length under Big Machine/John Varvatos Records, a sizeable experience that has been piloted by “Take Me Away.” The single and accompanying lyric video to the track is out today and you can expect to catch Jones’ next full-length soon.

4a] [Ayron Jones - Take Me Away \(Lyric Video\) – YouTube](#) 4:12 minutes

4b] A blast from his past - [Ayron Jones & The Way – performing Jimi Hendrix's Little Wing](#) – YouTube

*“Music was my refuge. I could crawl into the space between the notes and curl my back to loneliness.”
- Maya Angelou*

“After silence, that which comes nearest to expressing the inexpressible is music.” - Aldous Huxley

5] [Intersections of Trauma, Difficult Events & Psychosis](#) - We are asking you to take part in a research study that is called: Trauma, Voices and Beliefs: Exploring the Dynamic Relationship. The investigators in charge of this research study are Dr. Nev Jones and Shannon Pagdon in collaboration with Dr. Cherise Rosen.

Interested in helping build our understanding of the complex intersections between trauma or difficult events and what is conventionally labeled psychosis? The ways in which providers respond to these intersections and impact of these responses?

Consider participating in a service user led online survey: 'Experiences of the Intersections of Psychosis, Difficult Events & Trauma'

Why conduct this study: We know that difficult or traumatic experiences are a major risk factor for psychosis, that the onset of psychosis can itself be experienced as traumatic, and that the form or content of the experience of psychosis can also be distressing. However the relationships between these experiences, from the perspective of those with first-hand experience, have not been well researched.

What is involved if you participate: Researchers at the University of South Florida invite participation in a collaboratively developed online research survey on the above topics. The survey takes

approximately 15 minutes to complete and responses are completely anonymous.

Who is eligible: Anyone 18 years of age or older and who self-identifies as having current or prior experiences that would conventionally be labeled psychosis is free to participate.

Benefits and risks: We are unsure if you will receive any benefits by taking part in this research study. This research is considered to be minimal risk.

Compensation: Every 10th participant in the survey will be compensated with a \$50 gift card, up to 5 gift cards.

Contact Information: If you have any questions, please contact the primary investigator, Dr. Nev Jones at genevra@usf.edu.

“No person is your friend who demands your silence, or denies your right to grow.” - Alice Walker

“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

6] [Hallucinations Are Everywhere](#) by Joseph Frankel @ The Atlantic

Experiences like hearing voices are leading psychologists to question how all people perceive reality.

There's a good chance you've hallucinated before.

If you've ever felt the buzz of your phone against your thigh only to realize the sensation was entirely in your head, you've had a sensory perception of something that isn't real. And that, according to the psychologist Philip Corlett, is what makes a hallucination.

To many, this definition may seem shockingly broad. Hallucinations were long considered the stuff of psychoses or drug trips, not a regular and inconsequential part of life. But Corlett operates on the idea that hallucinations exist within a hierarchy. At the highest level, according to Corlett's collaborator Albert Powers, they would be something like hearing “whole sentences of clearly spoken speech of a being who seems quite real.” But, moving further down the line, hallucinations can be far more banal: an imagined text message, a phantom raindrop, a new parent's mistaken sense of her child by her bedside.

This hierarchy perspective represents an ongoing revelation in how widespread and varied hallucinations can be. A survey in the early 1990s found that 10 to 15 percent of the population of the United States experienced vivid [sensory hallucinations](#) at some point in their lives. And scientists have [begun to take seriously](#) the idea that voice hearing and other forms of auditory hallucination can be benign or “nonclinical.” This newfound ubiquity has come with a host of questions. Why is it so common for people to perceive what isn't there, and how does the brain allow this to happen in the first place? To find answers, researchers have turned to the mechanics of how we perceive reality itself.

For Corlett and Powers, both from the Yale School of Medicine, hallucinations have everything to do with expectations. In a paper in [Science](#), they explore how the mysterious experiences fit into a larger,

speculative idea about how the brain works - and, in a sense, what the brain is. The pair recounts a [2017 study](#) they conducted, in which their group tried to induce hallucinations both in people who commonly report hallucinations across the psychotic spectrum and in people who don't normally hallucinate. The participants were taught to expect to hear a tone after being shown a flashing light, and then were made to press a button when they thought they heard a tone. They were told to hold down the button longer to rate their confidence in what they heard. People who regularly hallucinate held the button - that is, they hallucinated - significantly longer than those who don't.

Corlett and Powers see this experiment as evidence for their perspective on how people understand the world around them. By their way of thinking, the brain works by “predictive coding”: integrating new information based on the beliefs built on old information. “When we go about the world, we're not just passively perceiving sensory inputs through our eyes and ears,” Corlett says. “We actually build a model in our minds of what we expect to be present.”

This mental setup works great for allowing us to move smoothly through the world, taking in each detail without a second thought. But sometimes, Corlett and Powers say, the brain has the capacity to overpredict: It can expect something that isn't there, and this expectation can be so strong that we actually perceive the nonexistent thing. Thus, a hallucination.

The idea of predictive coding is part of a way out of a knotted, overlapping, and sometimes competing lineage of trying to explain hallucinations. Another model, inner-speech theory, was [popularized](#) in part by the writings of the 20th-century psychologist Julian Jaynes. It holds that people who hear voices are really hearing their own thoughts that feel like someone else's. This explanation has been propped up more recently by corollary-discharge theory, which states that the body's tracking of its boundaries and actions (the neural machinery that makes your arm feel like your arm and your foot feel like your foot) fails for the thoughts and voices of people with psychotic disorders who experience auditory hallucinations.

“We're still working to see how our model fits in with those models,” Corlett says.

This quest for a leg to stand on in researching hallucinations has yielded some theatrical—and sometimes even poetic - experiments. In [his book](#) on the science and history of auditory hallucinations, Charles Fernyhough, a psychologist at Durham University, tells how a psychiatrist in the '40s found that as a group of people with schizophrenia hallucinated voices, muscles [in their throats](#) responsible for speech would twitch along with the words they heard. The voices seemed to be their own words hidden elsewhere.

Decades later, researchers recorded the voices of hallucinators with psychotic disorders and presented these subjects with electronically distorted copies. They wanted to see if the hallucinators could identify their own distorted voices. In the same vein, researchers [have explored](#) using computerized avatars à la [Second Life](#) in the past decade to try and help hallucinating psychotics assign their “presumed persecutors” a face to talk to, with the goal of softening the things these voices said to them.

Corlett also pointed me toward [sine-wave speech](#), a particularly stunning example of the way expectation can seem to shape our reality when it comes to language. You can try it yourself: Listen to this [sound](#) (don't turn your volume too loud). Most people will hear an R2-D2-like swell of vocoder-tinged whistling. Next, listen to [this recording](#) of a woman saying, “It was a sunny day, and the children

were going to the park,” in a soothing, southern English accent. Now [try R2-D2](#) again. Listening to the whistling sine-wave speech, you’ll likely hear a distorted version of the same “sunny day” sentence. And in all likelihood, you won’t be able to un-hear the words in the first recording now.

Hallucinators may have an easier time parsing the R2-D2-like sounds, even before listening to the other recording. In a 2017 study, nonclinical voice hearers were far better at recognizing the presence of a voice in [sine-wave speech](#) than their non-voice-hearing counterparts. And as a group, their brains fired along a pattern distinct from those who couldn’t tell that the sine-wave speech was a voice. This example, Corlett says, builds the case that auditory hallucinations are linked to the processes of expectation and prediction.

Still, Fernyhough points out, there are some potential holes in the idea of predictive coding. “Compared to the conventional view of the brain as a device that processes information coming from the environment, predictive coding starts with a different set of assumptions about how the brain makes predictions about what is in the environment and then learns from them,” he said. And that can make it hard to reconcile with other, more established ways of looking at the brain.

Corlett, meanwhile, argues that there’s a gap in inner-speech theory. Citing a study in which people rendered mute from birth [reported](#) hearing voices in their heads, he says that the phenomenon can’t be completely explained as the brain misreading itself.

Whatever explanations stand the test of time, the stakes of this science are much higher than understanding why many of us imagine text messages. For some people, hallucinations can be more persistent and disturbing. The science of how these hallucinated touches, sounds, and sights manifest in the mind is still unclear. It’s too early to say how much the causes of auditory hallucinations and other kinds might overlap, Fernyhough says. So far, the research has focused on auditory hallucinations. And to many, the need for that work is quite clear. [Eleanor Longden](#), a mental-health researcher and advocate, has publicly recounted how her own auditory hallucinations have shifted between neutral and distressing at different points in her life. She’s made the case that the social stigma and judgment she received from her doctor at the time made them more negative.

“Hallucinations can be very distressing and debilitating. They can also be neutral or positive,” Fernyhough says. “A better understanding of how they occur and how they can be managed could alleviate a great deal of mental distress.”

“I want to say when I was little, like Maleficent, I was told I was different. And I felt out of place and too loud, too full of fire, never good at sitting still, never good at fitting in. And then one day I realized something – something I hope you all realize. Different is good. When someone tells you that you are different, smile and hold your head up and be proud.” – Angelina Jolie

“By being yourself you put something wonderful in the world that was not there before.” – Edwin Elliott

7] [From Depression to Dementia, Inflammation Is Medicine’s New Frontier](#) by Edward Bullmore @ The Guardian & Pocket Worthy – *Stories to fuel your mind*

The barrier between mind and body appears to be crumbling. Clinical practice and public perception

need to catch up.

Unlikely as it may seem, #inflammation has become a hashtag. It seems to be everywhere suddenly, up to all sorts of tricks. Rather than simply being on our side, fighting infections and healing wounds, it turns out to have a dark side as well: the role it plays in causing us harm.

It's now clear that inflammation is part of the problem in many, if not all, diseases of the body. And targeting immune or inflammatory causes of disease has led to a series of breakthroughs, from new treatments for rheumatoid arthritis and other auto-immune diseases in the 1990s, through to the advent of immunotherapy for some cancers in the 2010s. Even more pervasively, low-grade inflammation, detectable only by blood tests, is increasingly considered to be part of the reason why common life experiences such as poverty, stress, obesity or ageing are bad for public health.

The brain is rapidly emerging as one of the new frontiers for inflammation. Doctors like myself, who went to medical school in the 20th century, were taught to think that there was an impermeable barrier between the brain and the immune system. In the 21st century, however, it has become clear that they are deeply interconnected and talk to each other all the time. Medical minds are now opening up to the idea that inflammation could be as widely and deeply implicated in brain and mind disorders as it is in bodily disorders.

Advances in treatment of multiple sclerosis have shown the way. Many of the new medicines for MS were designed and proven to protect patients from brain damage caused by their own immune systems. The reasonably well-informed hope – and I emphasise those words at this stage – is that targeting brain inflammation could lead to breakthroughs in prevention and treatment of depression, dementia and psychosis on a par with the proven impact of immunological medicines for arthritis, cancer and MS. Indeed, a drug originally licensed for multiple sclerosis is already being tried as a possible [immune treatment](#) for schizophrenia.

Is that hope realistic for depression? It is beyond reasonable doubt that inflammation and depression are correlated with each other – or [comorbid](#), to use some unlovable but important medical jargon. The key scientific questions are about causation, not correlation. Does inflammation cause depression? And, if so, how? One experiment that scientists have designed to tackle these questions is to do two functional MRI brain scans, one before and one after an inflammatory response has been [deliberately provoked](#) by the injection of typhoid vaccine. If there's a difference in the two scans, that shows that bodily inflammation can cause changes in the way the brain works; if not, that would be a problem for the theory that inflammation can cause depression.

A recent meta-analysis reviewed data from 14 independent versions of this [experiment](#). On average, the data showed a robust effect of inflammation on brain activity. These results confirmed that bodily inflammation can cause changes in how the brain works. Encouragingly, they also localised the effect of inflammation to particular parts of the brain that were already known to be involved in depression and many other psychiatric disorders.

If inflammation can cause depression then anti-inflammatory drugs should work as antidepressants. Several [studies](#) have reviewed clinical trial data on thousands of patients treated with anti-inflammatory drugs for arthritis and other bodily disorders that are commonly associated with depressive symptoms. Overall, patients treated with anti-inflammatory drugs, rather than a placebo, had significantly

improved mental health scores. However, there is a caveat. The largest and most rigorous of these studies were designed to test drug effects on physical health and that makes it difficult to interpret the results too strongly as proof of beneficial effects on mental health.

The next step is to run studies designed from the outset to test new anti-inflammatory drugs as antidepressants, or to test existing antidepressants for anti-inflammatory effects. In doing so, we must avoid repeating one of our most habitual mistakes about depression, which is thinking that it's all one thing, always with the same root cause. So we shouldn't be looking for the next "blockbuster" that can be automatically prescribed to make the whole world happier. We should be looking for ways to match the choice of treatment to the cause of psychiatric symptoms on a more personalised basis. And using blood tests to measure inflammation could help us to make those choices.

For example, a consortium funded by the Wellcome Trust has just [started a trial](#) of a new anti-inflammatory drug for depression. It is one of the first antidepressant trials ever to use blood tests to screen for inflammation in potential participants. If the blood tests show no evidence of inflammation then patients will not be recruited into the trial, because if they are not inflamed, there is no reason to think they will benefit from anti-inflammatory treatment.

An alternative example might be ketamine, [a form of which has just been licensed in the UK for treatment of depression](#). It works by blocking a receptor for glutamate in the brain but it doesn't work equally well for everyone. We know that inflammation can increase the amount of glutamate in the brain, so it's predictable that more inflamed patients might be more responsive to the glutamate-blocking effects of ketamine. In future, we might use blood tests or biomarkers of inflammation to predict which depressed people are most likely to benefit from ketamine.

The therapeutic scope of these new insights is potentially bigger than depression or drugs. The pharmaceutical and biotech industry is invested in testing anti-inflammatory drugs for Alzheimer's and Parkinson's disease. There is also interest in the role of diet, obesity, stress, gum disease, the gut microbiome and other risk factors in low-grade inflammation that could be controlled without drugs. There are now dozens of studies measuring the anti-inflammatory effects of psychological interventions, such as meditation or mindfulness, or lifestyle management programmes, diets or exercise regimes.

My personal favorite is an American trial to test the idea that low-grade inflammation can accelerate cognitive impairment with ageing, and that cleaning our teeth more carefully can control low-grade gum inflammation (periodontitis) and thus [protect us](#) from senility as we grow older. This trial is still ongoing so the results are not yet known. But I like the thinking behind it. Who would have thought that a brighter smile and a better short-term memory could be so directly connected? And, ideally, attainable by an intervention as simple and scalable as a toothbrush?

All of this gives us an interesting new perspective on how body, brain and mind are related to each other. And that could be important in thinking about how we scientifically design and deliver the most effective physical and mental healthcare systems for the future. This is vital at a time when mental health disorders and dementia account for a growing proportion of global disability, and health and social care costs.

Currently, physical and mental health services are sharply segregated, reflecting a philosophical

prejudice against viewing the mind and body as deeply intertwined. The links that many patients recognise in their own experience of illness tend to be somewhat discounted by the standard NHS provision of mental or physical healthcare services. In contrast, the new science of inflammation and the brain is clearly aligned with arguments for breaking down these barriers in clinical practice. More than that, though, it has the potential to transform our thinking about illness more broadly. The barrier between mind and body, for so long a dogmatic conviction, appears to be crumbling.

Professor Edward Bullmore heads the department of psychiatry at Cambridge University. He is the author of “The Inflamed Mind.”

7a] [The Inflamed Mind: A Radical New Approach to Depression](#) by Edward Bullmore

Worldwide, depression will be the single biggest cause of disability in the next 20 years. But treatment for it has not changed much in the last three decades. In the world of psychiatry, time has apparently stood still... until now. In this game-changing book, University of Cambridge Professor Edward Bullmore reveals the breakthrough new science on the link between depression and inflammation of the body and brain. He explains how and why we now know that mental disorders can have their root cause in the immune system, and outlines a future revolution in which treatments could be specifically targeted to break the vicious cycle of stress, inflammation and depression. The Inflamed Mind goes far beyond the clinic and the lab, representing a whole new way of looking at how mind, brain and body all work together in a sometimes misguided effort to help us survive in a hostile world. It offers insights into the story of Western medicine, how we have got it wrong as well as right in the past, and how we could start getting to grips with depression and other mental disorders much more effectively in the future.

“Take care not to listen to anyone who tells you what you can and can’t be in life.” – Meg Medina

“Community service gives me a valuable opportunity to walk into a different community that is less familiar to me but just as colorful and most importantly, in need.” – Caroline Landry

8] [‘Start Your Workday Mindfully’](#) meditations led Ruth Colon-Wagner.

June 19, 2020 sharing of [Mindfulness](#) @ YouTube with Ruth Colon-Wagner.

NYAPRS Note: During these very stressful times with so much anxiety, distraction and mindless chatter, please take 5 minutes this morning to experience a grounding, peaceful and focusing experience by going to our homepage and click the link to take in our daily ‘Start Your Workday Mindfully’ meditation led by our own Ruth Colon-Wagner.

[Start Your Workday Library for past recordings](#) – PDF

New York Association of Psychiatric Rehabilitation Services, Inc. [NYAPRS] is a statewide coalition of people who use and/or provide recovery oriented community based mental health services. We value difference and promote cultural competence in all aspects of our work.

NYAPRS is dedicated to improving services and social conditions for people with psychiatric disabilities or diagnoses, and those with trauma-related conditions by promoting their recovery,

rehabilitation and rights so that all people can participate freely in the opportunities of society.

“The place of true healing is a fierce place. It’s a giant place. It’s a place of monstrous beauty and endless dark and glimmering light. And you have to work really, really, really hard to get there, but you can do it.” - Cheryl Strayed

“Healing takes courage, and we all have courage, even if we have to dig a little to find it.” - Tori Amos
9] [Raising Awareness Through Theater](#) by Phil Hutinet @ Capital Community News

A new production at the Anacostia Playhouse titled *Dinner at Tuesday’s* sheds light on critical issues facing a growing senior citizen population. Focusing on domestic violence and prescription drug abuse within this segment of society, Ward 8 resident Sharon Wise found inspiration for writing the play by pulling from the deep well of her life experiences. Wise’s life experiences have ranged from surviving child-abuse, addiction and chronic homelessness to flourishing as a counselor, behavioral expert, mental health advocate, visual artist and now a playwright and actress.

A Painful Beginning -Wise had a precarious start to life having suffered sexual abuse at the unimaginable age of five. “At five years old I was describing that I was being abused. People thought I had a mental illness which is what it may have been because I was experiencing trauma. Trauma is something you carry inside you,” Wise explains.

At nine, the Chicago native began to run away from a home filled with violence and discord. She ate scraps she found at outdoor cafés, slept under bridges and in abandoned cars. By 18 Wise had two children and continued to live on the streets all the while beginning a downward spiral of self-medication through substance abuse to cope with her pain. Wise was institutionalized 15 times in either hospitals or jails because of her addiction to drugs and alcohol and three suicide attempts.

Recovery through Art - Wise came to DC in 1990 and continued to live on the streets. At the nonprofit My Sister’s Place, Wise had the chance to begin anew, become sober and start her life on a solid footing with art playing a central role in Wise’s recovery. Wise puts it plainly, “Art saved my life.”

“It was negative, but what happened to me was expressed through my art.” Drawing allowed Wise to simultaneously express both her pain and to describe what had happened to her as a child while coming to terms with her adolescence “my vibrant colored self-portraits illustrate my traumatic experiences and journey.”The importance of “visual language,” as Wise calls it, allows her to understand trauma in both herself and in others. Her self-taught fluency in this form of communication is a gift which facilitates counseling others and interpreting horrific, traumatic experiences that do not conform naturally to verbal expression.

In addition to excelling as a prolific visual artist, Wise has completed a Master’s degree and is currently pursuing a Ph.D. in developmental psychology. But Wise has not stopped there. She now seeks to use play-writing as a means to educate others about mental health and societal problems.

Playwriting for Social Change - “I wrote a play three years ago called meet me on the moon which was performed at THEARC,” says Wise. The success of the production led Wise to continue on this path. True to form, Wise uses theater to impart important information about difficult topics such as

substance abuse or physical abuse. She conveys in universal terms the impact these experiences have on people's mental health and the toll they take on the individual level.

This year, Wise has written a play titled *Dinner at Tuesday's* which focuses on domestic violence in aging populations. Wise explains "I use role play, social theater to communicate a message." In addition to writing and producing the play, Wise will play the role of Constance Tuesday, the protagonist.

Wise believes that difficulties seniors face often derive from a lack of financial resources including access to proper health care and social services. In addition to touching upon the perils of prescription medication abuse, Wise's play also focuses the societal stigma placed on seniors who seek new love interests after the death of a lifelong partner.

In *Dinner at Tuesday's*, Constance Tuesday - a "young 64 year old" as Wise puts it - now lives with her sister Nadine Strong after years of living apart and independently from one another. Constance begins a relationship with Percival, a neighbor whom Wise describes as a "player." Constance doesn't want her sister to know that she and Percival are dating. To complicate matters, the relationship takes an abusive turn as Percival sometimes hits Constance who rationalizes his behavior as victims of violence often do. Everything comes to a head at a dinner when Nadine can no longer hold her tongue and passes judgment on her sister decrying a relationship she believes is dangerous.

For Wise, "The inspiration for this play is didactic. It's like show and tell." Wise believes seniors can still be sensuous and sexy and that we, as a society, should begin to reassess our perceptions of them.

The cast includes Sharon Wise as Constance, Jeremy Jay Sams as Percival and Sharon Coffee as Nadine. Mercedes Webb is the co-director and stage manager, Nancy Ingles provides support and wardrobe. Adele Robey, Executive Director of the Anacostia Playhouse, also offered extensive support to Wise for the realization of this play

Dinner at Tuesday's is Sunday, April 10, 2016 from 5:00 p.m.-6:30 p.m.; Anacostia Playhouse, 2020 Shannon Place SE | Free Parking on street and lot. Tickets for individuals and groups: \$15 (advance) or \$20 at the door. Proceeds from this event support efforts to start an art school in Rwanda and the Congo. For more information go to www.anacostiaplayhouse.com.

Phil Hutinet is the publisher of East City Art, a publication dedicated to DC's visual arts. For more information visit www.eastcityart.com.

"The final stage of healing is using what happens to you to help other people." - Gloria Steinem

"If someone thinks that peace and love are just a cliché that must have been left behind in the 60s, that's a problem. Peace and love are eternal." - John Lennon

10] [Living Wage Calculator](#) by [Dr. Amy Glasmeier](#) @ MIT

Families and individuals working in low-wage jobs make insufficient income to meet minimum standards given the local cost of living. We developed a living wage calculator to estimate the cost of

living in your community or region based on typical expenses. The tool helps individuals, communities, and employers determine a local wage rate that allows residents to meet minimum standards of living.

[Select a Location](#) – Please visit the website to enter your state and county.

Introduction - Analysts and policy makers often compare income to the federal poverty threshold in order to determine an individual's ability to live within a certain standard of living. However, poverty thresholds do not account for living costs beyond a very basic food budget. The federal poverty measure does not take into consideration costs like childcare and health care that not only draw from one's income, but also are determining factors in one's ability to work and to endure the potential hardships associated with balancing employment and other aspects of everyday life. Further, poverty thresholds do not account for geographic variation in the cost of essential household expenses.

The living wage model is an alternative measure of basic needs. It is a market-based approach that draws upon geographically specific expenditure data related to a family's likely minimum food, childcare, health insurance, housing, transportation, and other basic necessities (e.g. clothing, personal care items, etc.) costs. The living wage draws on these cost elements and the rough effects of income and payroll taxes to determine the minimum employment earnings necessary to meet a family's basic needs while also maintaining self-sufficiency.

The living wage model generates a cost of living estimate that exceeds the federal poverty thresholds. As calculated, the living wage estimate accounts for the basic needs of a family. The living wage model does not include funds that cover what many may consider as necessities enjoyed by many Americans. The tool does not include funds for pre-prepared meals or those eaten in restaurants. We do not add funds for entertainment, nor do we incorporate leisure time for unpaid vacations or holidays. Lastly, the calculated living wage does not provide a financial means to enable savings and investment or for the purchase of capital assets (e.g., provisions for retirement or home purchases). The living wage is the minimum income standard that, if met, draws a very fine line between the financial independence of the working poor and the need to seek out public assistance or suffer consistent and severe housing and food insecurity. In light of this fact, the living wage is perhaps better defined as a minimum subsistence wage for persons living in the United States.

Family Compositions - The living wage calculator estimates the living wage needed to support families of twelve different compositions: one adult families with 0, 1, 2, or 3 dependent children, two adult families where both adults are in the work force with 0, 1, 2, or 3 dependent children, and two adult families where one adult is not in the work force with 0, 1, 2, or 3 dependent children.

For single adult families, the adult is assumed to be employed full-time. For two adult families where both adults are in the labor force, both adults are assumed to be employed full-time. For two adult families where one adult is not in the labor force, one of the adults is assumed to be employed full-time while the other non-wage-earning adult provides full-time childcare for the family's children. Full-time work is assumed to be year-round, 40 hours per week for 52 weeks, per adult.

Families with one child are assumed to have a 'young child' (4 years old). Families with two children are assumed to have a 'young child' and a 'child' (9 years old). Families with three children are assumed to have a 'young child', a 'child', and a 'teenager' (15 years old).

“We need to give each other the space to grow, to be ourselves, to exercise our diversity. We need to give each other space so that we may both give and receive such beautiful things as ideas, openness, dignity, joy, healing, and inclusion.” - Max de Pree

“Look within!...The secret is inside you.” - Hui-neng

11] [Izidor Ruckel, Orphan Advocate](#)

I am appalled at the number of children who remain in abusive and inhumane institutions around the world, forgotten and voiceless. I spent the first 11 years of my life in such a place, and can tell you it is a cruel solution for “unwanted” children. Through my own survival, as well as that of my former-orphan friends, I have seen how the stability and love of a family can change a child from hopeless and wild into a healed and a compassionate human being.

Many years ago, through God's intervention, some courageous people spoke up on my behalf, gave me an opportunity outside the walls of my orphanage, and changed my life forever. Now, I am called to be a voice for those left behind.

Will you join me? Together we can find the answers to bring hope and dignity to the children still suffering.

11a] [Romanian orphan tries to 'close the chapter' on his troubled past](#) – YouTube 11:04 minutes

Izidor Ruckel spent more than a decade of his life growing up in a Romanian institution before appearing on an ABC "20/20" special and being adopted by a California family and brought to the U.S. Now in his thirties, Izidor is trying to begin a new chapter in his life.

11b] [Abandoned for Life: The Incredible Story of One Romanian Orphan Hidden From the World : His Life. His Words.](#) by Izidor Ruckel @ [Goodreads](#) – Meet Your Next Favorite Book

“It shouldn't hurt to be a child.”

“There are tons of kids out there who endure chronic abuse and suffer in silence. They can't trust anyone, they can't tell anyone, and they have no idea how to get away from it.” - C. Kennedy

11c] [The Romanian Orphans Are Adults Now](#) by Melissa Fay Greene @ The Atlantic

30 years ago, Romania deprived thousands of babies of human contact. Here's what become of them.

For his first three years of life, Izidor lived at the hospital.

The dark-eyed, black-haired boy, born June 20, 1980, had been abandoned when he was a few weeks old. The reason was obvious to anyone who bothered to look: His right leg was a bit deformed. After a bout of illness (probably polio), he had been tossed into a sea of abandoned infants in the Socialist Republic of Romania.

n films of the period documenting orphan care, you see nurses like assembly-line workers swaddling newborns out of a seemingly endless supply; with muscled arms and casual indifference, they sling each one onto a square of cloth, expertly knot it into a tidy package, and stick it at the end of a row of silent, worried-looking papooses. The women don't coo or sing to the babies. You see the small faces trying to fathom what's happening as their heads whip by during the wrapping maneuvers.

In his hospital, in the Southern Carpathian mountain town of Sighetu Marmăției, Izidor would have been fed by a bottle stuck into his mouth and propped against the bars of a crib. Well past the age when children in the outside world began tasting solid food and then feeding themselves, he and his age-mates remained on their backs, sucking from bottles with widened openings to allow the passage of a watery gruel. Without proper care or physical therapy, the baby's leg muscles wasted. At 3, he was deemed "deficient" and transferred across town to a *Cămin Spital Pentru Copii Deficienți*, a Home Hospital for Irrecoverable Children.

The cement fortress emitted no sounds of children playing, though as many as 500 lived inside at one time. It stood mournfully aloof from the cobblestone streets and sparkling river of the town where Elie Wiesel had been born, in 1928, and enjoyed a happy childhood before the Nazi deportations. The windows on Izidor's third-floor ward had been fitted with prison bars. In boyhood, he stood there often, gazing down on an empty mud yard enclosed by a barbed-wire fence. Through bare branches in winter, Izidor got a look at another hospital that sat right in front of his own and concealed it from the street. Real children, children wearing shoes and coats, children holding their parents' hands, came and went from that hospital. No one from Izidor's Cămin Spital was ever taken there, no matter how sick, not even if they were dying.

Like all the boys and girls who lived in the hospital for "irrecoverables," Izidor was served nearly inedible, watered-down food at long tables where naked children on benches banged their tin bowls. He grew up in overcrowded rooms where his fellow orphans endlessly rocked, or punched themselves in the face, or shrieked. Out-of-control children were dosed with adult tranquilizers, administered through unsterilized needles, while many who fell ill received transfusions of unscreened blood. Hepatitis B and HIV/AIDS ravaged the Romanian orphanages.

Izidor was destined to spend the rest of his childhood in this building, to exit the gates only at 18, at which time, if he were thoroughly incapacitated, he'd be transferred to a home for old men; if he turned out to be minimally functional, he'd be evicted to make his way on the streets. Odds were high that he wouldn't survive that long, that the boy with the shriveled leg would die in childhood, malnourished, shivering, unloved. [Read the entire article](#)

"Injustice anywhere is a threat to justice ever. We are caught in an inescapable network of mutuality, tied in a single garment of destiny. Whatever affects one directly, affects all indirectly." - Martin Luther King Jr.

"Great opportunities to help others seldom come, but small ones surround us every day." – Sally Koch

12] [Brave and Unbroken Podcast - Mike Skinner](#) - Child Abuse Survivor vs. Mentally Ill Labels

Mike so graciously agreed to join Pennie Saum on the Brave and Unbroken Project's podcast, sharing his story and showing how its possible to survive out loud.

Mike Skinner is a musician, advocate, grandfather, father and child abuse survivor. His health concerns are the result of childhood and teen-aged years filled with the pain and suffering caused by severe and protracted sexual, physical, and emotional abuse from Mike's parents and many of their friends. Mike's adult life has known the pain and isolation due to the stigma and discrimination of being labeled “*mentally ill*” – that stigma helped lead to a brutal assault and other traumas and violations upon him.

Also on [Apple Podcasts - Brave And Unbroken: Mike Skinner](#) - Child Abuse Survivor vs. Mentally Ill

12a] [Brave and Unbroken](#) - Home Page – Brave and Unbroken has officially become a WA State non-profit, the Brave and Unbroken Project. We are so excited to continue work, continuing to fight and end, child sexual abuse.

13] [Manchester couple hopes to bring awareness to impact of fireworks on veterans with PTSD](#) – WMUR News, Manchester, NH

Fireworks without warning can have lasting impact.

Marilyn Pettigrew and her husband Raymond have a sign they carry and display at their home to educate people. Raymond fought in the Vietnam War and said he has struggled listening to fireworks for over 50 years.

“If I know there’s going to be fireworks I prepare myself for it,” Pettigrew said. “But the neighborhood when they set off their personal fireworks, I jump out of my skin and it’s always been that way. And I never associated it, but it does, it brings me right back.”

According to Manchester city ordinances, setting off fireworks in the city is not allowed.

@ [YouTube](#) .39 second clip

“Music can change the world because it can change people.” - Bono

“Service to others is the rent you pay for your room here on earth.” - Mohammed Ali

14] [Veterans Raise Awareness about PTSD and Fireworks](#) – YouTube 2:25 minutes

KABB Fox San Antonio, TX

Veterans with post-traumatic stress disorder are raising awareness about an unintended consequence of Fourth of July fireworks.

This week a photo has gone viral with nearly three-hundred thousand shares on Facebook. It shows a man with a sign in his front yard that simply says "Combat Veteran Lives Here. Please Be Courteous with Fireworks."

PTSD experts say the loud noises and explosions can trigger painful memories for these men and

women. "How do they respond? You might find them on the ground," says psychiatrist Dr. Harry Croft. "They're on the ground in a defensive position. And everybody's looking at them. What's wrong with you, dude? I mean, this is just a fireworks display."

The group that shared that Facebook photo, "Military with PTSD", says it plans to mass-produce those fireworks signs so anyone who wants one for their yard can get one for free.

"Peace is our gift to each other." - Elie Wiesel

"Don't doubt your value. Don't run from who you are." - Aslan

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