



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 February 2021

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"I think that we are like stars. Something happens to burst us open; but when we burst open and think we are dying; we're actually turning into a supernova. And then when we look at ourselves again, we see that we're suddenly more beautiful than we ever were before." - C. JoyBell C.

1] [Never Feel Good Enough? How to Find Your Self-Confidence](#) by Jennice Vilhauer Ph.D. @ Psychology Today

Four steps to improve how you feel about yourself.

I work with a lot of very smart and successful people, and one thing they all seem to have in common is that no matter how much they achieve, they never feel good enough. In fact, for most of them, it is the feeling of not being good enough they will say drives their success. They always think that if they just get to the next level or climb the next mountain, then maybe they will finally get rid of that nagging gnawing feeling that somehow they are fooling everyone.

Almost all of them recognize they have a very negative inner critical voice that holds them to a standard that is different than everyone around them. Their [inner critic](#) in their head berates them and says things to them that they would never say out loud to anyone else. *I am such an idiot; I am a phony; I never do anything right; I will never succeed.* But for many, what brings them into [therapy](#) is that they reach a point in their success where they realize self-flagellation is no longer working. Their lack of [self-confidence](#) is holding them back.

You would think at that point they would be ready to dump their inner critical voice and find more ways to be their own cheerleader, but it's not that easy. A lot of people view their inner critic as a friend. A friend that makes them always try to be better and doesn't allow them to slack off. They [fear](#) that without their inner critic they will become lazy and apathetic.

Finding self-confidence when you've got a loud and active inner critic in your head, requires a deliberate process. Below are four steps that can help you get started:

1. Recognize the enemy.

The inner critic has never been your friend. Every time it speaks to you it causes you to experience a negative emotion. Fear, [anxiety](#), self-doubt, [shame](#). It causes you to fixate on what is wrong with you instead of what is right. It prevents you from seeing the very things you need to see in order to build self-confidence. Every time you notice the inner critic speaking in your head, talk back to it and tell it

to go away, tell it you are ending the relationship, tell it you are no longer going to listen to it anymore.

2. See what is already there.

Your inner critical voice has been keeping you blind to who you really are. The second step is to see what has always been there. Look back at the things you have accomplished in your life. List as many successes and achievements as you can think of. Then find one or two other supportive people who you know and trust, and ask them to name as many of your successes and achievements as they can think of. You will likely be surprised that they come up with things you hadn't thought of.

Once you have your list, write down as many positive traits and characteristics you know you have that helped you achieve those accomplishments. Then start growing your list forward. Start adding every win you get to it. They don't have to be huge things. A positive comment from a co-worker about something you did or feeling good about a great workout would be a perfect thing to add to the list. Try to write down at least three to four things a week. The goal is to keep the list running so it becomes a tangible document that you can use as evidence to prove the inner critic wrong.

And no, this exercise will not cause you to become a [narcissist](#). All human behavior is on a continuum. Being on either end of the spectrum is usually not a healthy place to be. Your goal is to simply move more toward the middle on the self-confidence continuum where there is a healthy balance. Humility and self-confidence are not mutually exclusive, they are very complementary traits.

3. Practice self-kindness.

Now that you are booting the inner critic out of your life, you will need a new best friend. A positive inner voice that is soothing and self-compassionate. This voice isn't going to let you off the hook, it is going to be more honest with you than the critic because the critic was mostly lying. But instead of speaking to you in an abusive way, it is going to sound more like a loving kind parent who wants the best for their child. It's also going to acknowledge your wins and positive qualities on a regular basis. If you need help finding a kinder inner voice, I recommend reading the book [Self-Compassion](#) by Kristin Neff.

4. Acknowledge your own journey.

Mark Twain once said, "Comparison is the thief of joy." One of the most destructive ways you kill your self-confidence is when you compare yourself to others and make the faulty assumption that you should already be somewhere other than wherever you are. Comparing yourself to someone else doesn't take into account the fact that you have completely different life experiences, biology, [genetics](#), etc. People don't come out of the starting gate all in the same place. Comparing yourself to others prevents you from taking credit for your own journey and all that you have become based on your own set of circumstances. Always remember that your life experience is your own.

[Jennice Vilhauer Ph.D.](#) is a psychologist in Los Angeles, the developer of Future Directed Therapy (FDT), and author of the best-selling book [Think Forward to Thrive](#). As a former director of Outpatient programs at Emory Healthcare in Atlanta, GA and Cedars-Sinai Medical Center in LA, she has over 2 decades of experience helping clients overcome depression and regain their emotional well-being. She completed her undergraduate training in psychology at UCLA, obtained her doctorate degree at

Fordham University, and completed her postdoctoral training at Columbia University.

1a] [Living Forward](#) *Getting to recovery and wellness* – More articles by Jennice Vilhauer

“Do not fight against pain; do not fight against irritation or jealousy. Embrace them with great tenderness, as though you were embracing a little baby. Your anger is yourself, and you should not be violent toward it. The same thing goes for all your emotions.” - Thich Nhat Han

“Our fingerprints don't fade from the lives we touch.” - Judy Blume

2] [Self-Care During Difficult Times](#) by David A. Grant TBI Survivor – BrainLine

So, how are you doing? All too often we are hard-wired to fire off a quick reply. “I’m fine, thanks for asking.” Do we really think the person asking really cares? Perhaps they are simply using an all-too-familiar greeting.

These are difficult times. Life is challenging enough for the fully-abled, but add a traumatic brain injury to the mix, and things can get downright overwhelming.

I can only speak for myself when I share that most days I’m in the “kind of okay” place. The terror that life can become is held back by staying busy. I move through every day at about the same pace, doing the same things, biding my time until life as we knew it begins to make a reappearance. Every day feels a bit like Blursday, one day fading into another, one week gone, another month past, and like treading water in a pool, my head stays above the high water mark.

But occasionally dark days come. Thankfully they only come now and again, and (so far) never more than one day at a time. I’m not sure what I would do with consecutive dark days. Thankfully, I don’t need to.

Dark days are those days where I allow my mind to run. The outcome is never good. My mind ceases to be my friend and my thoughts get the best of me.

“Next month will be a year since Sarah and I have been living in isolation. I can’t take one more day of this.”

“I am so freaking tired of worrying all the time. It’s exhausting. What’s the sense anyway? It’s only a matter of time until I catch the virus.”

“The noose is getting tighter. People that I know and love now have COVID-19. Maybe this really is the end of humanity as we know it.”

This rabbit hole is never fun. My brain injury left some of my filters still in tatters. While my verbal filter is back to something resembling normal, my emotional filter is still hit-or-miss. I watch the news and I just want to cry. Sometimes I do. So many gone, such irrecoverable tragedy and loss. I often wish I didn’t feel so deeply. It is one of the bittersweet aspects of life after brain injury.

When I feel the wave sweep over me, more often than not, I realize that it is time for action. Living in a state of hopelessness is not for this survivor. I've come too far, seen too much, and worked too hard to do any less than my best.

Self-care is not an option in today's world. It is essential for survival. There are practices that I have adopted, and things that I do that keep me grounded and reasonably well. My list may be different than yours, but I encourage you to find things that can help keep you afloat.

So, how do I stay topside these days?

One of the biggest helpers is to stick to a routine. In my case, my pandemic routine is very similar to life before everything changed. During the workweek, I am at my desk from 8:00 AM to 5:00 PM like clockwork. In fact, you can literally set a clock to my weekday comings and goings.

Mid-afternoon most every day I hunker down to my daily commitment to exercise. Being winter in New Hampshire means that I am relegated to my indoor stationary bike. But like my warm-weather routine, I bike for twenty miles a day, almost every day.

Not only is exercise a stress reliever, but it's proven to be vital in my ongoing TBI recovery. The science shows that cardio causes my body to release what is called [Brain Derived Neurotrophic Factor](#). This naturally occurring chemical has been proven to boost neurogenesis – the formation of new neurons.

Exercise is good for my body and good for my brain!

My next task is not as easy as it might sound. Every day I try to reach out to someone I know. Whether it be by phone, email, or text, I try to touch base with a fellow member of humanity outside of our household. As members of the human race, we are hard-wired to be social beings. The pandemic has pulled so many away people from other human contact. I fight to retain that connection to others.

Not only do I have the opportunity to brighten someone's day, but by reaching out to someone else, I am less apt to let unhealthy and fear-based thoughts ruminate.

Lastly, I try to find time to go out and continue to explore the world. While the pandemic has essentially eliminated most human contact, there is a great wild world out there ready to be explored. Every weekend, Sarah and I hop into the Jeep and pick a direction to drive. Sometimes we revisit familiar places, other times it's a ride to someplace new.

We know the best coastal spots to see seals, occasionally stumble upon snowy owls, and have spied out deer on countless occasions. Not only does this stave off the uneasiness that comes from being inside for too long, but it also exposes me to new experiences, something that has also proven to help me along the brain injury recovery road.

None of this is easy. It's not supposed to be. But when the dark cloud starts to make an appearance, I remind myself that 2021 is a year of great promise. Unlike its predecessor, I fully expect this year to get better as we go, and, fingers crossed, we might see some semblance of normalcy later this year. Seen in

this light, it's hard not to be excited.

2a] [Getting Back on the Bike](#) - David A. Grant blogs about life after brain injury

My name is David A. Grant. I am a husband, a father, and a son. On November 11, 2010, I was unceremoniously forced to start closing the book on my old life and begin life anew as someone with a traumatic brain injury. My brain injury is singularly the most life-changing event of my life.

In this space, I will offer you the opportunity to see the world through the eyes of a survivor. I'll share my victories, my defeats, my pains, and my joys. My hope for other people with brain injury is that they will see reflections of their own lives in my words and know they are not alone. [Learn more about David >](#)

“Our brains developed along with music and singing as a survival mechanism.” - Tania De Jong

“Quietly endure, silently suffer and patiently wait.” - Martin Luther King Jr.

3] [I'm Not a 'Failure' for Leaving Jobs That Hurt My Mental Health](#) by Mia Hodgkinson @ The Mighty

Throughout my life I have endured fears, insecurities and self doubt. As a child I would run away from school, bail on trips that had been planned for months and constantly ask for reassurance over the most ridiculous things. I would ask my parents if they thought I'd eat my lunch the following day, whether I needed the loo and if they would sit and watch me until I fell asleep just to make sure nothing bad happened to me. Looking back, I like to think I had a wonderful childhood because that's what your brain does – it picks out the best bits of something or makes the bad bits seem less so as a way to cope. I had everything I could want as a child – stability, a loving home, lots of attention, treats, holidays, so many fun times and a brilliant big sister to look up to and admire. There was no possible reason for my fears and yet I had them... every day.

As I've grown up and adapted to my diagnosis of [bipolar disorder](#), I have begun to understand my childhood more and the warning signs that were always there but that nobody understood at the time. I look back and have so many regrets for the constant worry and disappointment I must surely have put my family through. The thing I have also begun to adapt to is the fact that my fears still exist, but I just hide them a lot more.

Adults who are afraid of things, especially things that might not even happen, are not accepted by the majority of people. It's “not normal,” or so people who have never experienced it would like to think. The phrase I hear most often is “try not to worry about it.” Yeah, right... that's like a red flag to a bull. You simply can't tell someone who has lived with irrational fears for their entire life to “try” not to worry. What on earth do you think I've been doing for the past 33 years? There's no way in hell I would choose to live like this if I didn't have to, but I don't have a choice and therefore, I have to deal with the hand I've been dealt and foster coping strategies.

In my more recent years, I've been in and out of jobs, mostly for the same reasons. My coping strategies can only take me so far, and maybe it's the industry I work in, or maybe it's because jobs are hard to find and keep these days. When you get up every day, put the fear (whichever one it might

happen to be that day) as far back in your mind as you possibly can and go into a job you've earned the right to be at, and yet suddenly realize you're working alongside people who have no concept of how to use tact and would most definitely stand on you if you fell so they could reach the next rung of the ladder — it is then you know that either your industry is not right or the whole world has gone to pot. It's really hard to tell as I've had some awful experiences in my personal life too. However, what I do know is it isn't weak to walk away from something or someone that exacerbates your fears. Maybe you had control of your fears for a moment, an hour, a day and someone has come along and ruined that for you. It isn't losing face to walk away, even if most other people would have stayed. There are levels to this, of course, and I'm not suggesting you throw in the towel simply because someone was a little off-color with you or wouldn't lend you their stapler. I'm talking about high-octane stuff — the kind of stuff you realize you've been taking for months and yet hadn't noticed until you had a particularly bad day mentally and you realized maybe this wasn't helping the situation in your poor, exhausted head.

There is that saying that you should be kind because you don't know what some people are going through. It's so true and yet so difficult to find people who will genuinely use this approach in life and especially in the work place.

My family are constantly encouraging me to “just stick it out,” “what about the money?” “it's awful, but that's life,” “be strong,” etc. I know they don't want to see me financially bereft because they know that also exacerbates my mental state. They also know the routine of a job is great for me, as I like control and to not have too much time to fill, as this enables my fears to begin to take over. However, the way I see it, life is not about money and it sure as hell isn't about taking abuse, back stabbing or any other form of disloyalty in any capacity.

All I do know is I've just walked away from yet another toxic work situation and am taking some time out to do the things I love, see the people I love and nurture the brave, good side of me that has been slightly battered and bruised over recent months.

Whatever your situation, if it doesn't make you happy or it does, in fact, make you sad or exacerbate any [mental health](#) issues you may have, then you may need to walk away. Bravery has many different forms, but I see bravery every single day when I interact with like-minded people and hear about their stories and how they walked away to survive.

I've been suicidal in jobs before, cried in the loos loads and spent nights on end tossing and turning in bed trying to figure out what is so “wrong” with me that this cycle keeps repeating itself, and people, yet again, seem intent on trying to destroy me. I'm having a lucid and good day today so I can actually say with genuine feeling that there's nothing wrong with me and everything wrong with them. Whether it is because they're jealous, threatened, just unpleasant people or completely unaware of how they are making someone feel, there is absolutely no loss of dignity from bidding them adieu!

I feel glad I've walked away over and over again. OK, so I'm not the richest girl in the world as a consequence, but I have pride, a good heart and a much deeper understanding of myself and my needs than many other people. When it comes down to it, you need to self-love and nurture to survive. Being in tune with your mind makes you an inimitable force and can help you to keep going, even when some people really want to see you fail.

Be brave, in whichever way you can. It's one of the strongest things you can be and something nobody

can take away from you.

3a] **We want to hear your story. Become a Mighty contributor [here](#).**

“Just for today I will have a program. I may not follow it exactly, but I will have it.” Courage to Change

“It took me a long time not to judge myself through someone else’s eyes.” - Sally Field

4] [The Strangest Village In Britain](#). (Best documentary ever) - YouTube 48:09 minutes

This was aired on Swedish television with Swedish subtitles - Amazing and heartwarming documentary about the special residents in the little village Botton within the North York Moors National Park in North Yorkshire, England. Botton was founded in 1955 on the initiative of the Camphill community in Scotland and initial direction of Peter Roth. It was the first organization of its kind within the anthroposophical social therapeutic work specifically for people with disability after they reached adulthood.

[Anthroposophy](#) - a formal educational, therapeutic, and creative system established by Rudolf Steiner, seeking to use mainly natural means to optimize physical and mental health and well-being.

“You can easily judge the character of a man by how he treats those who can do nothing for him.” - Johann Wolfgang von Goethe

5] [Everlast - What It's Like](#) (Acoustic) – YouTube 5:15 minutes

“I see my recovery as a healthy way of life that I can gladly share with others. Today I am actively pursuing a better life because I am working on myself.” Unknown

“Our ancestors knew that healing comes in cycles and circles. One generation carries the pain so that the next can live and heal. One cannot live without the other; each is the other’s hope, meaning and strength.” - Gemma B. Benton

6] [Common Reasons People Self Sabotage](#) by [Amanda Gigante](#) LSW, MSS

Self-Sabotage is a painful and destructive pattern to find yourself in. What’s most troubling is that this pattern often rears its problematic head at the dawn of new endeavors, long-awaited accomplishments, and celebratory milestones. It is during these times when we need ourselves the most, but instead, we end up cleaning up self-made messes or jeopardizing opportunities. Being caught in the pull of self-sabotage can result in increased depression, feelings of shame and guilt, and overall poor life satisfaction. It is a wedge between you and the life you want the most. The first step in healing is identifying the reason(s) you self sabotage.

Self-Sabotage can feel a lot like an inconvenient monster emerging from the depths of personal

consciousness, and it's often attached to our deepest wounds and biggest questions. Am I worthy enough to feel good about my life? Do I deserve success? Can I maintain joy and happiness? Is a good life really for me?

At first glance, self-destructive tendencies are confusing and mysterious. Maybe you're bingeing on Netflix until 3a.m., making it impossible to stay present at work the next day. Or, perhaps your goal is to save money, but you're making a ton of unnecessary purchases. It's hard to accept and understand why anyone would derail their progress, but as we dig into what creates these patterns, we will get a better grasp on them, as well as make headway in healing. Self-sabotage, like most other problematic human patterning, is yet another trail-head to more profound knowledge of self.

Why self-sabotage?

1. Low Self-Worth

"I'm not good enough for this job."

"Do I deserve to be happy with my partner?"

"Is happiness for someone else? It can't be for me."

"I'm going to mess this up anyway!"

Feelings of unworthiness commonly manifest as self-sabotaging behaviors. Self-sabotage can work as a feedback loop: we feel "not good enough", then something good happens, but we get in our own way and destroy an opportunity, thus finding our evidence that we don't deserve good things.

Low self-esteem hurts, and it's often born out of a time in which we had little control over our self-perception. Perhaps your childhood lacked proper nurturing, and you blame yourself in efforts to harness control over your environment. "If I can be better, I will get more love" But the love doesn't come, because you weren't the problem in the first place. In order to survive a difficult or painful situation in childhood, you told yourself a story that you weren't good enough. These stories can persist into adulthood and shape our behavior until they are examined and understood.

Human beings are universally imperfect, and often self-critical. In a culture dominated by messages that happiness is found in the next degree, the bigger house, or the next i-phone upgrade, it's easy to feel you've fallen short in some way.

Low self-worth negatively affects our ability to take risks and go after what you want. High levels of self-worth allow us to push personal limits, accept exciting new life prospects, and increase our capacity for joy and growth.

Try the mantra: "I deserve to be happy" and, "I am good enough to deserve a happy life." And ask yourself, if I was happy would I still engage in the same behaviors?

2. Fear of the Unknown

“Would I survive if I changed XY & Z about my life?”

“Change is hard!”

“I’m comfortable with what I know.”

“Things might not turn out okay!”

Self-sabotage impedes upon reaching your fullest potential and actualizing your wishes and dreams. Self-destructive behaviors are often acted out as a way to create predictability, especially when life is in transition towards something different or better. It may seem counter-intuitive, but if one is used to life looking like a mess, then there’s some incentive to keep the familiar mess and forgo the mysterious.

Clinging to predictability may be a response to anxiety or a history of traumatic experience. If the unknown has proven itself to be particularly painful or dangerous in the past, then the urge to self-sabotage into familiarity may be even more compelling. The human psyche is merely trying to protect itself through the maladaptation of self-destruction to maintain the status quo. Change can feel like a threat to safety for someone with a history of trauma.

Change is scary for all of us, but if trauma is present, it becomes even more complicated. This is yet another reason that it’s imperative to explore and examine our thoughts, feelings, and behaviors with self-compassion. Self-exploration becomes a smoother process when infused with self-love.

Try the mantra: “I’m excited for change, what can i do to set up growth for myself? Or, “change is scary, but I can handle it.”

3. Separating from Family Stories

“My family won’t get it.”

“I grew up working class, I’m not used to this.”

“We aren’t affectionate in my family.”

Adults are still largely operating within their systems of family of origin. We may leave home, but our consciousness remains “peopled” with the folks who helped shape us, for better or for worse, into who we are today. We make vows in childhood about what’s possible for ourselves, and we receive messages from those around us about how to stay in line, or remain a part of the family. “I am never going to let anyone hurt me again”. “I have to curb my own emotions for the sake of my family’s reactions.”

In terms of self-sabotage, we may be destroying opportunity if it doesn’t fit into the image we have of ourselves in our family of origin. “We didn’t have money growing up, is it okay to want financial success?” Does where you’re going look drastically different from where you’ve been? Is achieving success separating you from your family? Is the culture of your family to be unhappy, or caught in a struggle? If so, you may have a hard time accepting ease.

We may also experience the urge to “get in our own way” or stop progress if we feel we are doing better than our family. Perhaps we’ve internalized beliefs like, “having money is selfish” or, “academia is for snobs”. We fear that being different and advancing towards our potential will result in a loss of belonging, or kinship in shared struggle.

And lastly, some of us are afraid of not measuring up to familial expectations. This fear of failure can be so anxiety provoking that self-destruction can ensue. Again, familiarity is compelling in the face of anxiety and fear. The potential of failing may be too overwhelming with the internalized judgment of commentating family members.

Try the mantra: “I can be different from the family and still remain a part of it” and, “there’s nothing wrong with the life that I want to build.”

Awareness is the First Step

It’s not easy to come to terms with self-sabotage. It’s really hard to know why you do it, and there may be many reasons why you’re stuck in this pattern. It’s okay to be starting off on this journey of greater self-discovery, and to not see the whole picture quite yet. The first step in healing self-sabotage is to recognize when you’re doing it. You may feel yourself getting gripped by this pattern again and again, but awareness will help to loosen its hold and allow you to gain the clarity and power you need to change course. If you accomplish something big, what usually happens after? What happens leading up to the accomplishment? Do you notice yourself making choices that increase hardship in your life? Questions like this can lead us to greater understanding of ourselves and the reasons why we may be engaging in problematic patterns.

With eventual awareness of the reasons you're self-sabotaging, it becomes easier to catch yourself prior to engaging in thoughts and behaviors that will have a negative effect on your life. Understanding self-sabotage allows you to pay attention more deliberately to your inner experiences that influence sabotage behaviors. Are you afraid of the unknown? Are you worried about losing identification with family? Are you feeling like you don’t deserve good things? You could be experiencing a combination of all three. These are points for self-exploration.

Conclusion

Self-sabotage is a challenging pattern that often shows itself at inconvenient times in our lives. It’s hard to understand and difficult to spot, but with awareness, self-exploration and the help of a therapist, it’s possible to heal this pattern and get out of your own way. Recognition of the pattern is the first step and then you can practice using a new mantra to help yourself navigate away from the unwanted behaviors. Reach out to a trusted friend, or therapist if you feel yourself falling back into self-sabotage. As you move through healing self-sabotage, you can address deeper issues around self-worth, fear of the unknown and how you belong to your family. The most challenging obstacles often encase the greatest gifts.

“Have a heart that never hardens, and a temper that never tires and a touch that never hurts” - Charles Dickens

“The emotional wounds and negative patterns of childhood often manifest as mental conflicts, emotional drama, and unexplained pains in adulthood.” - Unknown

7] [Opinion: What psychedelics taught me about healing trauma](#) by Dr. Craig Heacock @ CNN

It's said that science progresses "one gravestone at a time," since major changes in theoretical perspective usually require a new generation or more to take hold.

Psychiatry, in contrast, is in the midst of a massive shift: We're experiencing a veritable psychedelic revolution, as drugs like MDMA, psilocybin and ketamine offer new hope for treating severe mental anguish.

I've been a psychiatrist for 15 years, and I have long recognized that there is a significant percentage of patients for whom we have never been able to offer meaningful relief. In my experience, these are largely patients with extensive trauma histories, such as childhood abuse and neglect. Trauma, as the root of so much psychological distress, is the great imitator: It can present as depression; suicidal thinking; self-harm; dissociation or numbing; substance abuse; panic; an eating disorder; or even impulsive aggression.

Psychiatry and mental health treatment have traditionally focused on talk therapy and medications, interventions which are often quite helpful at relieving many types of psychological distress. Yet I never truly understood why we couldn't successfully talk or medicate some of our patients out of their trauma until I began to work with psychedelics in 2017. I'm finding that my entire perspective on healing trauma is rapidly changing, one psychedelic session at a time.

Psychedelics, which include a broad range of substances that tweak the dials of consciousness in very different ways, initially suggested great promise as medicinal treatments for mental health disorders [in the 1950s and '60s](#). Drug prohibition in the following decades pushed them underground, and these drugs were then largely ignored by the psychiatric establishment until a resurgence in [exploration in the 1990s](#).

The psychedelic treatment revolution taking place today arguably started in 2006, [with Carlos Zarate's JAMA paper](#) suggesting the unexpected efficacy of the anesthetic ketamine for depressed and suicidal patients.

Now ketamine -- which you may know by the street name "Special K" -- is widely available across the United States for medicinal use, and it's becoming [an indispensable part of depression treatment](#). Two other psychedelics, [MDMA](#) and [psilocybin](#), are in Phase 3 and Phase 2 clinical trials, and could be approved within the next couple of years for treatment of PTSD and depression.

I have always been a materialist -- a "show me the evidence" sort of person. I've been deeply curious about an energetic or spiritual element that would affect a person's overall health, but it always seemed a little woo-woo and unscientific to merit much attention. In my residency program, for example, we never considered that trauma might be held in the body, much less in the spirit. Yet it is now becoming clear through psychedelic psychotherapy research that trauma is held both in the body and in a person's spirit -- or life energy, or primary consciousness, whatever one might label it.

Herein lies the reason why so many people suffering from depression and anxiety, addiction, and/or

profound psychological despair have found their mental health struggles to be so resistant to treatment: I believe these disorders are more often than not tied to a deep, and largely untouchable, river of trauma that lies beneath our reach in the unconscious mind.

Somatic trauma therapists, who primarily focus on feelings and perceptions in the body, have long used this knowledge to bypass the verbal, analytical ego and access stored trauma in the tissues. But the process of somatic therapy can be slow, arduous and even painful, as therapist and patient struggle to reach that which is deepest and most hidden in our body and psyche.

Psychedelic treatment, meanwhile, appears to be a less painful portal to accessing the interface of the unconscious and the body. This is profoundly difficult to explain but easy to witness in the treatment room, as people are able to open up and explore previously unreachable wounds, perceptions and insights.

I discovered this during my first experience with using psychedelics to treat deep-seated trauma, when I joined a MAPS-sponsored study of MDMA-assisted psychotherapy for post-traumatic stress disorder (PTSD). As a co-therapist in those sessions, I observed patients being able to mentally return to the source of the trauma and begin to rework and reframe their experience without fear. Using pharmaceutical-grade doses of MDMA alongside psychotherapy sessions, they were able to process what happened with the warm light of compassion, pushing away the toxic sludge of shame that surrounded the trauma.

MDMA, better known by its street names of "Ecstasy" or "Molly," is a Schedule 1 illegal drug that, prior to its prohibition in 1985, [was used by some psychotherapists](#) to help their clients work through trauma and other psychological issues. The nonprofit MAPS -- which stands for [Multidisciplinary Association for Psychedelic Studies](#) -- was founded shortly after MDMA's criminalization, with the goal of making MDMA again available for research and treatment.

So far, the work has shown promise: [68% of participants in the Phase 2 MAPS clinical trials](#) no longer met the criteria for PTSD a full year after receiving treatment. In 2017, [the FDA gave MDMA a breakthrough therapy designation](#), meaning the results of early clinical research indicated potential for a substantially improved treatment for severe PTSD.

We don't fully understand why MDMA is so effective at fostering trust and empathy while also dialing down fear, but one mechanism might involve the inhibition of specific circuits in the amygdala, the fear node of the brain. There's more research to be done, and MDMA is not yet available for patients outside of research studies.

The psychedelic ketamine, however, is available now, and I use it extensively within my own practice -- it's hard for me to remember how I even practiced without it. A [50-year-old general anesthetic](#), ketamine has been successfully repurposed over the past few years to treat depression and PTSD. Although low -- as in non-psychedelic -- doses of ketamine appear helpful for depression, I and many other physicians are finding that the fully dissociative psychedelic doses of ketamine appear to be the most powerfully effective. While the lower doses do improve mood and energy for many, they typically don't touch the somatic-spiritual, or unconscious, interface where we've found trauma to lurk.

In these higher psychedelic dosage treatments, I often see hidden rivers of trauma come to the surface, where the patient and I can begin to explore the heretofore unspeakable and unknowable. Most of who

we are lies in the unconscious, and with severe trauma the unconscious is where the healing needs to start.

Psychedelics including MDMA, psilocybin, THC (yes, THC!), ayahuasca and ketamine, when prescribed under the care of a medical professional in combination with psychotherapy, are opening up rapid access to these realms that have been so difficult to reach and understand. And once this access has been established, we are finding that patients are healing with intermittent treatments, often spaced over months or longer, in contrast with standard psychiatric medications, which are dosed daily or even multiple times a day. Psilocybin, a compound found in "magic mushrooms," has been found to reduce symptoms for [depression](#), [anxiety](#) and [obsessive compulsive disorder](#), while the South American brew ayahuasca has been shown to be [effective as a treatment for severe depression](#).

Psychiatry might be moving to a model where many patients do intermittent psychedelic treatments, interspersed by both talk and somatic therapies, and thus moving away from daily medications for symptom management. At the least, psychedelics are finally giving us a chance to help traumatized patients and their treatment resistant mood and anxiety symptoms.

[Dr. Craig Heacock](#) is an adolescent and adult psychiatrist and addiction specialist in Colorado who hosts the psychiatric storytelling podcast "[Back from the Abyss.](#)" He is a co-therapist in the Phase 3 trial of MDMA-Assisted Psychotherapy for PTSD and has particular interest in the use of psychedelics to treat severe mood disorders and PTSD. The use of psychedelic drugs is still under research; please consult with your physician before starting any treatment. The views expressed here are his own.

"In the culture people talk about trauma as an event that happened a long time ago. But what trauma is, is the imprints that event has left on your mind and in your sensations... the discomfort you feel and the agitation you feel and the rage and the helplessness you feel right now." - Bessel A. van der Kolk

8] [How a scattered Indian nation kept its songs alive when it couldn't sing face-to-face](#) by Bill Briggs @ Transform

The ancient melody rides a thumping drumbeat and preaches the end to all war. As tribal lore tells it, the song was a gift from "the Creator."

For thousands of years, Samish people have gathered in cedar longhouses along the saltwater shores of the Pacific Northwest, often singing one of the many versions of the "Bone Game Song." Its soaring notes uplifted campfire crowds and, more recently, tribal meetings in Anacortes, Washington, homeland of the Samish Indian Nation.

But these days, as a pandemic forces social distance, Samish citizens can only convene in one location to share that song and other ancestral traditions.

"A tribe is a family, a community. Any cultural gathering is who we are," says Emily Baker, a Samish citizen who lives in Seattle, two hours south of Anacortes. "Having these singing and drumming events on [Teams](#) is key to a lot of people's health and wellbeing.

“Reconnecting this way – while staying safe – is healing,” she adds.

From their kitchen tables and living room sofas, hundreds of Samish people have spent parts of their summer and early fall together on Teams, a digital collaboration space. There, they have joined singing classes, swapped tribal stories, held film festivals and created all manner of traditional crafts – from carved rattles to woven headbands.

Those remote reunions, citizens say, have helped the tribe sustain its collective soul.

But hard work has been happening on the platform, too. In late June, the Samish nation held its annual general council meeting on Teams, offering financial, political and legal reports, tribal leader responses to citizen questions collected in advance, and live results of the 2020 tribal council election.

“With COVID-19, we had to get creative,” says Tom Wooten, chairman of the Samish Indian Nation. “Teams allowed us to reach our membership in the U.S., Canada and all over the world. For them, to be able to share knowledge of our accomplishments, it was just amazing.

“It’s about the interaction, and I feel this myself,” he adds. “It’s about your mental health. It’s about your whole physical being, too. We need people to be whole. Seeing other people laughing, smiling and talking is important. We need other people.”

During that virtual meeting in June, Samish leaders found ways to include some beloved protocols.

At previous annual tribal meetings – typically held in a community building at the Samish-owned Fidalgo Bay Resort in Anacortes – Samish veterans carried Samish and American flags into the room, entering to the slow beat of an animal-hide drum.

This year, Leslie Eastwood, the tribe’s general manager, tracked down photos of past presentations of the tribal colors. She used [PowerPoint](#) to build a slideshow to share on Teams, adding audio of singers and drummers performing the Samish victory song.

“It was important for me to personalize this meeting since we could not be together,” Eastwood says.

“I wanted everyone seeing those other faces. If we were all sitting there, sitting in those chairs together, those would be the people I normally recognize and see. Those are the people I miss,” she adds. “I threw my heart into it.”

Eastwood also recorded that meeting so Samish citizens could view it at their convenience. In June, 84 tribal members watched the proceedings live and nearly 20 later logged into the recording. (The Samish nation has a population of more than 2,000 people.)

Tribal leaders say the actual participants totaled about 150, as many families watched together, clustered around individual computers, meaning that virtual meeting drew roughly the same number of people as in-person meetings in past years.

Away from her governance work, Eastwood also has led or participated in many of the virtual cultural sessions. Next to a tabletop in her Anacortes home, she set up a ring light stand, affixed her smart

phone to that stand and activated the Teams app, sharing an overhead view of her hands as they created cattail mats and woolen headbands.

Samish citizens who participated in her sessions were shipped boxes of materials (such as dried cattail leaves) to use as they followed Eastwood's step-by-step instructions from their homes.

Other tribal members have followed her lead. At her home in Seattle, Baker has virtually taught fellow citizens how to use strips of cedar bark to weave a decorative heart and a fish.

And from his place in Anacortes, Wooten has led several remote singing classes, covering "The Bone Game Song" plus Samish flag songs, farewell songs and paddle songs.

"The songs go way back – before radios and record players," Wooten says with a smile. "Tribal citizens are hungry to know the past. To move forward, you have to know where you've been.

"That platform allows us to reach folks who definitely wouldn't have been able to come, not just because of COVID, but because our membership is scattered all over the world," he adds. Distance is something Samish people have dealt with for generations.

The first bits of archeological evidence linked to the Samish tribe – serrated bison bones and stone butchering tools –are 14,400 years old, carbon dating showed. They were found on Orcas Island, the largest of the San Juan Islands of the Pacific Northwest.

Since the last Ice Age, the region has served as the traditional Samish homeland. When white settlers arrived there in the late 1800s, they began destroying a large Samish community house. In the ensuing decades, those settlers drove out scores of Samish people, creating a regional diaspora.

During World War II, some of the Samish people who had remained in Anacortes found better-paying work in the airline industry or in shipyards far away, causing the tribe to further separate.

"What made Samish people unique," Eastwood says, "was we had to dig in and find out how to survive by following opportunities elsewhere but also stay connected with our scattered families.

"Part of our present-day story is based on the fact that the tribe hadn't ever been given its own reservation," she adds.

That far-flung citizenry even earned the Samish a legal nickname – one that Eastwood loves.

In 1994, the U.S. Department of Interior conducted a hearing on federal recognition of the Samish as an Indian tribe. Administrative Law Judge David Torbett conducted the hearing.

At that time – the early days of the internet – tribal leaders already were tech adopters, using cell phones, personal email, and faxes to pull together a dispersed people.

Torbett, who ruled in favor of Samish recognition, recognized their technical savvy. In his opinion, he dubbed the Samish the "Cyber Tribe."

“It gives me chills, even today,” Eastwood says. “Literally, it makes the hair stand up on the back of my neck.”

That same digital familiarity remains intact. The tribe has a thriving website, Facebook, and Instagram pages. Most citizens are comfortable using smart phones and apps, Eastwood says.

Their tech acumen also led Samish leaders to select a communication platform that ensured only tribal citizens could participate in the virtual sessions – particularly when it came to safeguarding the nation’s business information, Wooten says.

The Samish nation is a member of the Multi-State Information Sharing and Analysis Center (MS-ISAC), which seeks to improve the overall cybersecurity posture of the nation’s state, local, tribal and territorial governments. The MS-ISAC is part of the nonprofit [Center for Internet Security \(CIS\)](#).

“With the internet the way it is today, we were looking for something that had security,” Wooten says.

“It’s been a benefit for folks to interact and know what’s going on. They’re more informed and our participation has gone up during the pandemic,” he adds. “We’re going to continue to utilize Teams well beyond COVID-19. It has saved us time and money and allowed the government to keep working.”

The recommendation to choose Teams over other platforms came from JR Walters, the Samish nation’s IT director. The selection, Walters says, was rooted in frequent headlines about [IT breaches](#) and the tribe’s implementation of [CIS security controls](#), a set of cybersecurity best practices.

But it was one early, virtual meeting that Walters never will forget, he says. It took place around the time that the World Health Organization declared COVID-19 a global pandemic in March. Samish leaders began holding daily Teams calls to discuss the nation’s situational awareness.

After several of those meetings, participants began to get a better feel for Teams functions, including [custom and blurred backgrounds](#).

One morning, a Samish leader entered the remote meeting with a new background: The bridge of the [“Enterprise,”](#) the spaceship from the TV series “Star Trek.”

“It added relief to a situation that was feeling super stressful,” Walters says. “At the time, we didn’t know what was happening. Schools were closing. We were talking about what we were going to do as a government.

“Then someone just changes their background, and it brings a little joy,” he adds. “It lightened the mood and it made things better.”

[More Articles by Bill Briggs](#)

“Maybe the journey isn’t so much about becoming anything. Maybe it’s about un-becoming everything

that isn't really you, so you can be who you were meant to be in the first place.” - Paul Coelho book!

“No matter what happens, who stays and who doesn't, know that things will change and you will grow, like the darkest of the nights you will always make it through.” - Dhiman

9] [I Tracked Down The Girls Who Bullied Me As A Kid. Here's What They Had To Say.](#) By Simone Ellin @ HuffPost

“Being able to zoom out and get some perspective ... underscored that we can never really know what’s going on in other people’s lives.”

If you were bullied or excluded as a child or adolescent, it might not surprise you to learn that studies have shown how [peer victimization can have long-term effects](#). That’s certainly been the case for me.

For decades, I’ve struggled with low-grade depression, anxiety and feelings of inadequacy and underachievement that have persisted despite years of therapy. I won’t argue that my mental health issues stem only from the bullying I encountered in school, but those experiences — and my lifelong shyness, hypersensitivity and self-consciousness, which made me a perfect target for bullying and exclusion — have had a lasting effect on me.

One day in 2019 while I was procrastinating at work, I started thinking about a girl who had rejected me in 7th grade. The rejection still stung whenever I thought about it. I wondered if she remembered how she ended our friendship and if she had any regrets.

Suddenly, I had an idea. Why not interview my former classmates from middle and high school — not only the people who bullied me, but all of my female peers, including the bullies, the bullied and those who seemed to be neither — about their experiences with the social scene when we were growing up in our Westchester, New York town? It seemed like such a good idea that I brushed aside the discomfort I felt about contacting people who, in some cases, I hadn’t spoken to in 40 years!

Thanks to social media, it was easy to find many of my former classmates. I began sending messages to them describing my project and I asked them if they would be willing to participate. Many of the women I contacted responded immediately. While some claimed they didn’t remember much about those years, others were enthusiastic and told me they had a lot to share.

So far, I have interviewed nearly 30 people, and I’m hoping to interview many more.

Sometimes individuals bully others because someone is bullying them. That was certainly the case with one former classmate I contacted who had relentlessly tormented me during middle school. At first, she was reluctant to talk to me. She ignored my initial Facebook message but when I followed up, she wrote back, “Simone, hope all is well with you. It’s a little hard for me to participate in this. I was not always nice to you. I am so sorry for that.”

I responded and reassured her that I was interviewing all of the women in our class and not singling her out. A few minutes later, I was stunned to find my telephone ringing. It was my former bully.

“I’m so sorry,” she said repeatedly during our call. “I swear I’m not a bad person. I think about what I did to you all the time. I don’t know why I chose you. I had a miserable home life.” She revealed some of the trauma she’d been through and, though I might have guessed that my classmate came from a troubled background, hearing it from her own lips made *all* the difference. I was finally able to forgive her, and (I hope) to help her to forgive herself.

I was surprised to learn that many of the “popular” girls paid a steep price for maintaining their social standing. As one former cheerleader told me, the girls in her clique were so mean to each other that she grew up distrusting other women. “I didn’t have a real female friend until I was 43,” she told me.

Another woman — whom I had also considered popular, smart and beautiful — learned early on that “loneliness was bad and I’d have to sacrifice to have friends.” She shared a story about being part of a group that excluded a classmate in 7th grade. “I was culpable and I think I immediately and forever thought that was my personal weakness. It was cruel ... I still feel guilty all these years later.” Subsequently, that woman called the excluded group member to apologize for hurting her. She later told me that the interaction brought great relief to both of them.

I spoke with about five women who were extremely athletic during their middle and high school years. All of them said that their athleticism served as a protective factor when it came to managing the social pressures of childhood and adolescence. Being good at sports made them feel confident and broke down barriers between the cliques that existed at school since they played on teams with members of various friend groups.

As one woman who transferred to our school in 9th grade told me, “I think because I was a swimmer, I had a certain amount of confidence. I had a recognition of my abilities and it gave me credibility and people didn’t pick on me.”

Another athlete shared a touching story about being a team captain in gym class. She recalled how, when picking teams, one girl in our grade was always chosen last. “One day, I don’t know why — I decided to pick [that girl] first. When I look back I can still see the smile on her face. It changed me that day. It made me realize that winning wasn’t the most important.”

My conversations with some of my classmates confirmed that many of the girls who appeared to have their lives together — and even be thriving — struggled just like the rest of us.

“I always felt like an outcast, like a little brown mouse,” said one woman who I thought was one of the prettiest, most athletic and well-liked in our class. “I’ll never forget the 7th grade dance. I was really excited about my outfit,” she told me. “I remember walking in and seeing this group of girls looking me up and down and giggling. It seemed like the whole dance stopped and I realized how mismatched I was. I thought, *I am really out of touch; I am really uncool*. I went to the bathroom and cried. Then I called my mother and she came and picked me up. To this day, I still feel like I can’t put clothes together.”

It was challenging to locate some of the women who were the victims of the most severe bullying. I assumed many didn’t want to be found and had chosen to leave their childhoods and adolescences far behind and never look back. However, I did manage to track down a few.

One woman told me, “I hated my school experience and experienced intense bullying ... It wasn’t until I reached high school that I located a community of people, and it was my perception that we were considered the ‘hippies’ and we carried a sort of stigma related to that.”

Another woman recalled being bullied at various times throughout elementary and middle school. “My mother told me to ‘turn the other cheek,’ but that didn’t work,” she said. “I had no way to stand up for myself, and at that age, kids don’t stand up for each other.” In 9th grade, she dropped out of school and ran away, eventually ending up in a private school where the bullying was even worse. In a third school, she said, the “kids had issues. I became a bully and I would kick them with my clogs. I got suspended and I remember thinking, *Now I’m the strong one.*”

As I continued my project and began to process what I was learning, I unexpectedly found myself reflecting on my own behavior during those years. I realized there were times when I chose to feel like a victim. I know there were classmates who admired my musical talent, who thought I was pretty and kind, but in some instances, I was too preoccupied with my own victimhood to recognize their affection.

I was also forced to admit that I wasn’t always kind to others. While I do not believe that I ever overtly bullied anyone, I certainly gossiped about others and shunned classmates who I worried might threaten my own tenuous social status. This was crystallized for me when a couple of women I interviewed mentioned that they felt “invisible” in school. “I wasn’t bullied, I just felt pushed aside like I didn’t belong here or there,” one woman told me. “It was just a feeling of being unwanted.” Hearing this made me regret not reaching out to her and others when I had the chance.

I was gratified by almost every conversation I had with my former peers. While some of my impressions were validated (everyone I talked to seemed to recognize the same peer hierarchy), I found that others were completely off base. Being able to zoom out and get some perspective after all of these years underscored that we can never really know what’s going on in other people’s lives. And, though I may have been hurt by some of these people, learning about what they were experiencing has pushed me to be less judgmental about others.

This project has finally given me the opportunity to forgive the women who rejected and tormented me. After decades of hurt and resentment, I now see them as they were — young girls experiencing their own trials and tribulations, some common to many of us, others more painful than I can imagine.

Perhaps most importantly, the experience of reconnecting with these women has helped to diminish years of insecurity and shame. I no longer see myself as inferior to the “popular” girls. In fact, my project has been greeted with admiration and excitement from many of the women I sought to impress so long ago. These changes have increased my self-confidence, and I have a new belief in my power, courage and worthiness. What’s more, my improved self-image has had positive implications for my work, relationships, and general sense of well-being.

I won’t say that this type of project is right for everyone and I can’t claim that others will get the same results if they decide to reach out to individuals from their past. For some people, leaving the past behind might be the right way forward. Not everyone changes. Not everyone will be open to discussing what happened, much less to expressing contrition.

But, for me at least, confronting my childhood demons has been tremendously healing, and that's something I wish for everyone, no matter who they are or were — no matter how they hurt or were hurt.

Simone Ellin is a freelance writer and associate editor of [Jmore](#) magazine.

9a] ***Do you have a compelling personal story you'd like to see published on HuffPost? Find out what we're looking for [here](#) and [send us a pitch!](#)***

"Comparison is the thief of joy." - Theodore Roosevelt

"The fact that I can plant a seed and it becomes a flower; share a bit of knowledge and it becomes another's, smile at someone and receive a smile in return, are to me continual spiritual exercises." - Leo Buscaglia

10] [How Norway is offering drug-free treatment to people with psychosis](#) By Lucy Proctor and Linda Pressly @ BBC News

Most people with psychosis take powerful drugs to keep delusions and hallucinations at bay - but the side-effects can be severe. In Norway, a radical approach is now on offer via the national health system for patients who want to live drug-free.

Malin was 21 when her life began to unravel.

She had struggled with severe depression and low self-esteem since she was a teenager.

Then a voice inside her head started telling her she was fat and worthless - and that she should kill herself.

"He became very angry. He kind of isolated me because he got a lot of power. Eventually I also starting seeing things, like tentacles coming out of the walls," she says.

Malin left her small home town near the fjords of northern Norway and went off to university. But it wasn't long before she had a complete breakdown that left her unable to get out of bed. Her family came to pick her up and soon she was committed to a psychiatric unit where she stayed for a year. It was the first of several long stays in psychiatric hospital wards where powerful anti-psychotic medication was the only treatment on offer.

"I was so full of drugs, my mind was just a blur. I just sat there passively watching my life go by with no connection to my emotions or feelings.

"And it's kind of been the same thing over and over. I've sought help and what they can give me is medication. And nothing really got any better.

"It's quite devastating. You just really want to get well. And people tell you that now this is your life, you should be content. And I cannot be content with this life."

Malin's experience with psychiatric medication isn't unusual. Although many people with psychosis find anti-psychotic drugs enable them to live a normal life, it is thought around 20% of patients do not respond well. The side effects can be life-changing - extreme fatigue, weight gain, increased cholesterol and diabetes.

In Norway, concerns about the overall benefit of these drugs are compounded by a long-standing problem with forced treatment, which is more common here than in many other countries according to the limited number of international comparisons that exist.

The UN Committee Against Torture has singled out Norway's use of forced isolation in mental health facilities as something that must change.

Like Malin, Mette Ellingsdalen was given anti-psychotic drugs during a period of 13 years when she suffered severe depressions - as a result of bipolar disorder - and was unable to care for herself. Unlike some of her fellow patients, she wasn't physically held down and injected with the drugs, but she still felt coerced; if she had refused the medication, she wouldn't have been admitted to hospital.

"I did have a big crisis that brought me into the system, things from my childhood that I struggled with strongly. The medication numbed some of the symptoms, but they also numb your own power and your own ability to deal with yourself. I lost my own story somehow," she says.

Eventually, after five years of trying but failing to live without medication, she was able to successfully taper off her drugs and in 2005 she joined the movement to change Norway's mental health system and is now chair of the patient user group, We Shall Overcome.

"The most easy way to reduce force is to give people a choice, to give them a treatment they can say yes to," she says.

Years of advocacy work by people like Mette paid off in 2016 when regional health authorities were ordered by health minister Bent Hoie to provide medication-free treatment wards. While medication-free treatment is available in some other countries, Norway became the first country in the world to embed it as an option in the state-run mental healthcare system.

At the time, Dr Magnus Hald was director of mental health and substance abuse at the University Hospital of northern Norway based in Tromsø, Norway's gateway to the Arctic. He'd worked for years in units where a lot of drugs were used and was keen to explore an alternative treatment - so he took on the job of running the hospital's new drug-free department.

"To me, the most important thing is that people are allowed to try different kinds of possibilities," he says.

"You have to tell the truth to the patient about how the medication works and what you know about it. And it seems that in co-operation with the pharmaceutical industry, they've told people things that are not completely correct about how medications work and what the risks are. For instance, there is a myth that there is some kind of chemical imbalance in the brains of people with serious mental problems [and] there is actually no research that really supports this."

Many of the patients at the unit in Tromso are tapering off drugs, which takes time and care.

"For most of the patients that we have, it works," says Hald. "Some patients will never go back to using any kind of drugs. And some patients might go back to drugs after some time and some patients may just reduce their doses."

Malin, now 34, is a patient at the unit.

She spends several weeks at a time in Tromso and then goes home for months in between, back to her dog, Jarek. It's not easy - she lives alone and has little mental health support nearby so her progress is slow - and the voice she hears has not completely disappeared.

Malin now mainly uses medication to calm her at night. She's going through intensive therapy while at the unit, an option she says she was never offered while on medication. Art has been central to her recovery.

"I'm trying to reconnect with my emotions instead of dulling down the symptoms. We explore what this voice wants and what do I need for him to stop?"

Malin now feels strong enough to think about working, hopefully in Norway's husky dog sledding tourism industry.

"I feel like for the first time ever I'm starting to find myself. I'm starting to build up my self-esteem and I can dare to feel some hope for the future, and that is pretty amazing."

Stories like Malin's are starting to be heard - and really listened to. But medication-free treatment is controversial in Norway.

For many patients, anti-psychotics are vital. Claudia (not her real name) now in her 20s, first became suicidal and delusional as a teenager. Part of her illness was believing the anti-psychotics she was offered were poisoned. So she was held down and forced to take them - and got better.

"But then after a period of stress, again, I got really sick, and had to start again. And now I've sort of come to terms that I need medication to at least keep my head above water.

"I don't really like the word 'normal', but I feel really good when I'm on medication. I feel like I can contribute during my studies, and hang out with friends and stuff like that, while when I'm off them, my functionality is just declining and I feel more stressed and chaotic and weird."

Critics say the medication-free movement is driven by ideology rather than evidence. Dr Jan Ivar Rossberg, a psychiatrist who lives and works in Oslo, likens it to failed experiments in the 1960s and 70s when patients were given free rein in therapeutic communities, encouraged to take LSD and regress to childhood. This methodology was called "anti-psychiatry".

"History has shown us that this approach doesn't work, so we have stopped using it. We don't have treatment approaches shown to be effective without medication," he says.

He points to evidence that shows the best outcomes for people with psychosis involve medicating through the initial acute phase, when delusions and hallucinations are strongest, and staying on the drugs for around two years before trying to taper down to a lower dose.

Magnus Hald is not convinced by this. He is about to start a research project to track patients in the years after they've been at the medication-free unit in Tromsø. There have been no suicides among his medication-free patients, but so far the approach lacks a strong evidence base.

"The idea of evidence-based medicine is difficult within mental health as a whole, although it's of course an aim that we should have," he says. "At the same time, we know that diagnoses in psychiatry are just a classification system. Even though you give a person a diagnosis of schizophrenia, you do not see any malfunction in the brain besides what you experience by engaging in a conversation with the person. You cannot see anything on the CT or the MRI images."

There is controversy also about how the medication-free program could develop in future.

So far, patients in the acute stage of psychosis cannot be referred to medication-free units. User groups are hoping to change that, arguing that this phase often passes on its own if people can be in a place of safety and support while they weather the storm.

But Dr Tor Larsen, a specialist in acute psychosis, worries about this idea. He points out that most patients with untreated psychosis do not realize they are ill so will not agree to be treated with or without drugs - and drug-free units operate on a voluntary basis.

"It's almost by definition a part of having hallucinations or delusions that you don't think you're sick, if you are in contact with God or if you think you are the reborn Napoleon," he says. "So in cases where people have devastating psychosis, it might be important to give them treatment even on an involuntary basis."

Studies show many people with untreated psychosis end up living on the streets, he says, and that about 30% of patients with untreated psychosis commit crimes or are violent towards relatives and others.

There is also an increased rate of homicide.

He cites as an example the random murder of 67-year-old Bjorg Marie Skeisvoll Hereid in a graveyard in 2019 by a psychotic man with an axe. The murder shook the quiet town of Haugesund in the southwest of Norway and made national headlines.

The murderer wasn't on a drug-free treatment program, but he had chosen to come off his medication, and was also using illegal drugs. The tragic incident sparked debate about a change in the law made in 2017, which states that patients who are able to make decisions about their own treatment can no longer be involuntarily committed or forced to take medication, unless they pose an imminent risk. Critics say this has made it more difficult for doctors to commit potentially dangerous people to hospital for treatment.

Hakon Rian Ueland, 54, one of the campaigners who helped bring about medication-free treatment in

Norway, believes that this conversation about danger hides an agenda to shelter society from the often challenging behavior of people going through psychosis. "They are putting forward an agenda to sedate people," he says, adding that symptoms that alarm neurotypical people may be important for the person experiencing them. "When you go through psychosis it can be very dramatic."

He says there are still bureaucratic and cost barriers to people who want to access the medication-free services.

"The whole movement needs more oversight," he says. "We need a review of what has happened so far. I would like to see someone who goes in from outside the system and has the power to ask for change."

Psychiatrists and patients around the world are watching what happens in Norway, where the government has taken decisive action to try and improve the lives of psychotic people by giving them more power over their lives. Globally, there's a reassessment of the way people with mental illness are treated and a will to reduce coercion.

Medication-free treatment could be just another therapeutic fad - or it could have the power to change psychiatry for good.

"That is life... to begin again when everything is lost!" - A.J. Cronin

"It is easier to build strong children than to repair broken men" - Frederick Douglass

11] [Pandemic's mental health burden heaviest among young adults](#) By [Dana Alkhouri](#) @ ABC News

In a recent survey, almost two-thirds of 18- to-24-year-olds reported symptoms. - 9 min read @ website

11a] [COVID-19 pandemic's mental health toll on young adults](#) - Video - ABC News 2:26 minutes

12] [Laundry List of Adult Children of Alcoholics & Dysfunctional Families](#)

The Laundry List – 14 Traits of an Adult Child of an Alcoholic

Note: **The Laundry List** serves as the basis for [The Problem](#) statement.

The website also shares the **The Flip Side of The Laundry List**

12a] [Adult Children of Alcoholics & Dysfunctional Families](#)

Adult Children of Alcoholics (ACA)/Dysfunctional Families is a [Twelve Step, Twelve Tradition](#) program of men and women who grew up in dysfunctional homes.

We meet to share our experience of growing up in an environment where abuse, neglect and trauma infected us. This affects us today and influences how we deal with all aspects of our lives.

ACA provides a safe, nonjudgmental environment that allows us to grieve our childhoods and conduct

an honest inventory of ourselves and our family—so we may (i) identify and heal core trauma, (ii) experience freedom from shame and abandonment, and (iii) become our own loving parents.

“Live beautifully. Dream passionately. Love completely” - Picture Quotes

“Time doesn't heal all wounds, only distance can lessen the sting of them.” - Shannon Alder

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

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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