



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 August 2021

Hi Folks,

Welcome to the month of August...from my part of the country here in New Hampshire-land it is a time of summer and heat...but the whole month of July and coming into August has been more like a monsoon season in early spring or late fall – The April Showers finally showed up in July. I wish some of the rains would make their way to those parts of the country and the world parched from lack of rain and dealing with horrific fires. Even our climate can be traumatizing....so self-care is VIP.

Self-care, hope and healing is echoed in many of the articles, news, stories and podcasts shared in the newsletter. If you have something to share for future newsletters, please let me know @ mikeskinner@comcast.net or mike.skinner@survivingspirit.com

Take care, Michael

“Self-care is never a selfish act - it is simply good stewardship of the only gift I have, the gift I was put on earth to offer to others.” - Parker Palmer

“I found in my research that the biggest reason people aren't more self-compassionate is that they are afraid they'll become self-indulgent. They believe self-criticism is what keeps them in line. Most people have gotten it wrong because our culture says being hard on yourself is the way to be.” - Kristen Neff

Newsletter Contents:

- 1] Depression, burnout and how to talk about mental health at work – My story, by Ann Diment @ Safety & Health Practitioner
- 2] Her dad died on 9/11. Now, this Chesapeake woman uses horses to help veterans cope with trauma.
- 3] 6 Hidden Signs of Complex PTSD (cPTSD) - MedCircle – YouTube
- 4] The Higher Practice Podcast for Optimal Mental Health: Complex PTSD: What's Lurking Beneath the Surface - HPP 04 on Apple Podcasts
- 5] Swimming gives your brain a boost – but scientists don't know yet why it's better than other aerobic

activities

- 5a] Swimming for weight loss and mental health By Dr. Mark Lieber @CNN
- 6] Silhouette of a Songbird: Elizabeth Shane -Books @ Amazon.com: Books
- 6a] The Healing Power of Poetry - Gretchen Schmelzer @ The Trail Guide
- 7] Defense Sec Lloyd Austin to troops: 'Mental health is health. Period.
- 8] FREE Ask Me Anything About Employment webinar: Long-Term Unemployment: A Social Determinant Underaddressed Within Community Behavioral Health Programs
- 9] How to Stop Catastrophizing: An Expert's Guide by Linda Blair
- 10] Male Survivors Of Sexual Abuse Struggle To Find Treatment Podcast @ NPR
- 11] Holding Hope by Dave Andre
- 11a] Connections Peer Support Center in Portsmouth, NH
- 12] The Powerful Connection Of Music With Michael Skinner - Cybertrap 60

“Other struggling people aren't the enemy.” - Nathan Monk

1] [Depression, burnout and how to talk about mental health at work](#) – My story, by Ann Diment @ Safety & Health Practitioner

Ann Diment is Director of Work Safe and Well, transforming burned out professionals into resilient and compassionate leaders. She wants to smash the stigma of talking about mental health, to empower everyone to start those ‘difficult’ conversations so they can become more confident and creative leaders.

Strengthened with a personal understanding of how stigma and bullying at work can cause mental health challenges, Ann utilises key elements of her own recovery from [PTSD](#) and depression to teach business leaders how to implement a more creative and human-centered approach to well-being at work.

In this interview she talks about her own mental health challenges, including how they have affected her during her career. She goes on to talk more generally about how workplaces can become more inclusive and support those who are struggling.

[This interview is part of a series](#) for [Women in Health and Safety](#). As a member of the committee my goal is to amplify the voices of women in the profession. Some of the topics covered affect women

more than men. Some are deeply personal. It's my belief that we bring our whole selves to work and therefore should be able to talk about all sorts of issues that affect us, day-to-day, in a work setting.

Two things have struck me throughout this series. 1) We all have so much in common. 2) People are often very willing to open up, if they're given a safe opportunity to do so with someone who is willing to listen without judgement. So, my hope is that issues discussed in this series resonate with readers, perhaps making some feel less alone, perhaps even giving some the confidence to share their own stories. I also hope readers will be encouraged to check in on colleagues, talk about the whole selves we bring to work, and most importantly, be there to listen.

What is your experience of PTSD and depression? - "My story is a classic one of having adverse childhood experiences and not realizing until adulthood how it had made my mental health suffer. I ended up working in health & safety, and I've later realized that's because I wanted to keep people safe because of my own experiences. In fact, I often felt so passionate about health & safety that I'd get really stressed out if people didn't do what they were supposed to be doing to protect themselves and others from harm.

"I had various periods of mental ill health during my 20s and was diagnosed with depression. But I wasn't diagnosed with complex PTSD until I was 38. Navigating that early in my career was quite tough.

"Key symptoms of PTSD are perfectionism and avoiding criticism or conflict. In some ways it helped me do a better job, but that came at my own expense. It can lead to burnout because you work hard to overachieve. And I want to help other people recognize those symptoms."

At one point you had a particularly difficult period at work – what happened? - "I was working at a university and was training colleagues about mental health and setting up peer support teams. I also got the university to sign up to pledge to support people with mental illness and I did lots of work to help support staff with mental health problems. But I still felt too stigmatised to admit my own mental health problems.

"It came to a point where my mental health did suffer. And I wasn't treated very well, even though I'd been doing all this work to make the university more aware of and accepting of mental illness. I went through a stressful situation and ended up having nine months off and I came out of it having to reduce my hours in order to reduce my exposure to the stressors instead of the employer dealing with the workplace factors that caused them.

"After the way I was treated, I became determined to smash the stigma of talking about mental health and I've been doing that now for the past 10 years.

"I'd also like to highlight a separate, personal issue which affected me at work. I lost a baby in my 20s. I had told everyone at work that I was pregnant and then a couple of weeks later I had a miscarriage which caused me to suffer a breakdown. I had a brilliant boss, but she said to me 'it's your own fault, you take too much on'. I thought, wow. I couldn't believe she said that to me. But that kind of thing actually gets said all the time. And it's absolutely not right."

Have attitudes about mental illness reached the right place, in your opinion? - "It feels like it's in

the news all the time. Every time a big mental health news story comes out, it starts a conversation again. But in the workplace, especially in more professional roles, it still feels like it's a weakness to admit you've got mental health challenges. And we need to revisit that.

“Some mental health challenges can actually be a strength, but employers must build into that the compassion and understanding of the individual person. Employers have to recognize that everyone's different. So, the same workload or working environment can affect people in different ways, depending on their past experiences and their current life situation.

“I'm also seeing a move towards presenteeism and burnout. I'm seeing clients who are brilliant at their jobs, but they're just exhausted because of changes and uncertainty. Even people who have never had mental health challenges in their life before are suffering this year because of what we've been through with the [pandemic](#).”

[What leads to burnout?](#) - “I've done a lot of research on this. The definition of burnout, according to the WHO, is a workplace syndrome. It's not about the individual. And that's where the stigma comes. If somebody is feeling signs of burnout, it's not them that's the problem, it's the work and how it's organized. It's to do with workload and communication, not weakness in an individual.

What can workplaces do to support colleagues with depression? - “Have trained mentors or listening teams who can get to people before they reach crisis stage. Sometimes you can feel you're coming into a period of depression and can talk about it and manage it if the support is there.

“If people do get to the stage where they need time off, when they're off, don't pressurize them to come back to work. Many people don't understand that depression isn't just psychological, it's physical as well. It's your body telling you, ‘you need to slow down and heal’.

“Understand the individual you're working with, listen to them. Their experience of depression could be completely different to somebody else's, and their return to work process might need to be completely different too.

“And keep in contact with that person. The longer they've been off work, the more difficult it will be for them. When I had a particularly bad episode of depression, even opening an email was triggering, because I was terrified of what that email was going to say.”

What can we all do to support people close to us who might be going through a difficult time?

“Ask twice. We all say, ‘Are you okay?’ And the standard response is ‘I'm fine’, but actually the person you're asking might not be fine, but they don't feel they can go into detail, or they might not want to burden anyone with their issues.

“We often wear masks. When you're depressed and trying to hide it, you can come across as bubbly on the surface, but underneath not be ok. It's knowing people well enough to recognise when they're not themselves. That's quite hard with remote working. So, if you're a team leader, checking in with people, and I mean *really* checking in with them, just to see how they are *actually* doing is so important.

“Some people, men in particular, tend to open up more if they’re doing an activity side-by-side rather than face-to-face. It’s often easier to talk openly when you’re making a cup of tea, on a cigarette break, walking, or something like that, rather than when you’re sat face-to-face. People don’t tend to be comfortable being questioned face-to-face in a meeting room.”

Any final tips? - “One idea I like is at Christmas do a secret Santa, but instead of buying a gift, donate to your colleague’s favourite charity. People affiliate with charities because of their own personal experiences and just by talking about your chosen charity and why you support it, opens a whole conversation. And you get to know that person better. It also removes all hierarchy because the CEO and cleaner could find they have something very personal in common. It’s peer support on a human level rather than a business level.

“My mission is to start more conversations about mental health. You can’t have enough conversations about this because somebody might be fine one day, but they’re not the next. When you share experiences, it doesn’t feel so isolating. It’s important to build a community in your workplace, encouraging people to speak, rather than ignoring it or isolating people.”

Further resources:

[Mind](#)

[Rethink Mental Illness](#)

For more information about the [Women in Health and Safety](#) network see our hub page here.

To learn more about the [Women in Health & Safety Network workstreams and mailing list](#), click here.

[Read more from this Women in Health & Safety interview series.](#)

Safety & Health Podcast - In this episode, [‘Burnout, stress and being human’](#), Heather Beach is joined by Stacy Thomson to discuss burnout, perfectionism and how to deal with burnout as an individual, as management and as an organisation.

Subscribe and tune in the [Safety & Health Podcast](#) to discover the latest issues facing the health and safety profession, and stay on-top of the developments affecting your role, from working at height, lone working and common workplace hazards, to safety culture, behaviors, occupational health and mental health and wellbeing. [Join the conversation today!](#)

“You wake up every morning to fight the same demons that left you so tired the night before, and that, my love, is bravery.” – Unknown

“Nourishing yourself in a way that helps you blossom in the direction you want to go is attainable, and you are worth the effort.” - Deborah Day

2] [Her dad died on 9/11. Now, this Chesapeake woman uses horses to help veterans cope with trauma.](#)
By Gordon Rago @ The Virginian-Pilot

Kayla Arestivo has never seen war. But she has felt it.

As a kid on Long Island, she was 8 when the planes hit the skyscrapers in Manhattan. Her dad, William Fallon Jr., was on the 103rd floor of the north tower. He and every one of his colleagues at Cantor Fitzgerald at work that morning on floors 101 through 105 died.

It took time for Arestivo to grasp what had happened. Her life became consumed by night terrors, eating disorders, addiction, an attempted suicide as a teenager. She saw counselors, but what she really needed was a community.

“I needed somebody to tell me I wasn’t crazy,” Arestivo said. “That it was OK to feel this way.”

Twenty years later, on a 15-acre farm in Chesapeake, Arestivo, 28, is working to cultivate what she never truly found in the wake of her trauma: a space for people to heal together. Through a nonprofit called Trails of Purpose, her small staff of counselors and five rescued horses help military veterans cope with issues ranging from post-traumatic stress, sexual assault trauma, marital troubles and anxiety from constant moves.

And it’s expanding: The city’s planning commission voted unanimously this month to recommend approval of a conditional use permit to operate the business from her family’s Hickory-area home before the plan heads for a final vote next month by the City Council.

The decision means Arestivo will have more space for her practice, which also helps relatives of military personnel struggling with mental health issues. Her husband, Kyle, helps her run the organization.

She uses the horses for therapy; the 1,000-pound animals help her identify the source of her clients’ pain. Her practice focuses largely on what she calls “ground work” — that is, activities that involve handling the horses on foot. For one exercise, she asks clients to team up with one person blindfolded while the other looks on and tells them how to lead the animal through a course. Clients seldom ride the horses — some veterans she works with are in wheelchairs because of service-related injuries.

For Arestivo, horses can be humbling, even for men and women trained as warriors. She picked each animal with great care. She’s got a mini horse named Olive who is great with kids. Drummer is the alpha of the herd because he’s the most sensitive and responsive with clients. Each one has an even temperament and likes people.

Horses are prey animals so they’re always on alert. They’re also herd animals so they look out for each other. These qualities make them great at sensing uneasiness in humans. When clients focus on a task with the horses, they relax. And being on a farm helps veterans and active-duty members enjoy the freedom and privacy of the land they roam in.

“When you move around, when you start doing something, your brain is less careful of what it’s going to say,” Arestivo said.

Her services are free of charge. She relies entirely on donations and on grants, which dried up during the pandemic.

Her farm, which she calls Amber Acres, stretches behind her family's home. They have pigs and a gaggle of geese that came with the property. A small barn has a long folding table inside for therapy sessions, and the horses have a small round pen to walk around in.

Because of the trauma she endured from losing her father, the New Yorker-turned-farmhand has an immediate connection with veterans. She can relate to what they're going through.

Arestivo shares another connection: Some of her clients may have been driven to join the military in the wake of the Sept. 11 terrorist attacks just as it drove her to combat trauma through her nonprofit. Some are now grappling with the lingering effects of war on their mind and body and have found Arestivo's nonprofit as a place to help.

The work is meaningful for Arestivo but it can also trigger secondary trauma. In therapy, she asks veterans to paint a vivid picture of their pain and, as a counselor, she sometimes absorbs it.

Arestivo doesn't always talk with clients about what happened to her dad, but she said some of them appreciate having their experiences understood and validated.

"I can say things I wish people had said to me," she said.

About 10 miles away in Virginia Beach, Arestivo has teamed up with Lynn Bukowski, who runs a similar nonprofit called Landing Zone Grace. Arestivo leases some horses to her on her 38-acre farm near Pungo for weekly classes.

Bukowski is living out the dream of her husband, Steve, who was a Navy SEAL for 32 years and wanted to build a retreat for veterans returning from war. When he was serving, he started bringing his platoon home for meals. He died in 2010 from a heart attack he suffered during a bicycle ride, but Bukowski wanted to keep that space going. She knew the community was tight-knit and didn't trust outsiders.

On her property, they feel safe. The horses were a great addition, she said.

"You have to be present at all times with a large animal," Bukowski said. "Instead of concentrating on the worries and going down the valleys and roads of what's wrong with my life and the panic that starts with how I'm going to fix that, you have to be physically present with a horse."

"There is no such thing as a single-issue struggle because we do not live single-issue lives." – Audre Lorde

"Kindness is spreading sunshine into other people's lives regardless of the weather." – RAKtivis

3] [6 Hidden Signs of Complex PTSD \(cPTSD\) - MedCircle](#) – YouTube 10:05 minutes

Living with post-traumatic stress disorder (PTSD) can be an uphill battle, but what about its more sinister cousin, complex PTSD (cPTSD)? When you've endured repeated trauma over a long period of time - whether that's wartime, child abuse, sexual assault, or more - you may find that you're

experiencing dissociations, distortions of perspective, or emotional instability, in addition to invasive flashbacks. These are all signs of cPTSD. Patients need to be able to properly distinguish the two in order to receive the therapeutic care they need.

In this video, MedCircle host Kyle Kittleson sits down with clinical psychologist Dr. Ramani Durvasula to discuss the 6 hidden signs of cPTSD that both patients and supporters should be aware of:

[0:00](#) Intro

[01:58](#) Lapses in judgment, concentration, and problem-solving

[02:20](#) Self-hatred and suicidal ideation

[03:25](#) Flashbacks of trauma

[05:11](#) Physical reactions to trauma

[05:39](#) Dissociation

[07:18](#) Amnesia

Watch the FULL MedCircle series on cPTSD with Dr. Ramani here: <https://bit.ly/3gPG4NM> - CPTSD 101: Here's How It Actually Affects Sufferers - Complex PTSD (CPTSD): Finding Renewed Strength After Chronic Suffering

Want to see more with Dr. Ramani on working through trauma, narcissism, borderline personality disorder, and MORE? Keep checking out our YouTube Channel or visit medcircle.com.

“One’s dignity may be assaulted, vandalized and cruelly mocked, but it can never be taken away unless it is surrendered.” - Michael J. Fox.

“The art of life lies in a constant readjustment to our surroundings.” - Kakuzō Okakura

4] [The Higher Practice Podcast for Optimal Mental Health: Complex PTSD: What’s Lurking Beneath the Surface](#) - HPP 04 on Apple Podcasts 48:19 minutes

Dr. Arielle Schwartz, trauma expert and EMDR Therapy consultant is going to cover Complex PTSD and how it differs from what typically comes to mind when we think of trauma. Trauma exists on a spectrum and many people walking down the street, whether it’s you or me, may have a degree of Complex PTSD that we are attempting to overcome in ourselves.

Trauma theories and therapies have been gaining a lot of attention in our field in the last decade. It’s really for a good reason. Neuroscience and the advancements of somatic therapies have unlocked new ways of working with trauma that were very difficult to treat.

We will look closely at what's happening in our brain when we can't process an overwhelming event and get traumatized, why it’s important to distinguish between the different forms of trauma and also differential diagnosis between others disorders.

A major piece of healing complex PTSD comes from understanding post-traumatic growth models, and how resiliency and wisdom often rise from the places that were so difficult in our past.

In this episode you’ll learn:

Why one person experiences trauma during an event and others don't

What's happening in our brain when we can't process an overwhelming event

How is Complex PTSD different from other forms of trauma

Differential diagnosis between Complex PTSD and others disorders

The evolutionary purpose of dissociation and how to overcome it

The interplay between traumatic histories and relationship issues

Visit www.higherpractice.com/podcast to get the show notes for this episode and to learn more about Arielle's full course in the Higher Practice Institute.

"If you have made mistakes, even serious ones, there is always another chance for you. What we call failure is not the falling down, but the staying down." - Mary Pickford

"Gratitude unlocks the fullness of life. It turns what we have into enough, and more. It turns denial into acceptance, chaos into order, and confusion to clarity." - Melody Beattie

5] [Swimming gives your brain a boost](#) – but scientists don't know yet why it's better than other aerobic activities @ The Conversation - Academic rigor, journalistic flair

It's no secret that [aerobic exercise can help](#) stave off [some of the ravages](#) of [aging](#). But a [growing body of research](#) suggests that swimming might provide a unique boost to brain health.

Regular swimming has been shown to improve [memory](#), [cognitive function](#), [immune response](#) and [mood](#). Swimming may also help repair damage from stress and [forge new neural connections](#) in the brain.

But scientists are still trying to unravel how and why swimming, in particular, produces these brain-enhancing effects.

As a [neurobiologist trained in brain physiology](#), a fitness enthusiast and a mom, I spend hours at the local pool during the summer. It's not unusual to see children gleefully splashing and swimming while their parents sunbathe at a distance – and I've been one of those parents observing from the poolside plenty of times. But if more adults recognized the cognitive and mental health benefits of swimming, they might be more inclined to jump in the pool alongside their kids.

New and improved brain cells and connections - Until the 1960s, scientists believed that the number of neurons and synaptic connections in the human brain [were finite](#) and that, once damaged, these brain cells could not be replaced. But that idea was debunked as researchers began to see ample evidence for the birth of neurons, or [neurogenesis](#), in adult brains of [humans and other animals](#).

Now, there is clear evidence that [aerobic exercise](#) can contribute to neurogenesis and play a key role in helping to reverse or repair [damage to neurons and their connections](#) in both mammals and fish.

Research shows that one of the key ways these changes occur in response to exercise is through increased levels of a protein called [brain-derived neurotrophic factor](#). The neural plasticity, or ability of the brain to change, that this protein stimulates has been shown to boost [cognitive function](#), including [learning and memory](#).

Studies in people have found a strong relationship between [concentrations of brain-derived neurotrophic factor](#) circulating in the brain and an increase in the size of the hippocampus, the [brain region responsible for learning and memory](#). Increased levels of brain-derived neurotrophic factor have also been shown to [sharpen cognitive performance](#) and to help [reduce anxiety](#) and [depression](#). In contrast, researchers have observed mood disorders in patients with [lower concentrations of brain-derived neurotrophic factor](#).

Aerobic exercise also promotes the release of [specific chemical messengers called neurotransmitters](#). One of these is serotonin, which – when present at increased levels – is [known to reduce depression and anxiety](#) and [improve mood](#).

In [studies in fish](#), scientists have observed changes in genes responsible for increasing brain-derived neurotrophic factor levels as well as enhanced development of the dendritic spines – protrusions on the dendrites, or elongated portions of nerve cells – after eight weeks of exercise compared with controls. This complements studies in mammals [where brain-derived neurotrophic factor](#) is known to increase neuronal spine density. These changes have been shown to contribute to [improved memory](#), [mood](#) and [enhanced cognition](#) in mammals. The greater spine density helps neurons build new connections and send more signals to other nerve cells. With the repetition of signals, connections can become stronger.

But what's special about swimming? - Researchers don't yet know what swimming's secret sauce might be. But they're getting closer to understanding it.

Swimming has long been recognized for its [cardiovascular benefits](#). Because swimming involves all of the major muscle groups, the [heart has to work hard](#), which [increases blood flow throughout the body](#). This leads to the [creation of new blood vessels](#), a process called angiogenesis. The greater blood flow can also lead to a [large release of endorphins](#) – hormones that act as a natural pain reducer throughout the body. This surge brings about the sense of euphoria that often follows exercise.

Most of the research to understand how swimming affects the brain has been done in rats. Rats are a good lab model because of their [genetic and anatomic similarity to humans](#).

In one study in rats, swimming was shown to [stimulate brain pathways](#) that suppress inflammation in the hippocampus and inhibit apoptosis, or cell death. The study also showed that swimming can help support neuron survival and reduce the cognitive impacts of aging. Although researchers do not yet have a way to visualize apoptosis and neuronal survival in people, they do observe similar cognitive outcomes.

One of the more enticing questions is how, specifically, swimming enhances short- and long-term

memory. To pinpoint how long the beneficial effects may last, [researchers trained rats](#) to swim for 60 minutes daily for five days per week. The team then tested the rats' memory by having them swim through a radial arm water maze containing six arms, including one with a hidden platform.

Rats got six attempts to swim freely and find the hidden platform. After just seven days of swim training, researchers saw improvements in both short- and long-term memories, based on a reduction in the errors rats made each day. The researchers suggested that this boost in cognitive function could provide a basis for using swimming as a way to repair learning and memory damage caused by neuropsychiatric diseases in humans.

Although the leap from studies in rats to humans is substantial, research in people is producing [similar results](#) that suggest a [clear cognitive benefit](#) from swimming across all ages. For instance, in one study looking at the impact of swimming on mental acuity in the elderly, researchers concluded that swimmers had [improved mental speed and attention](#) compared with nonswimmers. However, this study is limited in its research design, since participants were not randomized and thus those who were swimmers prior to the study may have had an unfair edge.

Another study compared cognition between land-based athletes and swimmers in the young adult age range. While water immersion itself did not make a difference, the researchers found that 20 minutes of moderate-intensity breaststroke swimming [improved cognitive function](#) in both groups.

Kids get a boost from swimming too - The brain-enhancing benefits from swimming appear to also boost learning in children.

Another research group recently looked at the link between physical activity and [how children learn new vocabulary words](#). Researchers taught children age 6-12 the names of unfamiliar objects. Then they tested their accuracy at recognizing those words after doing three activities: coloring (resting activity), swimming (aerobic activity) and a CrossFit-like exercise (anaerobic activity) for three minutes.

They found that children's accuracy was much higher for words learned following swimming compared with coloring and CrossFit, which resulted in the same level of recall. This shows a clear cognitive benefit from swimming versus anaerobic exercise, though the study does not compare swimming with other aerobic exercises. These findings imply that swimming for even short periods of time is highly beneficial to young, developing brains.

The details of the time or laps required, the style of swim and what cognitive adaptations and pathways are activated by swimming are still being worked out. But neuroscientists are getting much closer to putting all the clues together.

For centuries, people have been in search of a [fountain of youth](#). Swimming just might be the closest we can get.

5a] [Swimming for weight loss and mental health](#) By Dr. Mark Lieber @CNN

What regular swimming does for the body and mind

“Don't the stress the could haves, if it should have, it would have.” - Unknown

“Stress is caused by being here but wanting to be there.” - Eckhart Tolle

6] [Silhouette of a Songbird: Elizabeth Shane](#) – Books @ Amazon.com:

Elizabeth is a survivor of childhood sexual abuse. The traumatic effects of this left many emotional scars as well as complex PTSD, in a life often hidden by silence. Throughout different stages of her recovery, *Silhouette of a Songbird* witnesses Elizabeth's personal struggle on her journey to unlock the pain of reclaiming her voice through the power of poetry. By sharing her own experience, she hopes this will provide support and strength to others who have suffered similar childhood trauma, with the knowledge that they are understood and not walking through the storm alone.

“My nonprofit outpatient counseling center, Bethesda, Inc., is on a mission to heal the trauma of childhood sexual abuse through therapy, education, and prevention. We are so grateful for Elizabeth's book which uses the power of written word to beautifully describe the struggle, pain, and hope that comes out of the process of healing our internal traumas. We will be using this book as a therapeutic directive for our young clients who have experienced the trauma of childhood sexual abuse. Thank you for your wonderful book Elizabeth! Your words will bring hope to those who have lost so much.” - Healing Children

“These poems are beautiful and heartbreaking. As a survivor of sexual assault and a therapist with over 20 years of experience working with survivors, I found these poems powerful and validating. I highly recommend and greatly appreciate this wonderful book. I keep a copy in my office to inspire my clients who often use writing as a path to healing from trauma.” - Deborah Okrina

“So many of these poems express true fear, anger and pain, yet they end with strength, the promise of emotional freedom, and faith that recovery is imminent. Elizabeth's poetry describes a journey of uncertainty, which evolves into an exclamation of her own worth and value as a survivor.” - Laurie Ostroff

6a] [The Healing Power of Poetry](#) - Gretchen Schmelzer @ **The Trail Guide** - a Web-mag intended to support the healing of repeated trauma. It is inspired by exploration, innovation, research, learning, development, nature, art, writing, community work, and all therapeutic activities. It is a guide for all: for all of those who have experienced PTSD and repeated trauma, all those who work with them and all of those who love and support them.

“Poetry is a life-cherishing force. For poems are not words, after all, but fires for the cold, ropes let down to the lost, something as necessary as bread in the pockets of the hungry.” - Mary Oliver

“The truth does not change according to our ability to stomach it.” - Flannery O'Connor

7] [Defense Sec Lloyd Austin to troops: 'Mental health is health. Period.](#) By [Tom Vanden Brook](#)
USA TODAY

Defense Secretary Lloyd Austin expressed deep concern about suicide among troops during a visit to

U.S. forces stationed in Alaska where there has been an alarming spike in those deaths.

At least [six soldiers have died by probable suicide in Alaska](#) since Dec. 30, and suicide is suspected in several others, USA TODAY has reported. That surge has followed several years of increases in suicide deaths among troops across the armed services.

In 2018, 326 active-duty troops died by suicide, with the toll increasing to 350 in 2019 and 385 in 2020, according to the most recent Pentagon figures. The number of suicide deaths fluctuates over time as investigations establish the cause of death.

Austin cited stress on troops and the stigma of seeking treatment for mental health issues as contributing factors. Last week, Army experts and Defense officials cited the [stress caused by life in the military, demands for troops to confront China's rising influence](#) and access to counseling.

"I'm mindful of the stress that they're often under and I'm deeply concerned about the suicide rates, not only here but across the force," Austin told reporters Saturday during a visit at Eielson Air Base in Alaska. "As you've heard me say before, one loss by suicide is too many and while we're working hard on this problem, we have a lot more to do. And I believe that has – it has to start with removing the stigma attached to mental health issues."

Austin raised the issue of suicide in nearly every visit he had with military, civilian and tribal leaders during his visit to Alaska, according to a Defense official who was not authorized to speak publicly about the meetings.

In Alaska, the suicide toll in 2021 among the roughly 11,500 soldiers stationed there already has nearly matched last year when seven soldiers died by suicide while stationed with U.S. Army Alaska. The main Army posts there are Fort Wainwright in Fairbanks and Joint Base Elmendorf-Richardson in Anchorage.

Soldiers based in Alaska face minus 60-degree cold, frequent training and deployment and geographic and social isolation. The relatively high cost of living, alcohol abuse and sleep disorders in the Land of Midnight Sun and its long, dark winters can be problematic as well. Alaska's civilian population had the second highest suicide rate in the nation in 2019, according to the CDC. The Army has spent more than \$200 million in recent years in Alaska to combat suicide by improving living conditions there.

Service members and veterans who are in crisis or having thoughts of suicide and those who know a service member or veteran in crisis can call the Military Crisis Line/Veterans Crisis Line for confidential support 24 hours a day, seven days a week, 365 days a year. Call 1-800-273-8255 and Press 1 or text 838255 or chat online at [VeteransCrisisLine.net/Chat](https://www.veteranscrisisline.net/Chat).

"I keep moving ahead, as always, knowing deep down inside that I am a good person and that I am worthy of a good life." - Jonathan Harnisch

"Sometimes you have to swim through a bit of darkness if you're ever going to surface in the light." - Sara Ell

8] [FREE Ask Me Anything About Employment webinar: Long-Term Unemployment: A Social](#)

Determinant Underaddressed Within Community Behavioral Health Programs

You're invited to ask an expert about another interesting topic related to employment! This free event is not a presentation, but rather an interactive question & answer webinar.

Wonder what researchers are finding out about employment for people with mental illnesses/mental health conditions? The Making Sense of Employment Research webinar series is designed to discuss a recent published research study in a clear and relevant way, even for those who know little or nothing about research.

Join us for our next webinar:

Long-Term Unemployment: A Social Determinant Underaddressed Within Community Behavioral Health Programs presented by Joe Marrone, M.Ed.

Monday, August 9th at 12:00PM EST

Registration link:

<https://www.eventbrite.com/e/long-term-unemployment-an-social-underaddressed-determinant-tickets-160823394101>

Please submit webinar questions to Gretchen Grappone, LICSW, at grappone@bu.edu

About this Event - Ask Me Anything About Employment Series: A Question and Answer Webinar

The Center for Psychiatric Rehabilitation at Boston University
National Resource Center on Employment

Requirements - The webinar will be conducted through Zoom. Once you complete the registration process you will receive an e-mail with the Zoom link to join the webinar. If you do not have the Zoom app installed on your computer, tablet, or smartphone please allow for a few minutes before the beginning of the webinar to follow all the instructions.

Accommodation Requests - Boston University provides reasonable accommodation upon request. Please send an email to grappone@bu.edu 14 days prior to the event with the specific accommodations you require. If less than 14 days remain until the event, please submit your request the same day you register, or as soon as possible, so we can make every effort to accommodate you.

This event is supported by funding from the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR grant 90RTEM0004). NIDILRR is a Center within the Administration for Community Living (ACL), Department of Health and Human Services (HHS). The contents of this project do not necessarily represent the policy of NIDILRR, ACL, HHS, and you should not assume endorsement by the Federal Government.

Register for the FREE webinar now, and Ask Any Questions!

<https://www.eventbrite.com/e/long-term-unemployment-an-social-underaddressed-determinant-tickets-160823394101>

“Don't sit and wait. Get out there. Feel life.” - Rumi

“The non-disclosure of emotional pain can be deeply traumatic. It leads to depression. In such situations of vulnerability, one must choose to speak to a person you trust. Someone who could care for you and heal you.” - Avijeet Das

9] [How to Stop Catastrophizing: An Expert's Guide](#) by Linda Blair @ The Guardian

A clinical psychologist suggests a three-pronged plan for tackling anxiety and approaching each day logically and positively.

Let us start by considering why some people catastrophize – that is, on hearing uncertain news, they imagine the worst possible outcome. After all, it is not uncommon and those who catastrophize seem to do it a lot. Catastrophizers tend to be fairly anxious people. Whether this characteristic is principally genetic or more the result of learning is unknown. High levels of [anxiety](#) are extremely unpleasant, so we look for ways to discharge those unpleasant feelings as quickly as possible. If a catastrophizer is told something inconclusive – for example, if they go to a doctor and are asked to have tests – they look for a way to feel in control again immediately. They learn to choose the worst possible outcome because it allows for the greatest sense of relief when they are reassured.

Considering all possibilities is not a bad strategy if you examine them logically. However, unable to bear their distress, catastrophizers rush to external sources to calm themselves down: checking whether anyone else has “come through” the same problem; matching symptoms online to obtain a diagnosis and treatment options; asking a professional to tell them that they will survive. Once they are reassured, they feel better – in psychological jargon, they have “rewarded” this seeking behavior. The next time they feel uncertain or threatened, they will ratchet up their anxiety with a catastrophic thought, then look outwards for reassurance even faster than before. In this way, catastrophizing soon becomes a well-entrenched habit. The greatest problem with seeking others to alleviate anxiety is that it offers only temporary relief. There is always another source to check or another opinion to be had; as a result, catastrophizers feel anxious again increasingly quickly. The only way to break this cycle is to tame anxiety. After this, you can still seek advice. So, if you are a catastrophizer and you would rather not be, how do you go about making changes?

•**Accept yourself.** [Anxiety](#) is energy: if you are an anxious person, celebrate! However, why waste that energy feeling uncomfortable and preparing yourself for circumstances that will almost certainly never occur? Look for enjoyable ways to challenge yourself and use your energy more positively: taking regular aerobic exercise; learning something new; taking up a creative passion.

•**Take control.** [Establish a regular “worry time”](#). Start by setting aside half an hour every day. Write down all your concerns in specific terms. For example: “I felt nauseated this morning. Do I have stomach cancer?” Assign a score on a scale of 0 to 100% to estimate how distressed this possibility makes you feel. Next, list all the possible explanations for your concern, then rank each one according to how likely it is to be correct. Make use of external sources if necessary, but stick with reputable websites and professionals. Finally, score your worry for the level of distress it is causing you now. Gradually, you will be able to reduce the amount and frequency of worry time.

•**Use the “best friend test”**. Ask yourself what you would advise your best friend to do about each concern, and take that action.

•**Learn to self-soothe**. Whenever you are overwhelmed by anxiety and feel you must seek reassurance, give yourself permission to do so – but not straight away. Establish an interval before you are allowed to act. Even two minutes is enough at first, because you are still exerting self-control. Breathing slowly in through your nose and out through your mouth, or taking some gentle exercise, will help. Gradually, you will find you can wait longer. When you get to the point where you can wait more than 20 minutes, most people find they no longer need to be reassured by others.

This three-pronged approach – using your “worry energy” to carry out new and enjoyable challenges, approaching your tendency to catastrophize logically and systematically, and learning to wait through discomfort – takes time. But if you invest the necessary time, you will start looking forward to each day knowing you can deal with uncertainty in a more positive, balanced way.

“We must constantly dare ourselves in the small things, until courage becomes a habit of mind that will serve us when we are unexpectedly tested.” – Chris Cleave

“But if you've fought depression or know somebody who has, you know that no amount of money can fix it. No amount of fame. No logic. The continuing stigma around suicide and mental illness tells me that not enough people truly understand it. I don't really blame them---its impossible unless you've lived it.” - David Chang,

10] [Male Survivors Of Sexual Abuse Struggle To Find Treatment](#) Podcast @ NPR – All Things Considered

Rachel Rock interviews Jim Holland – Three minute listen

Male victims of sexual trauma face a lot of obstacles to getting help. They have trouble finding people to believe their stories, even when they find the strength to seek assistance.

The CDC estimates that 1 in 6 men have been sexually victimized at some point. It's a largely silent epidemic despite revelations of abuse by Catholic priests and Boy Scout leaders. Not confronting this issue only makes recovery harder. Rachel Rock brings us one man's search for support.

[Rachel Rock](#) Multimedia Journalist +1-617-543-1464 m.

Rachel Rock began her career working on democratic systems in Central America, most notably in support of the civilian opposition to Panamanian General Manuel Noriega in 1989. Through direct field experience in the monitoring of a stolen election and the subsequent failed diplomatic efforts to remove Noriega, Rachel quickly learned the power that resides in those who create the narrative of history and the power of a free press. After completing a Masters’ in International Affairs and Economics, she joined ACCION International to provide financial services to the working poor throughout Latin America. At ACCION, Rachel witnessed the raw potential of men and women to defy their personal circumstances and achieve agency as borrowers rather than as beneficiaries. Sharing the individual stories of this simple yet powerful identify-shift unleashed millions of dollars to impact hundreds of thousands of lives.

A 2020 graduate of the master's in journalism program at Boston University's College of Communication, Rachel has built a multimedia skill set to capture stories to shift the mindsets of both those who hold the power in society, and more importantly, those who do not. Rachel lives outside of Boston, is a mother of four children and is most at peace lying on the floor of the forest.

“The reason why you need emotional support is because it's important for survivors to be heard. To be understood. To be able to express yourself without fearing criticism or harsh judgement. To be validated for your pain, suffering, and loss. For others to be there for you to encourage you, especially if you're having a bad day or feeling triggered.” - Dana Arcur

“Healing is never complete until we have been truly heard. May the universe send you someone who will sincerely care to listen.” - Anthon St. Maarten

11] **Holding Hope by Dave Andre**

Dave Andre isn't shy about speaking about his private struggle and journey to recovery from profound mental illness.

“Sharing my story is good for me, and it's good for others. Not being closeted, putting myself out there. It's not what I'm saying, just that I say it at all. I don't know what will resonate or become of it.”

Dave visited Connections Peer Support Center to share his story, including 15 years of his life overshadowed by recurring episodes of bipolar disorder resulting in multiple hospitalizations, as well as the journey to recovery that allowed him to live a rich life including a marriage, a son, a career he loved as a treatment coordinator for a group home for troubled teens, community involvement, and a close circle of friends.

While Dave has now shared his story almost 200 times with various community groups, he had not done so for the past three years. Thinking about his upcoming visit to Connections Peer Support, he felt anxious and unsure about what he would say. He remembered mothers who locked eyes with him and had one question, "How does my child get to be where you are now?" I say, "Just give them hope."

In graduate school, he experienced his first episode of mania, which led to the first of many hospitalizations, though he did not receive the diagnosis of bipolar disorder for three more years. For 15 years he endured a cycle of periods of normalcy followed by manic episodes and yet more hospitalizations. Over that time, Dave took 14 years to finish the graduate program in counseling that was supposed to take one year. He married and had a son.

“I was neurotic, high achieving, extroverted. I got to the master's program, maybe I'd be a doctor someday. There was some abuse in my past. And the thinking and self-examination that were part of the program just churned a lot of things up. I realized that my value was not in my achievements. I realized I wasn't centered right, not even close. This was the age when bipolar usually asserts itself. It was a perfect storm.”

“I went on Haldol, which it turns out, I am very allergic to. I was in incredible pain. I was a zombie. It obliterated me. Would I live like this for the rest of my life? Then I want out. It was the darkest time.”

Many times, he was exhausted and wanted to quit, but thinking of his son gave him the strength to go on. He recalled, “I couldn’t ask my son to do what I couldn’t do for myself. I feel great empathy for those whose mental illness gives them no respite, no periods of normalcy during which to recover.”

The cycles of mania continued. “I needed my wife to tell me that I was in trouble. I would lie and cheat to avoid giving up my mania, that feeling that I was God. The dopamine was going wild in my head, an incredible high. I’ve never tried heroin, but I think it must be similar.”

After many adjustments he found the right combinations of medication that worked for him. Back then, Dave explains, insurance was different “I would be hospitalized for 10 or 11 days to bring me down. There was no pressure to be out in three days.” While Dave considers the medication he continues to take essential for his continued recovery, he emphasizes how critical it was to have a strong network of supporters, people who care about him and are there when he needs them and watch him for signs of stress. “I carry sadness and don’t notice it. Others read me and see what I’m feeling. I am vulnerable to obsessive thinking. I can be frightful, anxious, but living in a scary world is not where I want to be.”

By way of illustration, he tells of visiting his psychiatric nurse and being told, "You don’t look as good as you usually do."

“I visited a friend, and she said, ‘You don’t look as happy as you usually do.’”

During a recent time of family crisis, they “circled the wagons—they love me and take notice and it’s reciprocal. Others may have no one.”

“Peer support gives you the opportunity to be there, to be a support for someone else, as well as getting support. That's huge, not simply seeing yourself as a victim or helpless. You cannot tease apart the giving and receiving, the reciprocity. “

He observed something similar during a visit to Connections Peer Support Center. “Response from peers was incredible. There were people who were in a bad place, but you cared for each other in a way that was unbelievable. I saw it three or four times. Someone started to struggle, to emote, and immediately someone was there for that person and knew what they needed. It was subtle, quiet, whatever was happening deescalated. It was a thing of beauty.”

As he relates, “Hope is huge. Where is your hope? If you don’t have hope, have someone hold it for you. I give you something, but it's a two-way street. It is such a privilege to be heard, to see people truly interested in my story. It is a gift. We’re all in this together.”

Dave was recently hired part-time as a peer support specialist who will work at Connections Peer Support Center’s short-term residential step-up / step-down program. For more information about this and other programs at Connections, go to <https://www.connectionspeersupport.org/> or call 603-427-6966.

[11a\] Connections Peer Support Center](#) in Portsmouth, NH - Established in 1993, Connections Peer Support Center is run by and for consumers of mental health services. Connections is a place where we find acceptance and encouragement, a place where we do not experience the stigma, judgment, and

limitation of being labeled “mentally ill” that we often encounter from others in our lives. This is a place where both members and staff are able to give and receive support and to learn from each other’s lived experience with mental health challenges.

“Hope is being able to see that there is light despite all of the darkness.” Desmond Tutu

“When we love, we always strive to become better than we are. When we strive to become better than we are, everything around us becomes better too.” - Paulo Coelho



12] [The Powerful Connection Of Music With Michael Skinner - Cybertrap 60](#)

Published on July 20, 2021

Here's the latest episode of "The Cybertraps Podcast," co-hosted by Frederick Lane and Jethro Jones. [Michael Skinner](#) is an award-winning advocate, educator, writer and critically acclaimed singer, songwriter, guitarist, addressing the issues of trauma, abuse and mental health concerns through public speaking, writing and his music.

He has spoken at the National Press Club, was a keynote presenter for a conference held by the United Nations, The State Department and Georgetown University on the sexual exploitation and trafficking of

children and adults and he was part of the groundbreaking Oprah Winfrey Shows that addressed the issues of males sexually abused as children.

Since 1993, Michael's uplifting and heartwarming story and songs of Hope and Healing has impacted thousands of people every year throughout the country. His presentations at colleges, universities, high schools, mental health centers and conferences, churches, civic groups, sexual assault and domestic violence support centers and conferences, including a women's correctional center in Hawaii are highly acclaimed.

He has appeared on many TV, radio and Internet shows and has been the subject of many news articles regarding child abuse and mental health. Michael is also a frequent and sought after blogger on several websites and writer of articles for mental health publications. He has contributed chapters for three books, "Jyu No Tobira" ["The Door To Freedom - Live Your Life From Today"] published in Japan, "Our Encounters with Suicide", Europe and Great Britain and, "You Can Help: A Guide for Family & Friends of Survivors of Sexual Abuse and Assault", United States. Michael is also featured in the film documentary, "Hold Me Right", addressing the aftermath of sexual abuse.

His role as a consultant and trainer for the Federal government's Substance Abuse and Mental Health Services Administration's and the National Association of State Mental Health Program Directors has been crucial in helping to shape the policy initiatives and directives for the delivery and implementation of trauma informed care and services. And he has worked with organizations nationwide to address the stigma of mental health and ending the silence of child abuse and suicide.

Michael is also the founder and director of The Surviving Spirit; a monthly newsletter and website sharing resources to help those impacted by trauma, abuse and mental health challenges.

- [S.E.S.A.M.E.](#)
- [twitter SurvivinSpirit](#)
- [Michael Skinner Music](#)
- [Surviving Spirit Web Site](#)
- [Mike Skinner's YouTube page](#)
- A teacher who was asking questions and I couldn't answer those questions.
- School should be a place of safety.
- Showing that kid that you care for them as a human being.
- Nothing about us without us.
- What would make the school a safe place?
- The powerful connection of music.
- Be aware of mission creep.
- Trauma is disconnecting us, Music and the Arts connect us.
- What has happened to you?
- [lin6](#) and [male survivor](#)
- Repressed vs Suppressed memory
- [National sexual exploitation hotline](#). 1 (800) 656-4673

[Read more...](#)

“A child does not question the wrongs of grown ups, he suffers them!” Chief Dan George

“Music has real health benefits. It boosts dopamine, lowers cortisol and it makes us feel great. Your brain is better on music.” - Alex Doman

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](#)

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

Live performance of “By My Side”, “Joy”, “Brush Away Your Tears” & more @ [Michael Skinner – You Tube](#)

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