



Healing the Mind, Body & Spirit 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



[The Healing Power of Music by Michael Skinner @ The Lamplighter Movement](#)

“Music can heal the wounds which medicine cannot touch.” – Debasish Mridha

Music has a profound way of touching us in so many ways. For myself, the power of music has given me great joy, hope and healing. Music has been a lifesaver for me and that is not something I

throw around lightly. I would like to share with you how it has affected my life in so many positive ways – I am forever grateful to have the gift of music in my life. Music continues to help me in healing from the effects of complex post-traumatic stress disorder, depression, mild traumatic brain injury and serious back injuries due to abuse I have suffered.

I was born in Boston, Massachusetts and lived there and in Cambridge, MA till the age of six. My family then moved to the small town of Billerica just twenty miles outside of Boston. I was the oldest of five children, four boys and one girl. Our life was hard-my parents were cruel and abusive in just about every way one can imagine. They and several of their friends should have been arrested and thrown in jail for what they did to children—they were pedophiles. Sadly, they were never caught, so my siblings and I all paid a terrible price for that abuse-it would affect all of us for the rest of our lives.

Thankfully, there was music, and it gave this young boy the greatest of joys to just sit and listen to someone singing on the radio or on TV. My friend's dad played the guitar and he would sing all of his favorite country and western songs and I would be mesmerized just watching and listening to him play. I thought how nice that would be if I could do this. Though it was a secret desire to play the guitar and sing, it was something I kept to myself due to my low self-esteem and reinforced by the ridicule I heard from both of my parents when they heard me singing along to a record or the radio. They would shush me and tell me how terrible I sounded. My father told me, "You sound like a castrated hyena." So music wasn't an option for me to consider learning how to do.

But then came this most magical moment that was to change my life forever. By the time I was six years old I knew I wanted to join the military so I could learn how to protect myself, my siblings and other children from people like my parents. That was all to change when just before my tenth birthday, "The Beatles" appeared on the Ed Sullivan Show. I was awestruck with their performance and I immediately burst out in excitement, "I want learn to play the guitar and sing just like them!" That only brought more scorn and ridicule from my parents, so once again my hopes and aspirations were crushed.

Music still helped me to persevere-the simple act of listening to songs on the radio kept my mind off of other things that hurt. To this day I can still hear Petula Clark's voice singing "Downtown" and how it helped me keep my sanity. And yet, that simple act of listening would also bring to me this great epiphany. While listening to songs I would be tapping along to them and could anticipate what a drummer would do next. Ah ha, this was it, I could be a drummer! And so I set about to teach myself how to play the drums, but this time I would not share this with my parents.

"I think music in itself is healing. It's an explosive expression of humanity." – Billy Joel

A short article cannot share all of the power and the joy that music has given to me. But learning to drum gave me the opportunity to join the local rock band and perform at parties, dances, and win Battle of The Bands contests. By the time I was sixteen years old I was playing professionally in nightclubs, bars, functions, and outside concerts. It was my greatest joy to say I was a professional musician. I was able to tour Great Britain for two years [1976 & 1977] with a very successful hard rock band, "American Train." I lived in Liverpool, England, the home of my heroes, "The Beatles." I was able to perform in many of the same venues that The Beatles, The Rolling Stones, Deep Purple, Led Zeppelin, etc, performed in . Words cannot describe what that did for me. I also felt safe for the first time in my life-I had the Atlantic Ocean between me and my perpetrators. This allowed me the freedom to write

songs and to start singing.

Back in Boston I continued to perform throughout New England and New York and soon went into the business side of music as a manager and talent agent. The business was successful and it helped me support my own family of a wife and five daughters. I still continued to perform on the weekends with a classic rock band, so life was good. I had it all but the past would soon come back to haunt me and I was laid low and lost everything due to PTSD and major depression because all of the suppressed memories and feelings from my childhood came back to devastate me.

I thought I had already known abuse as a child and teenager, now I learned first hand just how devastating the label of “mentally ill” would be. The stigma, discrimination and the shunning by family members and some friends in of itself was hard and crippling-but now, music only sounded like noise to me. This I could not understand, this only made the depression worse when I was unable to play the drums or listen to music. But music and healing has its way and soon those gifts were returning. I now decided I would learn to play the guitar, sing, and write songs. Once again I had to hear scorn and ridicule from so many about this dream of mine. My wife [soon to be ex-wife] made fun of this as did several mental health treatment providers I was seeing. They let me know that, “Michael you’ll always be mentally ill and unable to work again. Maybe you can volunteer in a library that has a music section someday.”

I am happy to say that I shrugged off their criticism and I did learn to play the guitar and sing. I have released three albums and I get to travel around the country sharing my songs of hope, love, loss, and joy to so many. By way of example, I share the painful parts of my life, but to let others know, to never give up on your dreams and goals—whatever they may be. Life is indeed hard for so many of us, but always follow your heart and your dreams. It is a journey and there are many bumps and obstacles along the way, but the simple act of trying is worth the taking.

“Music has the power to heal, transform and inspire and we have the power through deep listening to increase our intuition and self awareness.” – Andre Feriante

“Think for yourself and let others enjoy the privilege of doing so too.” - Voltaire

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“Dance as though no one is watching you. Love as though you have never been hurt before. Sing as though no one can hear you. Live as though heaven is on earth.” – Mark Twain

- 1] [Judge Spends Night In Jail With Veteran Who Suffers From PTSD](#) @ YourTango

A North Carolina judge who sentenced a veteran to jail became so concerned about the soldier’s wellbeing that he served the sentence with him.

When veteran Joe Serna [was arrested for](#) drinking and driving, one of the terms of his probation was Serna could not consume alcohol for a predetermined period of time.

After lying during a urine test, Serna was brought back into court with Gulf War veteran Lou Olivera as the judge for his case.

Olivera had no choice but to sentence Serna to spend a night in jail for violating his probation.

Serna had served three terms in Afghanistan with two purple hearts for his bravery, he’d also survived an IED and suicide bomber, as well as being trapped in a sinking truck with other soliders.

Considering his many brushes with death and traumatizing experience fighting in the war, Serna [suffered from PTSD](#) and claustrophobia, which he blames on the sinking truck.

When the judge learned about his PTSD and claustrophobia, he decided to spend the night with him in prison.

Lou Olivera, a district judge who presides over the [Veterans Treatment Court](#) in Cumberland County, North Carolina, was sympathetic towards the Serna and decided to show him some kindness.

“I knew what Joe was going through and I knew Joe’s history,” Judge Olivera told CBS Evening News. “I knew he had to be held accountable, but I just knew...I had to go with him.”

It had just been a few minutes of Serna sitting in his jail cell before Judge Olivera [surprised him with a loaf of homemade meatloaf](#) and a change of clothes, accompanying him through the remainder of the night.

Serna said that once Judge Olivera came, “the walls were no longer there” as the two men talked about their families and their lives.

“He took me back to North Carolina,” Serna said. “He took me from a truck in Afghanistan back to North Carolina.”

After the night was over, Serna promised Judge Olivera that this would be the last incident that brought him back to court.

“He is a judge, but that night, he was my battle buddy,” [Serna told People magazine](#). “He knew what I was going through. As a warrior, he connected.”

Serna had gone into battles repeatedly, and with each deployment brought equal amounts of pain and glory.

“I lost so many friends,” Serna recalled. “I was medevaced [medically evacuated] after some guy dropped a grenade on me. In the process, I lost a bunch of guys right next to me.”
Many veterans fall into drug-related crimes after they leave the military.

[According to a report by the Bureau of Justice Studies](#), an estimated 107,400 veterans were serving time in federal or state prisons with the majority, 98%, being males.

[A study done on veterans’ pathways](#) to incarceration found that substance abuse is common among those in prison.

Veterans reported that their substance abuse use stemmed from after effects of their time [serving in the military](#), such as PTSD, difficulty adjusting to civilian life, and relational stress with friends and family.

“Physically, I was taking care of myself,” Serna said, remembering the time when he was medically retired. “I didn’t think about the mental.”

1a] [Judge spends night in jail with man he sentenced](#) - YouTube 3:07 minutes

A North Carolina judge felt he had to hold a man accountable for lying about a urine test, although there were special circumstances for this probation offender. Steve Hartman went "On the Road" to find out what happened next.

“When we give ourselves self-compassion, we are opening our hearts in a way that can transform our lives.” - Kristin Neff

“Great spirits have always encountered violent opposition from mediocre minds.” Albert Einstein

2] [The Art of Nurturing Self-Talk: How to Tell Yourself What You Need to Hear](#) by Rita Loyd @ [Tiny Buddha](#)

***“You will never speak to anyone more than you speak to yourself in your head. Be kind to yourself.”
- Unknown***

Talking to ourselves in a nurturing way can be a challenge if we rarely heard nurturing words in the early formative years of our lives. In fact, if we were often criticized or neglected, we probably learned to criticize and neglect ourselves instead.

When I was growing up, my mom was a dedicated wife and mother, but she suffered from deep [depression](#), anxiety, and low self-esteem. She didn't know how to be encouraging or nurturing because she was never nurtured or encouraged by her parents while she was growing up. So her words to me reflected the negativity that she felt about life and herself.

I have forgiven my mother for all the mistakes she made in my childhood, and, in fact, we ended up extremely close during her last years of life. But that doesn't mean that there wasn't work for me to do on myself in order to [heal the self-hatred](#) that had been unconsciously passed down.

Growing up as I did, I struggled with low self-esteem, I was deeply depressed, I found myself in an abusive marriage with my first husband, I depended on other people for approval, and I neglected my dreams, since I didn't believe in myself.

Over the years I've done a lot of work to heal and have made significant progress in all these areas. I've discovered the meaning of [unconditional self-love](#). I've learned to set healthy boundaries and accept myself as I am, without needing approval to feel good about myself. And I've educated myself so I'm able to handle stress and face my problems in healthier ways.

Most importantly, I've learned to speak to myself in a more loving and nurturing way. In fact, just recently, I learned how to find those words more easily by using the following exercise.

First, I made a list of all the influential people from my childhood and early adulthood. Then I asked myself, “What loving words did I need or want to hear from each person even if I don't think I still need to hear those words today.”

Then, I wrote down everything that I wished I could have heard them tell me from a loving and understanding place in their hearts. And if someone in my life had spoken to me in a loving and supportive way, I wrote those words too.

Here is the list of influential people from my childhood and adulthood: Mom, Dad, brothers, sister, relatives, neighbors, friends, teachers, coaches, ministers, therapists, doctors, bosses, co-workers, and spouses.

As I began to make the list of statements that I wish I could have heard from these people, I could feel that these were words that my heart still needed to hear today, but now from myself.

It's interesting how appropriate these statements feel even after I switch the person speaking them, to be from me. For example, when I read the statement that I wished I could have heard from my mother, "You are so talented and creative," and then switch the giver of the statement to be from me, I felt a rise of recognition lift inside of my chest as if I was being seen and heard for the first time.

When I work on this exercise, I let go of any judgment toward the people on my list because I realize that everyone did as well as they could, considering the stress they were under and the state of mind they were in.

This exercise is not about them, it's about me and my healing; it's about taking the time to listen to the neglected person inside of me and allowing her voice to speak up about what she has needed for so long but has rarely received from others or from herself.

Then the exercise shifts into being about giving and receiving these words to and from myself, in a loving way, so that I can learn how to nurture myself on a deeper level.

Here are a few of the [statements that I wish I could have heard](#) from my mother in my early years:

- I cherish you.
- I want the best for you.
- You are a good person.
- I want you to keep growing.
- You are smart and creative.
- I see so much good in you.
- I respect your opinion.
- I believe you.
- I trust you.
- I appreciate how hard you try.
- I admire you.
- I am here for you.
- I appreciate your help.
- You can depend on me.

At first, I wrote the statements in a stream of consciousness, without editing. I kept asking myself, "What words did the [little girl inside of me need to hear](#) from others when I was so young and vulnerable? What did the young woman inside of me need to hear in order to feel valuable and confident in herself?"

I allowed myself to take breaks in my writing and return when I felt ready to continue. I found that each time I came back to the exercise, I always thought of something new to write, and as I wrote it, I would feel a sense of relief inside of me.

Once the names on the list were all addressed, I began to gently edit the statements so that they became more appropriate for my life now. For example, I changed the statement I wrote from my brother, "I am sorry I didn't play with you," to read, "I allow myself to play now and have fun."

For the sentences that clearly did not fit, I looked to see if they had a message of their own that could be worded in another way.

Here is an example statement from my P.E. Teacher: “I see your potential to become a strong athlete.” My first response was to delete this sentence since I am no longer involved in sports. But then I chose to rewrite it to read, “I see your potential to grow physically stronger,” which is helpful to me now since I struggle with chronic fatigue syndrome.

I think there will always be at least a seed of something valuable to work with from each statement you’ve written.

Once I got into the rhythm of this exercise, it woke up other nurturing thoughts in my mind that I also needed to hear. So I wrote those messages too.

After I edited all the statements, I kept a master list and then made another copy to work with further. With this new working copy, I removed all the names that I first started with and then combined all of the statement together.

Next, I wrote beside each statement what kind of statement it was: apology, praise, a question, or a statement of truth. Then I grouped the statements into these four categories.

Each group has its own healing benefit. For example, the apology statements reflect the areas in my life that I may have felt neglected in. With each apology statement, I ask myself if I still neglect myself in this same area.

For example, after I read the apology statement “I am sorry I let you down,” I can ask myself, “In what areas of my life do I let myself down now?” Or the apology statement “I am sorry I scared you.” I can ask myself, “Do I scare myself today by the way I speak to myself? Do I worry myself into a state of depression?”

The group of question statements is a helpful list to use later as a source of inner reflection as it pertains to my life currently.

Here are some example questions that I wrote on my list:

- Tell me how you feel?
- Tell me what is on your mind?
- Tell me what you dream about?
- Tell me what you want for your life?
- Tell me what you believe in?
- How can I best support you?

Now with the two groups remaining, the praise statements and statements of truth, I used them to create my master list of nurturing things to tell myself. As I edited the statements, I either wrote them so they were speaking to me or as if I was speaking to myself, depending on what felt better. For example, “You are a precious person to me” or “I am a precious person.”

Here are some examples of my new nurturing self-talk statements:

- I care about myself.
- My health is important to me.
- I love myself.
- I believe in myself.
- I see my future with confidence and trust.
- I am grateful for my life.
- I am safe and loved.
- I am a creative and caring person.
- I allow myself to grow.
- I am a smart and resourceful person.
- I cherish the happy moments in life.
- I appreciate kindness.
- Life is beautiful in so many ways.
- There is always something new to discover.
- Never give up hope for a better day.
- My life is guided by love.

When I finished this exercise of nurturing statements to tell myself, I had a few hundred statements written and some were duplicates, so I chose to only keep the statements that really spoke to me and deleted the others, making it a stronger and more powerful master list.

Now that I have made my master list, it has become an empowering tool that I can use every day. The more time I take to read and nurture myself with these loving words, the more peaceful and grounded I feel.

And by speaking to myself more kindly, I am better able to [practice unconditional self-love](#) and make healthy choices for myself.

You can also use this exercise as a way to build your inner sanctuary-a place you can go to in order to find nourishment and rejuvenation. This inner place of refuge will become stronger and more dependable the more you practice loving exercises like this one

Rita Loyd is a watercolor artist and writer. Her work is about nurturing unconditional self-love. Her art has appeared on over 100 magazine covers including *Science of Mind*. For more healing art and tools that will help you nurture unconditional self-love, visit [NurturingArt.com](#). She also has an interview series here called The Power of Healing Art: Interviews with my Favorite Artist.

“The way we talk to our children becomes their inner voice.” Peggy O'Mara

“The best reaction to give those who don't wish you well is to really enjoy your life and live it to the full, but not for them, for you.” Themis Eagleson

3] [What does clutter do to your brain and body?](#) - The Royal Australian College of General Practitioners

Many of us have started the year determined to be more organized: no more drawers full of plastic containers with missing lids, or lone socks.

The decluttering craze is led by Japanese tidying aficionado [Marie Kondo](#), author of [a New York Times bestseller](#) and Netflix show, *Tidying Up*.

Charity groups such as St Vincent de Paul are reporting a [38% increase in donations](#), year on year, as we get rid of the clothes, books and household items that don't 'spark joy' or have a place in our future.

And there is good reason to get on board, whether it's via the KonMari method, or just having a good clear-out. Clutter can affect our anxiety levels, sleep, and ability to focus.

It can also make us less productive, [triggering coping and avoidance strategies](#) that make us more likely to snack on junk and watch TV shows (including ones about other people decluttering their lives).

My own [research](#) shows our physical environments significantly influence our cognition, emotions and subsequent behaviors, including our relationships with others.

Why clutter is bad for your brain - Bursting cupboards and piles of paper stacked around the house may seem harmless enough. But [research](#) shows disorganization and clutter have a cumulative effect on our brains.

Our brains like order, and constant visual reminders of disorganization drain our cognitive resources, reducing our ability to focus.

The [visual distraction](#) of clutter increases cognitive overload and can reduce our working memory.

In 2011, neuroscience researchers using fMRI (functional magnetic resonance imaging) and other physiological measurements [found](#) clearing clutter from the home and work environment resulted in a better ability to focus and process information, as well as increased productivity.

And your physical and mental health - Clutter can make us feel stressed, anxious and depressed. [Research](#) from the United States in 2009, for instance, found the levels of the [stress hormone cortisol](#) were higher in mothers whose home environment was cluttered.

A chronically cluttered home environment can [lead](#) to a constant low-grade fight or flight response, taxing our resources designed for survival.

This response can trigger physical and psychological changes that [affect](#) how we fight bugs and digest food, as well as leaving us at greater risk of type 2 diabetes and heart disease.

Clutter might also have implications for our relationships with those around us. A [2016 US study](#), for instance, found background clutter resulted in participants being less able to correctly interpret the emotional expressions on the faces of characters in a movie.

And surprisingly, it doesn't go away when we finally get to bed. People who sleep in cluttered rooms

are [more likely](#) to have sleep problems, including difficulty falling asleep and being disturbed during the night.

Could clutter really make us overweight? - Multiple studies have found a link between clutter and poor eating choices.

Disorganized and messy environments led participants in one [study](#) to eat more snacks, eating twice as many cookies than participants in an organized kitchen environment.

Other [research](#) has shown that being in a messy room will make you twice as likely to eat a chocolate bar than an apple.

Finally, people with [extremely cluttered homes](#) are 77% more likely to be overweight.

Tidy homes have been found to be a predictor of physical health. Participants whose houses were cleaner were more active and had better physical health, according to another [study](#).

Hoarding can cause physical pain - Buying more and more things we think we need, and then not getting rid of them, is an actual disorder in the American Psychiatric Association's *Diagnostic and statistical manual of mental disorders* (DSM-V). According to [DSM-V](#), those with hoarding disorder compulsively acquire possessions on an ongoing basis and experience anxiety and mental anguish when they are thrown away.

A Yale University [study](#) using fMRI showed that for people who have hoarding tendencies, discarding items can cause actual pain in regions of the brain associated with physical pain. Areas of the brain were activated that are also responsible for the pain you feel when slamming a finger in a door or burning your hand on the stove.

People who suspect they have hoarding disorder can take heart: cognitive behavioral therapy has been [shown](#) to be an effective treatment.

Tidy house, happy life? - Participants in Marie Kondo's Netflix show *Tidying Up* report that her decluttering method changes their lives for the better. Indeed, her first book was called [The Life Changing Magic of Tidying Up](#).

[Research](#) does indeed show cluttered home environments negatively influence the perception of our homes, and ultimately our satisfaction of life. The study authors note the strong effect is because we define 'home' not just as a place to live, but as:

The broader constellation of experiences, meanings, and situations that shape and are actively shaped by a person in the creation of his or her life-world.

But it seems clutter isn't always bad. One [study](#) showed messy desks can make us more creative. The findings suggested neat, ordered environments make us more likely to conform to expectations and play it safe, while messy ones move us to break with the norm and look at things in a new way.

This article was originally published on [The Conversation](#). Read the [original article](#).

“There is no coming to consciousness without pain. People will do anything, no matter how absurd, to avoid facing their own soul. One does not become enlightened by imagining figures of light, but by making the darkness conscious.” Carl Gustav Jung

“I’d rather regret the things I’ve done than regret the things I haven’t done.” Lucille Ball

4] [The Link Between PTSD and Clutter](#) by Valerie Huard

A lot of people are exposed to trauma in their life, some become the direct victims, and some may be indirectly exposed to it. Every individual experiences and deals with trauma differently. Most of them deal with it within a timeline, while some may be unable to get over it and may experience the symptoms of what we call Post-Traumatic Stress Disorder (PTSD).

1- **What is PTSD?** - Post-traumatic stress disorder is a severe psychological issue that someone may develop after being exposed to a terrible, shocking, or fearful event. PTSD can create problems in daily life, such as relationships, at home, and work. Sometimes it may make one fall prey to any physical health issues. PTSD is a stress issue problem.

Stress causes acute and chronic disruption in neurochemical pathways and specific regions of the brain; this results in PTSD symptoms. Brain regions that play a significant part in PTSD are the hippocampus, amygdala, and medial prefrontal cortex. Cortisol and norepinephrine are the two neurochemical pathways that are crucial to the stress responses.

2- **Clutter, Really?** - We may have heard about cluttering a lot randomly, which precisely means to pile a lot of bad mess in any form. There is a relationship between trauma and accumulating clutter. When people experience trauma, their brain is affected, specifically the prefrontal cortex. That is the part of the brain that performs the executive functions. Executive functions are primary cognitive functions like judgment, decision making, anticipation, and planning. Furthermore, this is why it's tough for people to organize their stuff while they face trauma.

Even after they feel like they have healed, they find themselves cluttering stuff that ultimately makes them feel exhausted. There is hope as our brain is plastic, able to create new neural circuits, it is possible to reinforce the executive functions and be able to organize and declutter after trauma.

3- **An unconscious barrier** - There is a specific reason why people with trauma have the habit of cluttering more than ordinary people. According to research, there is a link between PTSD and hoarding. When one is exposed to trauma, people build guards around themselves and everything around them. If they start losing the stuff or declutter, they feel a void inside of them, so it's tougher for them than other people. Clutter acts as an unconscious barrier.

4- **What about addiction?** - We all must have heard about the tendency of people with trauma to rely on some addiction; it can be of any kind, gaming, shopping, drugs, etc. Considering shopping here, when people with trauma buy something, they feel a wave of endorphins for almost 20 minutes, and they feel joyful. But as soon as the wave calms down, they feel down again. The "good" feeling is indeed temporary and worsens both the emotional situation and the amount of clutter.

5- The vicious cycle -

The more people pile up stuff around themselves, the more they feel exhausted because one's brain has to engulf in all the information at a time which makes it feel tired. As those who encounter trauma are already in the low mode feeling, the tiredness related to clutter just worsen the situation.

6- Tell me how we can win against PTSD and clutter - A decluttering journey on four dimensions is what I found that is the most helpful. Someone absolutely need to overcome each of the four dimensions to be able to get rid of trauma. The four dimensions are the Stress, the Mind, the Time and the Space.

As long as one waits to make a decision to declutter, one's brain automatically demands reasons and logical explanation of the act, and fear takes over the person showing him/her the risk of change, even when the change is positive.

Setting a goal is a crucial aspect of the process. Having a goal and knowing why we should do something, are undoubtedly helpful and contribute to the journey of the whole recovery process. Being very clear regarding the goal will certainly help one to have a clear image of life. When one does not have a clarity of goals, he or she may keep coming back to cluttering to satisfy the subconscious.

I truly believe that every one can go through the decluttering journey and create a life worth living, without stress, mental clutter, calendar clutter and too much belongings. You can learn more about the process with my [video training that is on my website](#).

Published by [Valerie Huard](#) - Get Rid Of The Impact Of Trauma - Create A Life Worth Living

Do you know that their is a real explanation for the link between having a trauma and accumulating clutter... and NO... it's not because someone is lazy!!!

4a] [Psychology of Decluttering; Valerie Huard Shares How To Declutter To Reduce Stress](#) - YouTube
29:54 minutes

Have you ever struggled with keeping your environment tidy as an unconscious effect of trauma or negative life experiences? Would you like to discover how to let go of past trauma by letting go of clutter?

In this episode of 'Happy and Healthy Mind with Dr. Rozina,' our guest Valerie Huard will be sharing her story of overcoming trauma and stress by breaking the clutter cycle and reorganizing her physical space. Valerie is a published author, speaker, and expert who works with people all over the world. From trauma to triumph, Valerie Huard has seen it all. She will bring you on a decluttering journey to declutter more than just your space.

“Peace will come to the hearts of men when they realize their oneness with the universe, it is everywhere.” Black Elk, Oglala Lakota

“Arrieros somos y en el camino andamos.” Mexican proverb - We are all mule drivers in the fields. We are all human beings making our way through life. Don't criticize or judge others. We are all subject to problems and failings.

5] [Step-Up Step-Down Promotional Video](#) – YouTube 2:47 minutes

Welcome to our Step-Up Step-Down Program, a unique home-like setting for guests managing their mental health recovery. With 24/7 peer-to-peer supports, guests can successfully transition from a hospital setting to independence, or a diversion from having to be hospitalized and get back to independent living.

[Step-Up Step-Down - On The Road to Wellness](#) - A Voluntary Peer-Run Residential Mental Health Program

Step-Up Step-Down is a peer driven voluntary 30-90 day mental health residential program, whose mission is to create an environment that will facilitate hope-based recovery, and increase mental, physical and emotional well-being for those who participate. Located in a beautiful three-bedroom home in Manchester, New Hampshire, the environment serves as a landing space for gradual integration back into the individual's community, deepening connections to supportive networks and increasing chances of personal success.

Each individual has their own private bedroom, along with shared common areas. Participants are able to come and go as they please, enabling them to continue work, attend school, and visit with family, friends, or groups outside of the home. Individuals cook for themselves, clean for themselves, and are in control of their own wellness plan. Guests will have opportunity to explore various wellness models such as Intentional Peer Support, Substance Abuse and Mental Health Services, and developing their own Wellness Recovery Action Plan. The program is staffed twenty four hours a day by Certified Peer Support Specialists who have a lived experience with mental illness.

Step-Up Step-Down is free to everyone. There is no cost, and no insurance requirement to utilize services . Free transportation services are also made available.

[On The Road to Wellness](#) Peer Center- We are a mental-health, non-clinical, member-driven organization serving adults eighteen years and older. We provide a safe environment where people can develop and maintain their own sense of wellness, whatever that means to them. As a community of peers, we do this by using education, communication, and fun activities to enhance our journey toward recovery ... all without clinicians, counselors, or therapists.

Serving Greater Manchester and Derry, NH Since 1988

“Peer support has benefited me by giving me the opportunity to speak about my difficulties in life with other people who "get it". The groups are a good way for me to open up and get out of my head for a little while!” - Kristina

“The most authentic thing about us is our capacity to create, to overcome, to endure, to transform, to love and to be greater than our suffering.” Ben Okri

“People tend to dwell more on negative things than on good things. So the mind then becomes obsessed with negative things, with judgments, guilt and anxiety produced by thoughts about the future and so on.” Eckhart Tolle

6] [Logic's song '1-800-273-8255' saved lives from suicide, study finds](#) By Sandee LaMotte – CNN

"I've been praying for somebody to save me, no one's heroic ... And my life don't even matter, I know it, I know it ... They say every life precious but nobody care about mine ..."

When American hip hop artist Logic sang his hit song "[1-800-273-8255](#)" on MTV's Video Music Awards in 2017, calls to that number, which belongs to the US National Suicide Prevention Lifeline, [soared by 50% after the performance](#), according to the lifeline.

Now, a new study finds that in addition to nearly 10,000 more calls to the 1-800-273-8255 lifeline, there was also a 5.5% reduction in suicides among 10- to 19-year-olds during three time periods: the first 34 days after the song's release, Logic's performance at the 2017 MTV awards and an [additional widely promoted performance at the 2018 Grammy Awards](#).

That equates to a reduction of 245 suicides below the expected number during those periods, according to the study [published Monday in the BMJ](#).

"Celebrities but also noncelebrities can have an important role in suicide prevention if they communicate about how they have coped with crisis situations and suicidal ideation," said study author Thomas Niederkrotenthaler, an associate professor in the department of social and preventive medicine at the Medical University of Vienna, Austria, in an email.

"To know that my music was actually affecting people's lives, truly, that's what inspired me to make the song," Logic told CNN from his recording studio Monday.

"We did it from a really warm place in our hearts to try to help people. And the fact that it actually did, that blows my mind," Logic said.

Powerful message - Using powerful, explicit language, "1-800-273-8255" chronicles a young man's struggle with suicidal thoughts. Instead of taking his life, the young man calls the US National Suicide Prevention Lifeline at 1-800-273-8255. The crisis worker who answers his call is portrayed by alternative R&B artist Alessia Cara.

"It's holding on, though the road's long, seeing light in the darkest things," Cara sang. "And when you stare at your reflection, finally knowing who it is ... I know that you'll thank God you did."

Logic (whose real name is Sir Robert Bryson Hall II) told CNN he experienced crippling anxiety and depression during a 2016 tour for his second album. He says he battled back by focusing on time with his wife and putting his priorities in order.

Fueled by one-on-one conversations with fans who told him that his words were meaningful to their well-being, he said he wrote the song months before a number of famous celebrities took their lives and the song became a symbol for hope.

"I'm not going to pretend to be somebody I'm not," Logic told CNN, adding that he believes people "resonate with that. They're like, 'Oh, this guy is like me.' And so I think openly discussing depression

and anxiety and the darker side of life ... you just talk about life, people appreciate that and can relate to it.

"I think honesty is everything, and I think people in general can kind of smell a phony, right?"

Sharing his prior history with depression, "certainly makes his message more authentic, and helps suicidal people identify with the lyrics more strongly," psychiatrist Dr. Alexandra Pitman, an associate professor in the University College of London's Division of Psychiatry, told CNN in an email. She was not involved in the study.

"The fact that he is also a very admired and famous person is also critical: this degree of influence also enhances the extent to which people feel drawn to him and his message," said Pitman, who wrote an [accompanying editorial to the study for the BMJ](#).

The dangers of reporting on suicide - There is a well-known phenomenon, called the Werther effect, in which a person dies by suicide after finding out about a friend or loved one's suicide or seeing depictions of the original suicide on television or in other media.

This "copycat" syndrome gets its name from Johann Wolfgang von Goethe's 1774 book "The Sorrows of Young Werther," in which young Werther takes his life when he cannot have the woman he loves. A spate of suicides was said to follow in areas where the book was published, causing it to be banned in several European countries.

Recent studies by Niederkrotenthaler found reporting by the media about suicides by celebrities did impact suicides rates immediately after their deaths.

In one study, Niederkrotenthaler said, "we found that such reports were associated with an average 13% increase in suicides in the month after the reporting. The Werther effect can be "minimized by not reporting on a suicide method, not giving simplified reasons for suicide, and adding the Lifeline number to any report," he added.

But research had not explored whether highly promoted celebrity messages about battling suicidal feelings successfully could have a positive effect, Niederkrotenthaler said.

"The present study shows for the first time that if help-seeking and recovery from severe crisis is prominently featured in the media, this can have a positive effect of increasing help-seeking and reducing suicide," he said.

Although the study did have limitations -- it could only show an association, not a direct cause and effect -- it is a "really positive example of social modeling," Pitman told CNN.

The study shows there is "great potential for the messages communicated by different artists and public figures to resonate with specific communities, for example those in certain ethnic groups, occupational groups, or sexual or gender minority groups," Pitman added.

"If they can find a way to reach those groups and improve their mental health through this kind of messaging, then this would be a great service to that population's mental health," she said.

"But only if they feel comfortable doing this. It would be wrong for such individuals to feel pressurized to expose themselves in this way," Pitman said.

Logic agreed. "It's got to be authentic. Whoever is spreading that message, it needs to be done from their heart," he told CNN.

For him, that message would be simple: Look forward.

"Yes, it sucks. It's dust right now, 100%. But it gets better. It gets so much better -- I know it does because I'm talking from experience," Logic added.

"You're not where I am now, mentally, right? But you are where I was, and I want you to know you're going to be so happy that you continued to thrive and that you continue to work on yourself."

[Logic - 1-800-273-8255 ft. Alessia Cara, Khalid](#) (Official Video) – YouTube 6:59 minutes

"Music can heal the wounds which medicine cannot touch." - Debasish Mridha

"Always hold firmly to the thought that each one of us can do something to bring some portion of misery to an end." Author Unknown

7] [Hello Trauma](#) – Peer-led support for recipients of EMDR & related therapies

Hello Trauma offers online Zoom gatherings and a private forum for anyone who is healing through the powerful outcomes of EMDR and related therapies.

Sharing the Journey - We are a community of people who are healing from complex PTSD through EMDR, brainspotting, and other body-based modalities.

Each person on a healing path strong and resilient. Every person who faces their traumas—anyone who can open the door, greet the past, and say “Hello trauma” in their own way—is doing so from a place of strength. And yet, as strong as we are individually, we are even stronger when we come together to support one another as a community.

We exist to support you, the recipient of EMDR or other similar, body-based modalities (such as brainspotting, Somatic Experience, or neurofeedback). Our group is designed to meet the needs of current, prospective, and past recipients of such therapies. This is not group therapy; rather, this is a support group for those already working with a therapist.

[Welcome to Hello Trauma](#) - YouTube 3:11 minutes - Hello Trauma is a community for people who are healing from complex PTSD via EMDR, brainspotting, and other body-based modalities. We meet regularly via Zoom, and we also have a members-only forum where you can ask questions and share your experiences.

We hope to see you soon as part of our community!

“If speaking kindly to plants helps them grow, imagine what speaking kindly to humans can do.” - Unknown

“We need more light about each other. Light creates understanding, understanding creates love, love creates patience, and patience creates unity.” Malcolm X

8] [Reflecting on My Experiences as a Homeless Youth with Disabilities](#) by Rachel Litchman @ Disability Visibility Project

Youth Homelessness, Disability and Institutionalization: Reflecting on My Experiences as a Homeless Youth with Disabilities.

On any given night, approximately [41,000 unaccompanied youth](#) between the ages of 13 and 25 navigate homelessness alone. These youth make up a significant fraction of the 4.2 million young people who have no permanent housing. [79% of these youth](#) report surviving multiple instances of childhood abuse. [21-42% report](#) surviving sexual abuse. To survive, many unaccompanied youth engage in survival sex, sleep with friends or strangers, in cars, shelters, or on the streets. Many of them are LGBTQ+, parenting or pregnant. Many have disabilities: [69% of homeless youth](#) indicate struggling with their mental health, and many struggle with their physical health due to poverty and lack of access to healthcare, or die due violence or suicide.

I know the trauma of being an unaccompanied homeless youth with a disability because I was one of them. At 18 years old I became homeless after I fled my family home due to sexual, physical, and emotional abuse. Following my high school graduation, I packed my bags into a friend’s car and fled to a former teacher’s house who knew of my situation. That first night homeless, she invited me to sleep inside in a spare bedroom, but severe asthma triggered by allergies to her cat and dog meant I was eventually sleeping outside on a blow-up mattress on her porch. Unable to stay because of increasing difficulty with my breathing, I couch surfed for the next several days between the beds and floors of friends and strangers until I found refuge in a local youth shelter.

My experiences with homelessness as a teenager were intricately related to my disability. Disability was the mechanism through which my family chose to abuse me, starting when I was nine years old and accused of being a “psychotic freak” for having night terrors. It was the mechanism through which I was othered from my siblings and shamed for preferring to curl up with my notebook rather than “be social.” At 13 years old, my unexplained physical symptoms became the reason for a medical hospitalization and subsequent psychiatric institutionalization. In the psychiatric institution, I [experienced](#) repeated sexual abuse at the hands of staff member. Later, because my parents refused to believe the trauma I had endured, self-harm became my only way to cope. The nights I spent screaming at my parents to stop hurting me, to get their hands off of me, were evidence of my being “crazy.” My father’s intrusions into my bedroom, to monitor and watch me, when I had no clothes on, and asked him to go away, justified sexual abuse in the name of what he called looking out for my personal “safety.”

At 14, my subsequent refusal to talk to my mother and father for their multiple violations of my body and trust became the justification for ripping me away from home to an abusive residential facility in New Hampshire. I spent the next 3 years in the state in a boarding school where I was subject to forced psychiatric treatment. My extended time uprooted from home, in an unsupportive and isolated

environment, meant that I lost all connection to almost everyone in my community who knew me. It meant that when I ran away, I had few safe places to go; I became homeless.

Homeless Youth Face Challenges to Health and Accessing Healthcare - Throughout my childhood, years of forced treatment, institutionalizations, partial and intensive outpatient programs for mental health disorders cast me as disabled, even though I never saw myself that way. In fact, I actively resisted the notion that anything was “wrong” with me as a way to survive. I was given many diagnoses: anorexia, depression, social anxiety. Psychiatrists and family called me many names: angry, defiant, stubborn, psychotic, “messed up,” a “freak.” These names never reflected the reality of my experiences. Instead, these names were placed upon me to avoid placing culpability on those who harmed me, refusing to recognize I was living with PTSD from being abused and traumatized.

While many studies document race, ethnicity, and LGBTQ+ status among homeless youth, there are shockingly few (if any) that explicitly ask youth whether or not they consider themselves to be disabled. One of the largest surveys yet on youth homelessness, the [Voices of Youth Count](#) survey by Chapin Hall at the University of Chicago documents the percentage of homeless youth by race, LGBTQ+, pregnant or parenting status, but fails to explicitly document disability.

However, despite the lack of documentation of disability as an explicit identity category among homeless youth, [a 2019 survey](#) documents that over half as many disabled people live in poverty in comparison to non-disabled people. [Approximately 45%](#) of the general homeless population lives with a psychiatric disorder in comparison to [20.6%](#) of the general adult population. [48% of homeless youth](#) meet the criteria for a mental health diagnosis, and youth experiencing homelessness are over [four times more likely](#) than youth with stable housing to attempt suicide.

In terms of physical health, homeless youth are exposed to high levels of stress proceeding and during their time unstably housed that predispose them to numerous health issues. On the streets, homeless youth [often continue](#) to experience abuse and violence. Street youth are [11 times more likely](#) to die than the general population. Crowded and unsafe living conditions mean [they often acquire infectious diseases](#). Additionally, lack of access to mental and physical healthcare only compounds the health problems experienced by homeless youth, causing illnesses to worsen as they go untreated. When youth finally are able to access healthcare, the pervasive but [stigmatizing beliefs](#) that medical providers commonly hold about homeless youth, such as that they are inherently “delinquent,” can prevent youth from seeking further healthcare due to the fear of being retraumatized.

My Story Is One of Many of these Statistics - These statistics are sobering. I know the truth of them well because I experienced many of these things: a foot infection that I acquired from a shelter floor after a toilet exploded with sewage water, severe asthma from sleeping at my teacher’s house, and later, from being unable to wash my cat-hair covered clothes. When I left my home, I had no birth certificate, social security card, or insurance card. Lack of access to these important documents, and lack of understanding about how the healthcare system worked, or how in the world I would pay for it, meant foregoing care seemed a far better alternative than risking the bill and the shame I’d be subject to by seeing the doctor.

I avoided seeking healthcare even when I was so fatigued I could hardly crouch over the bathroom toilet. I avoided healthcare even when I was so weak and dizzy, my vision blackened every time I stood up from the floor. I avoided healthcare even when I collapsed on the stairs at work from exhaustion.

When my body could not take it anymore, I found myself with cardiac arrhythmias in the emergency room. In the onslaught of diagnoses that followed, navigating drastic shifts in my health and the healthcare system completely alone, I found myself standing many nights outside by a frozen lake a footstep away from suicide.

Trauma at the Root of Youth Homelessness - The issues I faced as a homeless, disabled youth linger with me to this day. My inability to access help at the times I needed it most drove a deep wedge between me and my trust in systems. Most importantly, however, as I struggled to figure out these systems for myself, my sense of always doing the wrong thing lodged in me a deep sense of self blame, and I lost the ability to trust myself. Despite my challenges, I know my story is one of privilege in comparison to many other homeless youth. I am on track to have soon completed a college education. I am white. While fleeing my family home catapulted me into poverty, I grew up with economic privilege.

At the same time, labeling me as disabled as a child allowed me to be shuttled through a network of profoundly broken systems. At their best, these systems failed to protect me from an abusive home environment. At their worst, these systems weaponized my trauma by using mental health diagnoses to label me as the problem and perpetrate further abuse.

Today, I have the perspective of knowing that my experiences as a disabled, runaway youth are part of a larger collection of stories of homeless youth who have experienced the harms of institutionalization. Youth in [congregate care facilities](#) like the ones I was sent to as a child, are at a [higher risk of becoming homeless](#) and [running away](#).

As a result, it's imperative that policymakers, healthcare professionals, and homeless services systems be aware of these issues faced by disabled youth, so they do not merely push traumatized youth through the same abusive systems in an attempt to "fix" them. This awareness can help make our homeless services systems better at responding to youth who experience mental and physical health challenges by providing them with the support, care, and freedom from harm that we all deserve.

Now, four years after fleeing my home, I finally have the right to seek out and forge my own community. In February of 2021, I joined a group of formerly homeless youth and policy makers in Dane County, Wisconsin, where I am now working to build new programs to address youth homelessness. This summer, I also became part of the [National Runaway Safeline's](#) youth advisory board, an organization that served a critical role in keeping me off of the streets as a teen. The work I have been doing with these organizations on both a local and national level has been healing. The ability to have a voice, a say in the kinds of systems that I want to see built to best serve struggling youth still feels radical to me, since I grew up believing I had no chance to be heard.

In the future I am looking forward to making sure that all kinds of transitional and emergency shelter options for youth are as accessible as possible, and that the systems built to address youth homelessness, and the people in these systems, are not ignoring disability or trauma as a critical intersection.

If I could say anything to my younger self, I wish I could tell her that what I went through as a child was not something I deserved. The ways I was treated were reflective of the failures of ableist systems, and despite my labeling as the problem, what happened to me was not my fault. While the work that I

have been doing with these local and national organizations has not been easy, learning to rid myself of this shame that still stands as such a foundational pillar of my identity has been the hardest work of all.

Rachel Litchman (Rachel DL) is a queer, disabled artist, writer, and board member with Disability Pride Madison. As a formerly homeless youth and survivor of child sexual abuse and institutionalization, her creative work and advocacy is grounded in the intersections between art, activism, trauma, disability, interpersonal and institutionalized forms of violence. She currently serves on the Youth Advisory Board at the [National Runaway Safeline](#) and works with the Homeless Services Consortium of Dane County as a member of the [Youth Action Board](#). You can find her on [twitter@wordcalculator](#) and stay updated on her current projects at [racheldl.com](#).

“There may be times when we are powerless to prevent injustice, but there must never be a time when we fail to protest.” - Elie Wiesel

“In the moment of crisis, the wise build bridges and the foolish build dams.” Nigerian proverb

9] [An Orcas Island man uses a squirrel puppet to talk about mental health. Audiences love it](#) by Esmay Jimenez - The Seattle Times

Evan Wagoner-Lynch is a squirrel with a soothing, East Coast drawl — or rather he is on some days. He dons a furry gray hand puppet, aptly named Squirrel, and takes audiences on a walk through old-growth forests on Orcas Island, all while talking about difficult emotions like anxiety or loneliness and how to manage them.

He calls it a form of “self-therapy,” a creative performance that he brings to social media — and TikTok audiences love it. His account [@squirrel_dialogues](#) has over 150,000 followers and a million likes. The compassionate dialogues resonate with Gen-Z audiences, who leave comments like, “Thank you for being there Mr. Squirrel.”

Other users open up about their own mental health struggles, sharing, “One major thing I learned this year is to let myself feel the emotions I’m feeling and not suppress them. Hard to do but it’s helped me get better.”

Wagoner-Lynch is a 39-year-old artist and writer with a long list of work. He used to perform in street theater, flash mobs and what he calls “prankster art” in San Francisco, where he lived. In his 30s, he found himself struggling to find more work opportunities and keep up with the cost of living.

“And I had not at that point dealt with any of my mental health problems,” said Wagoner-Lynch. “They were just sort of bubbling under the surface.”

He moved to Washington state in 2015 and started working on managing his anxiety and depression, reading books about trauma, healing and mental health. He cites inspiration from the works of Brené Brown who writes on vulnerability, Gabor Maté, a physician who writes on chronic stress and addiction, and Thích Nhất Hạnh’s Buddhist teachings on mindfulness. His Squirrel videos reflect that.

“I began to realize that I was actually a person living with the effects of childhood trauma,” Wagoner-Lynch said. “That was a big turning point in my life.”

It wasn't until 2020, as the coronavirus pandemic began that Wagoner-Lynch posted his first video as Squirrel on YouTube. A little over a year later, Squirrel Dialogues took off on TikTok.

Wagoner-Lynch reflects on his experience with his own mental health and the intersection with humor, art and making healing content for others. This conversation has been edited lightly for length and clarity.

The Seattle Times: Tell me more about Squirrel Dialogues. You mention what got you started on your mental health journey but when did the puppet become part of this work?

Wagoner-Lynch: I had this really strong desire to talk about what I was going through and what I was learning and to share it with people, because I suspected that a lot of people are struggling with the same stuff. Awareness is really step one in healing and I had spent 35 years unaware and just sort of suffering without knowing why. I was really hesitant to share art about it, because I'm sort of conditioned not to talk about my emotions.

But I've kind of hit a wall where I couldn't say any more without being more open. And my fears about that were no longer as strong as my increasing desire to share.

I remembered that I had picked up some toys like a puppet and a kid's stuffed animal at a Goodwill a couple years ago just on a whim. I'm very inspired by Mr. Rogers. So I had this idea cooking for about four or five years of some sort of Mr. Rogers-type show that would be for adults.

So in April 2020, I picked up the squirrel puppet and I was just opening his little mouth, like 'What would he sound like?' And this sort of like New York/Boston accent came out.

What kinds of responses do you get from people? Why do you think Squirrel found such an audience?

The short answer is I think Squirrel resonates deeply with people, particularly younger folks. I think my audience is more Gen Z. They're high school-aged or college-aged or early 20s, mostly women. People tell me specifically how Squirrel has helped them.

There's the hook that he's this sort of silly, cute puppet. He has a funny voice. So that draws people in but then I think people really become fans of him. Like a lot of people will say "I feel safe" for the videos, which really astounded me when I first heard that. I think it makes sense, you know, it's a children's toy. He sounds like this kind, older person. And what I'm trying to do with him is model radical compassion, radical nonjudgement, unconditional positive regard.

Where do you see this going in 2022? Any goals that you have going into this next year?

I've been thinking about that quite a lot, because I do want to keep growing the project but I want to do it very intentionally. I try to stay away from being directive or certainly from anything that would sound like therapy since I'm not a therapist.

I'm also steering clear of sponsorships. From a justice perspective, I think I'm very troubled by any

type of mental health resource that costs money. It becomes part of the problem, the folks who need support most acutely have the least resource oftentimes.

So I have to figure out sustainability and growth. I've applied to a couple grants, I'm trying to find another model besides the commercial model.

What I have learned through TikTok is there is a massive need for this type of healing content or for content that helps people with hopelessness or loneliness, that offers a sense of safety. That's been really eye-opening for me. It's given me a much more visceral sense of what folks are struggling with — particularly, like, people in their teens, 20s, 30s.

It's a combination of very heartwarming and encouraging for me as an artist, and very heartbreaking as a human being to see the scale of suffering and intensity of things like loneliness.

We'd like to hear from you.

The Mental Health Project team is listening. We'd like to know what questions you have about mental health and which stories you'd suggest we cover.

The Mental Health Project is a Seattle Times initiative focused on covering mental and behavioral health issues. It is funded by Ballmer Group, a national organization focused on economic mobility for children and families. The Seattle Times maintains editorial control over work produced by this team.

Get in touch with us at mentalhealth@seattletimes.com.

"You cannot get through a single day without having an impact on the world around you. What you do makes a difference and you have to decide what kind of difference you want to make." Jane Goodall

"Color is the keyboard, the eyes are the harmonies, the soul is the piano with many strings. The artist is the hand that plays, touching one key or another, to cause vibrations in the soul." Wassily Kandinsky

10] [NHS to give therapy for depression before medication under new guidelines](#) - The Guardian
Millions of people with mild depression in England should be offered therapy, exercise, mindfulness or meditation before antidepressants, according to the first new NHS guidelines in more than a decade.

Under draft guidance, the [National Institute for Health and Care Excellence](#) (Nice) recommends the "menu of treatment options" be offered to patients by health professionals before medication is considered.

Currently, those with mild depression are offered antidepressants or a high-intensity psychological intervention, such as cognitive behavioural therapy (CBT). The shake-up forms part of the first new recommendations to identify, treat and manage depression in adults since 2009.

According to the Office for National Statistics (ONS), about one in six (17%) adults experienced some form of depression this summer. The rate is higher than before the pandemic, when 10% of adults experienced it. Younger adults and women are more likely to be affected, the ONS found.

A 2019 review showed 17% of the adult population in England (7.3 million people) had been prescribed antidepressants in the year 2017-18.

Dr Paul Chrisp, director of the centre for guidelines at Nice, said: “The Covid-19 pandemic has shown us the impact depression has had on the nation’s mental health. People with depression need these evidence-based guideline recommendations available to the [NHS](#), without delay.”

Under the changes, those with “less severe depression”, which includes people with mild depression, should be involved in conversations with doctors about what would suit them best, but group cognitive behavioural therapy (CBT) could be offered as a first treatment. CBT “focuses on how thoughts, beliefs, attitudes, feelings and behaviour interact, and teaches coping skills to deal with things in life differently”.

This could be followed by offers of seven other treatments including individual CBT, self help, group exercise or group mindfulness or meditation, before medication is discussed as an option.

Group exercise will typically involve three 60-minute sessions a week for 10 weeks, Nice said. Alternatively, patients could opt for group mindfulness or meditation, which Nice said usually consist of eight weekly two-hour sessions and focus on “concentrating on the present, observing and sitting with thoughts and feelings and bodily sensations, and breathing exercises”.

The guideline adds: “Do not routinely offer antidepressant medication as first-line treatment for less severe depression, unless that is the person’s preference.”

A similar range of psychological interventions, along with the option of antidepressant medication, should be available to those choosing a first-line treatment for “more severe depression”.

When considering treatment options, Nice said people should also be encouraged to discuss what may be contributing to their depression, and the patient’s experience of any prior episodes of depression or treatments.

Nav Kapur, professor of psychiatry and population health at the University of Manchester and chair of the guideline committee, said: “As a committee we have drawn up recommendations that we hope will have a real impact on people who are suffering from depression and their carers. In particular we’ve emphasised the role of patient choice – suggesting that practitioners should offer people a choice of evidence-based treatments and understanding that not every treatment will suit every person.”

The guidance recommends doctors discuss mental health waiting lists with patients. It also contains new recommendations for those stopping antidepressants.

People who are considering taking, or stopping, antidepressants medication should talk with their healthcare professional about the benefits and risks, Nice said. Doctors should explain that withdrawal may take weeks or months to complete successfully, that it is usually necessary to reduce the dose in stages over time, and that most people stop antidepressants successfully.

Figures from the NHS Business Services Authority show more than 20 million antidepressants were prescribed between October and December 2020 – a 6% increase compared with the same three months

in 2019.

“There has been significant progress in science and medicine in the past 12 years,” said retired solicitor Catherine Ruane, a lay member on the guideline committee who acted as a carer to two family members with depression. “This guideline emphasizes a greater amount of patient choice and takes greater account of the things that really matter to the patients and their carers.”

“Until and unless you know that you are enough just the way you are, you will continue to look for more. Until you wholeheartedly believe in your own value, worth, and worthiness, in spite of your accomplishments and possessions, or lack thereof, there will always be a void in your spirit.” Author unknown

“Don't walk in front of me, I may not follow; don't walk behind me, I may not lead; walk beside me, and just be my friend.” Albert Camus

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

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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