



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 June 2022

“You might make people uncomfortable, even those you love them most and it will hurt.

The masses will likely misunderstand you and as a result they will judge you and even lash out at you and you may have to walk alone sometimes.

Your joy, your freedom and your magic will infuriate those who feel trapped in a life they secretly hate.

When your truth threatens someones belief system, they will come at you like a storm and you will have to stand and let them roar all around you.

If you're creating change, the people benefiting from the current system will likely try to stop you. Be brave. Stand. Hold space for change.

Keep writing. Keep dancing. Keep singing. Keep shining your light on the world.

We need your beauty and your truth.

We need you- the real you!” - Brooke Hampton

Hi folks,

Grateful for the awareness on post traumatic stress - but I hope someday they drop "disorder" from the language and use "injury" or some other word - just feels stigmatizing, like we are defective and lends credence to the stigma & discrimination we face when trying to heal from things that were done to us or that we observed.

June is [Support Post-Traumatic Stress Disorder Awareness Month & Learn the Signs of PTSD](#)

A month ago I started posting newly created videos on You Tube. Trying to share one per week. It is a learning curve for me but I'm getting there. I'm sharing thoughts, resources, quotes, sometimes a song along with the links for all of the relevant materials in the content section of the video. Please do check them out.

Here's my last two - there was a technical glitch for last week's video resulting in a smaller screen - but the message was still conveyed. I did resolve the issue for the video **How You Can Help** – posting 6/11/22.

Just Get Over It - Part 2 - Healing Childhood Trauma in Adulthood - <https://www.youtube.com/watch?v=6EgIkkKgJoE&t=90s>

Just Get Over It - Healing Childhood Trauma in Adulthood - <https://www.youtube.com/watch?v=MKKraLrAwKo&t=3s>

My friend Scott Fichter of [Blue Fox Creative](#) helped me with the first three videos, here's one of them – I did learn for the subsequent videos – *LOOK at the camera*, not the monitor screen.

The Incredible Healing Power of Music - Healing Childhood Trauma in Adulthood - <https://www.youtube.com/watch?v=00rIvpGz8DI&t=6s>

Take care, Michael.

“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

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“You're not a victim for sharing your story. You are a survivor setting the world on fire with your truth. And you never know who needs your light, your warmth and raging courage.” - Alex Elle

1] [Echoes of Survival From Complex Post-Traumatic Stress Disorder](#) by Jennifer Lock Oman @ [Psychology Today](#)

Key points

- Recognizing our childhood strategies used for managing CPTSD is a first step in healing.
- Many of us continue using those early strategies until we work to make them more conscious.
- With more awareness comes the possibility of more choices, including choosing healthier relationships in adulthood.

Adults with complex post-[traumatic stress](#) disorder (CPTSD) learned very well as children what it meant to “not need” anything—to be self-reliant and self-sufficient. These children also learned to be extremely “other-focused” in order to scrape together any semblance of support or belonging. Sometimes referred to as being characteristics of “people-pleasers,” or “co-dependents,” they were originally brilliant child strategies for survival in a hostile environment.

Moving into adulthood, these strategies become more complex and nuanced in our relationships. They generally travel together with huge uncertainty around boundaries. In shorthand, healthy boundaries tell us, “This is where I begin, and you end.” Healthy boundaries support the individual integrity of each human to have separate thoughts, feelings, wants, needs and preferences. In children with CPTSD, this integrity is trampled with utter disregard by important others in their world.

Consequently, the [childhood](#) strategies of learning to not need anything, of scrambling to be supported, and never knowing healthy boundaries, can echo now in our adult relationships. It's a first step in

healing from CPTSD to become conscious of how those strategies are manifest today. If you are managing CPTSD you may:

- Mute your feelings, particularly [anger](#), which is the emotion that serves to set clear and appropriate boundaries.
- Avoid “conflict” by absorbing the normal emotions in you—like anger and disgust—that scream “this is not OK” in order to keep a tenuous relationship connection.
- Perhaps not even register that you have feelings in the first place. Not just anger, but all of your emotions may be blunted or shut down.
- Feel responsible for the other person’s feelings and for making everything OK for them, even if you pay the price. Paying the price includes giving your energy away, and feeling resentful for it in the end.
- Feel small and make your needs, wants, and preferences unimportant; or forfeit yours to serve another person’s interests foremost or all of the time.
- Remain in an unsafe relationship or situation because you feel desperate for the connection, or you feel it’s all you deserve.
- Not recognize your own basic needs for food rest, support, and recovery.
- Hold on to the hope that if “I just give enough, I’ll finally get something back.”
- Have difficulty receiving from others, including compliments, because you don’t believe you can ever do enough to deserve them. [Read the entire article](#)

[Jennifer Lock Oman, LISW, BCD](#), is a psychotherapist with over 30 years of experience in the mental health field and an expert in therapy with individuals, couples and families. Lock Oman is a published writer and graduate level adjunct instructor. She has taught graduate courses at the University of Iowa, and has written a popular, nationally distributed column published by Gannett News Syndicate.

“Nothing can dim the light which shines from within.” Maya Angelou

“Re-examine all you have been told. Dismiss what insults your soul.” Walt Whitman

2] [‘We recognize trauma is pervasive’: George Hull to screen speech and language clients aged 0-5](#) By [Tamara Shephard](#) @The Toronto Star

If speech and language pathologists can identify trauma *‘these children stand a much better chance at recovery and better outcomes’*: institute director

[George Hull Centre for Children and Families’ preschool speech and language program](#) may soon become the first in the world to universally screen its young clients for trauma.

The Etobicoke-based leading children’s mental health agency helps as many as 6,000 children a year from infancy to 18, together with their families, achieve mental wellness through a broad range of prevention and therapeutic programs.

“We’re very proud to be able to offer the best responsive kinds of programming,” said Leticia Gracia, director of the [George Hull Centre Institute of Childhood Trauma and Attachment](#) that was created in 2019. “One of my goals is to implement the most-innovative practices for trauma treatment at the George Hull Centre.”

The institute is committed to increasing understanding and implementation of trauma responsive practices for children, youth, and families across sectors through the integration of best practice development, research, knowledge dissemination, and training.

“Part of what we’re trying to do at George Hull Centre is walk the walk,” Gracia said. “We’re not just a training institute that trains people externally. We’re really trying to develop our programs within the centre, making every department trauma informed.”

Funding from a generous donor, she said, supported the centre’s hiring of a speech and language pathologist, early childhood service co-ordinator, and project manager.

Soon, the centre expects to launch a groundbreaking study using its [CASTER](#) (Child and Adolescent Screener for Traumatic Exposure and Response) 0-5 trauma screening tool to pilot its systematic use among its 700-plus preschool speech and language program clients annually.

If speech and language pathologists are able to identify, support and refer traumatized children for appropriate services, “these children stand a much better chance at recovery and better outcomes,” Gracia said.

Speech and language pathologists are often the first professionals in contact with children who have been traumatized, Gracia said.

The centre surveyed its speech and language pathologists and found an interest in, and need for, trauma training, said Anna Rupert, George Hull’s preschool speech and language program manager and project manager with its institute.

“Our speech and language pathologists were seeing clients with trauma history with zero training, with real needs in terms of training and development and understanding to serve their clients,” Rupert said.

The pilot project is truly innovative, Rupert said.

“In the speech pathology field, there was a very, very small conversation happening about trauma,” Rupert said. “There were just a few people in the entire field internationally talking about trauma and saying, ‘this is so important. This is so relevant to our work.’”

Further, the pilot project could inform the speech and language pathology field internationally, Rupert added. [Read the entire article](#)

“To know the true reality of yourself, you must be aware not only of your conscious thoughts, but also of your unconscious prejudices, bias and habits.” - Geena Davis

“Let everything that hurts teach you about the things you deserve.” - R.M. Drake

3] [The Impact of Trauma on Young Children of Color and Their Families](#) by Gloria Blevins, President of National Black Child Development Institute - Cleveland @ [Groundwork Ohio](#)

As the Ohio affiliate of the National Black Child Development Institute (NBCDI), the Black Child Development Institute — Cleveland joins NBCDI’s mission to improve and advance the quality of life for Black children and families through education and advocacy. For more than 50 years, NBCDI and its Affiliate Network has remained at the forefront of engaging leaders, policymakers, professionals, and parents around critical and timely issues that directly impact Black children and their families.

BCDI Cleveland continues to address the growing negative outcomes stemming from increased racial disparities, trauma, and adversity impacting children’s mental health. Yet, it is important to properly define trauma and its impact in Black homes as it mirrors very differently than within the homes of a Black child’s peers. Brandon Jones, M.A. simply defines trauma as a deep emotional wound. Black children and family trauma stems from historical trauma and is passed generationally.

Studies show that Black children are more likely to experience more adverse childhood experiences (ACEs) than their peers. In 2020, United Way conducted a community needs assessment and the results showed that 70 percent of Black non-Hispanic children in Ohio have experienced one or more ACEs. In addition, according to [Groundwork Ohio’s Early Childhood Dashboard Preview](#), in 2019, young Black non-Hispanic children were 3.9 times more likely to be treated or judged unfairly due to their race or ethnicity compared to white children.

Since the inception of the pandemic in 2020, trauma among Black youth has been exacerbated. Black families have experienced race related stressors, microaggressions, family and intimate partner violence, and childhood abuse, which lends to the need of a more trauma-informed care approach.

How do we begin? What does that look like? Latonya N. Townsend et al describes trauma-informed care as “an approach to serving those who have been exposed to trauma by focusing on treating the ‘whole’ person rather than the individual systems or specific behaviors.” As individuals who are invested in empowering Black youth and families, we must not be quick to diagnose but instead understand a child’s environment, our own implicit biases, and the child experiences that have adversely impacted a child’s mental, behavioral, and physical health. Furthermore, SAMHSA (2014) describes six key principles of a trauma-informed approach that educators can implement:

1. Safety – ensuring the physical and emotional safety of the population being served
2. Trustworthiness and transparency – conduct with transparency with the goal of building and maintaining trust
3. Peer support – utilizing individuals with lived experiences to build trust and promote healing
4. Collaboration and mutuality – shared decision making
5. Empowerment, voice, and choice – recognizing and building upon individual strengths
6. Cultural, historical, and gender issues – incorporating policies, protocols, and processes that are responsive (Source: Trauma and Mental Health Social Work with Urban Populations)

As we move forward post-pandemic, now is the perfect time to create a child-centered environment that will address the mental needs of our youth. A supportive environment that is inclusive of strong relationships and collaboration with community resources, teacher training, and intentional family involvement will result in healthier children.

Gloria Blevins is the President and Founder of the [Black Child Development Institute](#)

“Justice will not be served until those who are unaffected are as outraged as those who are.” Benjamin Franklin

“Shame is the lie someone told you about yourself.” Anais Nin

4] [Helping Others](#) - Kim Cavanaugh - YouTube 3:27 min

Kim Cavanaugh, Author & Trauma Survivor, on helping and supporting each other.

“One can choose to go back toward safety or forward toward growth. Growth must be chosen again and again; fear must be overcome again and again.” - Abraham Maslow

5] [Why I Hid My Bipolar Disorder for Decades](#) by Kimi Culp @ [NBC News Today](#)

Here’s why I stopped hiding

At times, my symptoms fueled my high-stakes career. But at other times, I felt swallowed by black clouds of darkness, and no one knew.

When I was 22, I was hired to fetch coffees and work overnights at NBC News.

As a child, I dreamed of becoming a journalist. I imagined myself in a director’s chair across from astronauts, authors, rock stars and everyday people who face extraordinary situations. The human experience fascinated me. It still does.

Eventually, I graduated from fetching coffees and was offered the opportunity to tell stories. Finally! It was the beginning of a decades-long career questioning politicians in the Oval Office, crouching in the back of blacked-out vans on sting operations and comforting families in the wake of natural disasters. I was always drawn to this type of high-stakes storytelling.

All the while, I was living my own high-stakes story, navigating the highs and lows of a debilitating mental illness and keeping it a secret for fear of being judged and rejected.

Hiding my [bipolar disorder](#) became my other full-time job. I justified it because I was often able to use my symptoms to my advantage. The adrenaline of my manic highs fueled me. I was hopping on planes at all hours chasing stories, using my newfound creative bursts to write scripts at 2 a.m., down more coffee and meet the camera crew at 7 a.m. I was on fire. My bosses praised me.

During the lows that followed, I sobbed in the safe confines of lonely hotel showers, feeling swallowed by black clouds of darkness. These were the extremes. Mostly, I lived in the middle — on a never-ending roller coaster with anxiety riding shotgun.

I became an expert at the illusion of happiness, of normalcy. A cold spoon under swollen eyes before the press conference. A forced smile in the hallway. When I did have time away from work, I worked even harder to conceal the signs of my reality — medication packed away and carefully tucked into a side pocket of my overnight bag, no mention of therapy or psychiatry. I buried my truth alive.

Eventually, I married the love of my life and had a child, a precious baby boy. I soothed his newborn cries through bottles full of formula from the local drugstore because I could not breastfeed, due to my medications. As I looked around at all the breastfeeding moms, I felt tremendous guilt for being unable to do the same. My shame grew heavier and the despair crept in. By comparing myself to other moms, I concluded that I was, in fact, not enough of a mother. And so it grew stronger — the illusion that everyone around me was normal and I was broken.

In a short period of time, I had two more children. The disparity in my life confused me, and it confused the people who loved me. I was, in fact, happily married with three healthy kids and a meaningful career in Hollywood. The periods of darkness in my inner world did not reflect the beauty of my outer world. I felt like a fraud.

I had started a podcast, All The Wiser, which was growing more popular by the day. The heart of the show was brave truth-telling. I interviewed people about unthinkable circumstances — shark attacks, wrongful conviction, kidnappings — and the lessons they learned on the other side of suffering.

It started to sink in that each guest on the podcast had grown stronger in their suffering. I spent hundreds of hours valuing the truth in other people's lives — it now felt dishonest to hide my own.

I was asking people to do the very thing I had not been willing to do. To be brave in my brokenness. In listening to their stories, I realized I could no longer bury my own story. [Read the entire article](#)

Kimi Culp is a speaker, writer and the host of [All The Wiser podcast](#). Formerly, she was the executive director of talent and development at OWN: Oprah Winfrey Network. During her TV career, she was a producer for "The Oprah Winfrey Show," "Good Morning America" and TODAY.

“When someone constantly puts you down, leaves you feeling like you can't do anything right, or makes you feel worthless and bad about yourself in general, just know you did nothing wrong and that this isn't love, it's emotional abuse.” - Unknown

“Your task is not to seek for love, but merely to seek and find all the barriers within yourself that you have built against it.” - Rumi

6] [Brave Voices](#) – We want to hear your story

Brave Voices breaks the cycle of silence that perpetuates childhood sexual abuse. Every adult contributes to the reduction of harm by speaking up. Join the Brave Voices Movement. Use your voice to normalize the conversation.

We at BRAVE VOICES believe not just parents, but ALL adults – families and our communities – are responsible for ensuring that children have safe, stable, nurturing relationships and environments.

Our Mission - *Brave Voices is an organized movement that educates, inspires, supports, and mobilizes adults, families, and communities to Think, Listen, Learn, and Speak Up before a child is harmed.*

For those who experienced Childhood Sexual Abuse, Brave Voices is a place to be heard, and to share their lived experience, wisdom, strength, and hope.

Brave Voices' goal is to bring an end to the silence that perpetuates this epidemic.

StoryCorps is the largest online digital archive of human voices. It is their mission to build connections between people by preserving and sharing humanity's stories in order to create a more compassionate world. Its collection of stories has been deemed to hold historical and cultural significance enough to be inducted into the Library of Congress. The [Brave Voices Community Page on Archives Storycorps](#) offers those who experienced CSA the opportunity to use their voice, to be heard, and counted.

6a] [StoryCorps Connect](#) - StoryCorps' mission is to preserve and share humanity's stories in order to build connections between people and create a more just and compassionate world.

We do this to remind one another of our shared humanity, to strengthen and build the connections between people, to teach the value of listening, and to weave into the fabric of our culture the understanding that everyone's story matters. At the same time, we are creating an invaluable archive for future generations.

StoryCorps was started in Grand Central Terminal in 2003. Since then, more than half a million people have recorded their stories. But we're just getting started.

"At the deepest level, the creative process and the healing process arise from a single source. When you are an artist, a musician, a writer, you are a healer; a wordless trust of the same mystery is the foundation of your work and its integrity." – Rachel Naomi Remen

"I now choose to rise above my personality problems to recognize the magnificence of my being, I am totally willing to learn to love myself." - Louise L. Hay

7] [Naomi Judd struggled with severe depression](#) by Kalhan Rosenblatt @ NBC News

It led her to advocate for others with mental health issues.

In recent years, Naomi Judd had been candid about her battle with suicidal ideation, panic attacks and the ups and downs of her mental health struggles.

The fight eventually led her to advocate for others, offering words of solace and solidarity to those who also struggled with suicidal thoughts.

Judd [died Saturday](#) at 76. Daughters Wynonna and Ashley Judd said they had lost their mother to "the disease of mental illness."

"We are shattered. We are navigating profound grief and know that as we loved her, she was loved by her public. We are in unknown territory," they said in a [statement](#) Saturday.

While Judd in some instances said she had struggled with her mental health her entire life, she often cited the close of The Judds' "Last Encore" tour in 2012 as when things got particularly dark.

In her 2016 memoir, "[River of Time: My Descent into Depression and How I Emerged with Hope](#),"

Judd said her depression was at its worst after the tour, when suppressed memories of a childhood molestation re-emerged.

"I never dealt with all the stuff that happened to me, so it came out sideways, as depression and anxiety. Depression is partly genetic, and I have it on both sides of my family," Judd said in a 2017 essay for [NBC News](#).

Judd said she was immobilized during her depression as her muscles atrophied from lack of movement. An elevator was installed in her home to help her traverse the floors of the house.

Eventually, Judd was diagnosed with treatment-resistant severe depression, she said in an interview with ABC's "[Good Morning America](#)."

"Treatment-resistant because they tried me on every single thing they had in their arsenal. It really felt like, if I live through this, I want someone to be able to see that they can survive," she said.

Judd said she spent stints in psychiatric wards during her mental health struggles.

"I had to go into serious treatment, and it was a long road — an incredibly painful road. There were times when I didn't think I was going to make it," Judd wrote in her 2017 essay.

She said she felt the most like herself when she was onstage. But what the crowds of adoring fans didn't see were the mental health struggles that followed when the tour ended.

"I would come home and not leave the house for three weeks and not get out of my pajamas and not practice normal hygiene. It was really bad," she said.

It was during her bout with her depression after the "Last Encore" tour that Judd's suicidal ideation became relentless and she convinced herself that her family would rationalize and understand her desire to die.

"It's so beyond making sense but I thought, 'Surely my family will know that I was in so much pain and I thought they would have wanted me to end that pain,'" Judd said, according to [People Magazine](#).

What stopped her from acting on her suicidal ideation was the idea that a member of her family would have to find her body, she said.

Judd began taking new medications, trying new therapies and working on her relationship with daughters Ashley and Wynonna. [Read the entire article](#)

[Kalhan Rosenblatt](#) is a reporter covering youth and internet culture for NBC News, based in New York.

"Staying quiet about one's struggles limits that person's ability to seek proper help or treatment." - Sarah Bregel

"We need to remember across generations that there is as much to learn as there is to teach." Gloria

Steinem

8] [Brave & Unbroken Project Podcast](#) @ Spotify with Pennie Saum

Pennie Saum is an author of Brave and Unbroken, speaker, advocate, law changer, and voice seeker who has dedicated her life to help victims use their voice to move through trauma and grief. She has a passion for helping child sexual abuse victims become thrivers. Pennie is determined to impact those who are struggling the trauma of child sexual abuse.

[Pennie Saum @ Linktree](#)

8a] [Shattering the silence and shame of Child sexual abuse](#) - Pennie Saum -TEDx Beacon Street – YouTube 8 minutes

8b] [Embrace the Possible: Unleashing Your Voice After Child Sexual Abuse](#) Pennie Saum - TEDxBoston YouTube 10:33 minutes

“Depression is not a sign of weakness, it means you have been strong for far too long.” - Unknown

“There are wounds that never show on the body that are deeper and more hurtful than anything that bleeds.” Laurell K. Hamilton, Mistral’s Kiss

9] [Soul Cry: Releasing & Healing the Wounds of Trauma](#) by Dana Arcuri

Trauma is soul crushing. It pierces the heart. Transparently, Dana Arcuri bares her soul to support other abuse survivors. Together, they link arms as they say, “Me too.”

Her true crime story is sprinkled with suspense, drama, and romance. Her gripping message shares unspeakable things that she's suffered. Child abuse. A dysfunctional family. Sexual assaults. The toll of compounded trauma, including Fibromyalgia, wicked drug withdrawals, a near death nightmare, and Complex PTSD.

Bravely, Dana tells her real, raw story. For anyone battling deep wounds, she hears your soul cry. She gives a powerful voice to the voiceless and hope to the hopeless. She empowers you to courageously release and heal your trauma. Dana's captivating memoir will help you to learn:

- You are not alone.
- The abuse was not your fault.
- Your story matters.
- You deserve to heal.

“The most rewarding experience is to light the path for other hurting souls to find their way out of the darkness.”

[Dana Arcuri](#) - Inspirational Author, Speaker, Survivor, & Advocate

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

“I'm not the person in your life who's going to say what you want to hear. I'm going to say what needs to be said. You'll either love me for it or hate me for it. That's on you.” - Brooke Hampton

10] **Saprea Healing Retreat for Women Survivors of Childhood Sexual Abuse** by Staci Reay

I recently attended a 4-day healing retreat in Georgia. The retreat was hosted by Saprea, previously named the Younique Foundation. I was joined by six other survivors, from all over the U.S.

The Saprea Retreat is a clinically informed 4-day in-person experience followed by a self-guided online course. The retreat teaches about trauma's impacts, provides opportunities to apply healing tools, and builds community among survivors. The in-person experience lays a foundation for healing that the online course builds on for deeper understanding and application.

Retreats are held in Georgia and Atlanta. Participating in the retreat is free of charge. Participants are responsible for traveling to and from the retreat. I chose to fly to Atlanta, GA

I, and three other survivors were met at the Atlanta airport by Saprea staff. We drove about an hour and a half to a beautiful property nestled in a wooded area next to a creek that ran through the property. We drove to a large cabin on a hill, where we met three women that had driven to the retreat. The cabin was modern with several bedrooms with a private bath. We all had at least one roommate. There was a large living room, kitchen and loft area. There was also a large deck overlooking the property. We slept in the cabin and also participated in early morning activities (Yoga, Tai Chi and Meditation) and evening activities (art therapy, music entertainment and a drumming circle). There was always at least one staff member present in the cabin, and an overnight staff (EMT and Counselor) on duty during our sleeping hours, but awake and available to us if needed.

Most of the day activities, education and meals were held in the “Clubhouse.” A large private home, retrofitted for the retreat. It was a beautiful modern home, with large rooms, kitchen and dining room and several restrooms. There was also a large front porch and back deck and pathways that led down to the creek and several small ponds on the property.

We were served 3 meals a day, prepared by a private chef. Some of our meals were almond crusted farm grown salmon, steak filets, fresh salad and fruits and other delicious appetizers and entrees. The chef accommodated for participants that required gluten free and egg-free diets. The food was phenomenal.

The retreat is based on three healing principles: Education, Experience and Community. Our days were filled with education and activities related to the healing principles, with a short break for meals and 45 minutes of free time during the day. I spent most of mine on the deck, walking down by the creek or lounging on the grass soaking up the sun.

The staff were professional, empathetic and knowledgeable. They led our discussions and presented information on the effects of childhood sexual abuse and different healing techniques and tools. We were encouraged to attend all “classes” and activities but could opt out if we chose. I attended almost all classes and activities, but missed a couple early morning activities.

The best part of the retreat was building community with other survivors. It was so comforting to be with other people that understood what I was going through. Even though, they may not have had the same experiences in childhood or were experiencing the same trauma systems that I was struggling with, I still felt supported and understood. I was able to be vulnerable and let go of any pretensions of looking good on the outside when I was falling apart on the inside. If I needed to cry, walk away or just be with someone, I felt supported and included.

There is an online application and a short interview process. After you are accepted. You can choose the date and location of the retreat you wish to attend. More information can be found at www.saprea.org. I highly recommend this healing retreat.

Staci Reay, Survivor

Please note, Staci is also a Board member of EmpowerSurvivors - a survivor-led organization incorporating the peer support model.

“People don't leave jobs, they leave toxic work cultures.” - Dr. Amina Aitsi-Selmi

“No one would ever say that someone with a broken arm or a broken leg is less than a whole person, but people say that or imply that all the time about people with mental illness.” - Elyn R. Saks

11] [Op-Ed: The mentally ill defendants in my courtroom need treatment, not jail](#) By Judge Terry Lee Smerling - Los Angeles Times

This month, the Los Angeles County Board of Supervisors and chief executive are putting together the county budget and deciding how to spend around \$36 billion of our taxpayer dollars. They have committed to a “[care first, jails last](#)” vision of public safety that centers community-based health solutions and services - particularly for people with mental illnesses.

I strongly support this commitment because easily one-third of all criminal defendants who come through my courtroom and other courtrooms across the county - thousands of people a year - are identified by defense counsel and assessed by Department of Mental Health personnel as having a mental illness. Prolonged incarceration for people with mental illnesses worsens outcomes and, yes, is [more costly](#) and less effective than community treatment.

Yet the county has grossly underfunded the critical community treatment options that judges, prosecutors and defense attorneys want to use and which we know work.

To make the “care first, jails last” vision a reality, the county must invest much more in the professionals who conduct mental health evaluations in the courts, the people who connect defendants to services, and the programs that are alternatives to incarceration for people with mental illnesses.

First, the county is not funding enough forensic professionals - social workers, psychologists and psychiatrists — to identify people who qualify for “mental health diversion,” a process under state law that allows judges to help defendants with mental illness engage in treatment instead of ending up incarcerated with a criminal conviction. The current corps of forensic professionals are overworked and there are often long waiting periods for assessments. Increasing the number of these professionals will

cut down on delays for people who clearly belong in treatment settings.

Second, there need to be many more trained staff working in the courts to connect defendants who have unmet treatment needs to mental health programs in the community. The county's Department of Mental Health's [Court Linkage](#) Program does this, and the staff recommendations often help judges choose treatment as the appropriate approach to a case. However, the program is currently facing a staff shortage due to under-funding, especially in the largest criminal courthouse in downtown Los Angeles. Without more staff to connect defendants to services and follow-up support, it won't be possible to achieve the "care first" vision.

Third, and perhaps most important, the county needs to fund places for people with mental illness to land - programs that provide treatment in the community and housing for those who need it. The county's [Office of Diversion and Reentry](#) housing program is a valuable option for the many defendants who are homeless and have a mental illness. The program is well-respected in the courts because it is effective in providing case management and supportive housing, which address some of the root causes of harm in our communities.

A recent [research study](#) by the Rand Corp. found that many more people in the county court system should be given access to this program. But judges cannot place people in ODR housing because the [county has not funded it adequately](#). The county needs to invest in ODR immediately and without pause, so the program can take on more clients. No one who needs this care should be denied simply because of funding. In fact, the county should heed the advice of its own [work group](#), which recommended an investment of \$237 million to add 3,600 community-based treatment beds.

Many judges, like me, want to place people in treatment settings rather than jail. But we feel that our hands are tied without the county's political and financial commitment. I have long [stood against](#) jail expansion as a way to deal with people with mental illnesses in the criminal justice system. Thankfully, the county Board of Supervisors has decided against jail expansion, and there has been unmistakable progress toward getting people with mental illness out of the jails in recent years. But it should not be many years more before the critical next steps are taken.

It is imperative that the county expands alternatives to incarceration that connect people with mental illnesses to community-based treatment and provides critical supports, such as permanent supportive housing.

The current budget process will show whether the county is truly committed to the "care first" vision by investing the money needed to carry it out.

"I have found only two types of non-pharmaceutical 'therapy' to be vitally important for patients...: music and gardens." - Oliver Sacks

"Mental pain is less dramatic than physical pain, but it is more common and also more hard to bear. The frequent attempt to conceal mental pain increases the burden: it is easier to say "My tooth is aching" than to say "My heart is broken." C.S Lewis, The Problem of Pain

12] [Choice Heals Us All](#) – Mutual Peer Support Resource for 50 years +

[Meeting Registration – Zoom](#) - Before registering, please read the following WiseCracker Principles of

Support** which are our current WiseCracker group agreements.

- 1) We are based in self-help and mutual support.
- 2) We believe that healing is possible and probable for all.
- 3) We value human language that is non-clinical. This allows each person a space to explore and find their own meaning in their life and their experiences (worldview).
- 4) We believe in the healing power of choice. Attendance and participation are completely voluntary. It's okay to just listen.
- 5) We are not here to "fix" each other or give advice, but rather "be" with one another, creating a culture of reciprocal respect and support.
- 6) We refrain from universalizing our experience and our worldview. Difference is expected, welcomed, and honored.
- 7) We refrain from judgment! We challenge ourselves to intentionally come from a place of genuine curiosity when people share their experience and worldview.
- 8) We use "I statements" whenever possible speaking from our own experience without advising other members what to do.
- 9) We welcome "bad" jokes and respectful humor.

**These Principles of Support were adapted from Healing Connections, which adapted them from documents written by the Western Mass. Recovery Learning Community (now Wildflower Alliance), Shery Mead's Intentional Peer Support and APS, The Academy of Peer Services.

“Creativity does not necessarily mean you paint or write – creativity is being uniquely who you are & expressing it. It helps us unblock negativity so we can start to see the world in a more positive light.”
Amanda Clifford

“I have accepted myself and I'm beginning to accept other people the way they are each day. Now I have fewer resentments.” - Living With Sobriety

13] [Podcast - Dare To Heal](#) - hostess Salima Jadavji

‘Dare to share your untold story’ has been brought to you with the intention to breakdown barriers of mental stigma and invite guests into a safe space to share with vulnerability their full story - no matter what part of the journey that they are in, beginning, middle or end. As a society we are conditioned to keep some of our most painful stories a secret. No matter what we each have suffered with or what strife we have faced - there is always a part of our story that remains untold. The ‘untold story’ has a lot to do with the impact on mental health which we shy away from sharing. So, let’s expose what we suppress and embrace the invitation of ‘mental beauty’.

The notion of embracing ‘mental beauty’ is the next way to see mental health... and when you dare to share... you break the silence, speak your truth, use your voice, and inspire others to do the same.

With almost two decades of expertise within the community sectors, private organizations, healthcare and education institutions, I am Salima Jadavji your podcast host(ess), a registered social worker and your mental wellness connoisseur

I dare to share! - [Submit Your Story](#)

Welcome to ['Nominate' a friend to share their story!](#)

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

“To love what we do and share what we love, as we help others enjoy creativity and worthwhile accomplishments...in this we make a difference.” - Statement of the Heart

14] [Compassionate Approaches to Crisis Webinar Series](#) - Neurodiversity Gifts: A Meta-Map

[The National Empowerment Center](#) is continuing to offer webinars on peer-run services serving individuals experiencing an emotional crisis.

Our next webinar in the series is scheduled for Thursday, June 23rd, from 2:00 - 3:30 pm ET (eastern time).

When you change the way you look at things, the things you look at change. The lenses through which we see mental health conditions are crucial in providing compassionate navigational maps that lead to deep healing. This session offers a fresh set of lenses that allow you to elicit the gifts of neurodiversity, meaning, and purpose. A meta-map of the territory will be drawn by synergizing the worldviews of depth psychology, Greek philosophy, shamanism, spirituality, and current research. Endorsed by NAMI San Diego, and studied by the University of California San Diego to be approved as a treatment modality, South African Josh guides you through a dynamic presentation and breakout session that unpacks the game-changing gifts of neurodiversity.

[Teaser Video](#)

Learning Objectives - Participants will:

1. Utilize their enhanced cultural competency to better select a cosmology that aligns with peers' self-reports
2. Become aware of models that supplement and balance the biological model of psychosis
3. Appreciate the diversity of perspectives that lie beyond culturocentrism and chronocentrism

Presented By - Josh Roberts

Born and raised in South Africa, the extensive travels of Josh Roberts include ventures deep into the state of mind called bipolar type 1. Josh combines his lived experience in the mental health system with his education in psychology (BA from the University of South Africa) and theology (MA from Fuller Theological Seminary). His passion is to create a synergy between the inner and outer worlds through optimizing mental health. He works with prominent mental health providers in San Diego, California including NAMI, Mental Health Systems, and Interfaith in supporting many of those who are most affected by mental health struggles. He's an avid surfer, riding the currents of his American lucid dream with his wife and two young daughters.

Co-moderator: Oryx Cohen - CEO, National Empowerment Center

Co-moderator: Shira Collings - Youth Coordinator, National Empowerment Center

*“The secret of change is to focus all of your energy, not on fighting the old, but on building the new.”
Socrates*

“If you feel safe and loved, your brain becomes specialized in exploration, play and cooperation: if you are frightened and unwanted, it specializes in managing fear and abandonment.” Dr. Bessel van der Kolk

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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[@SurvivinSpirit](#) Twitter

[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