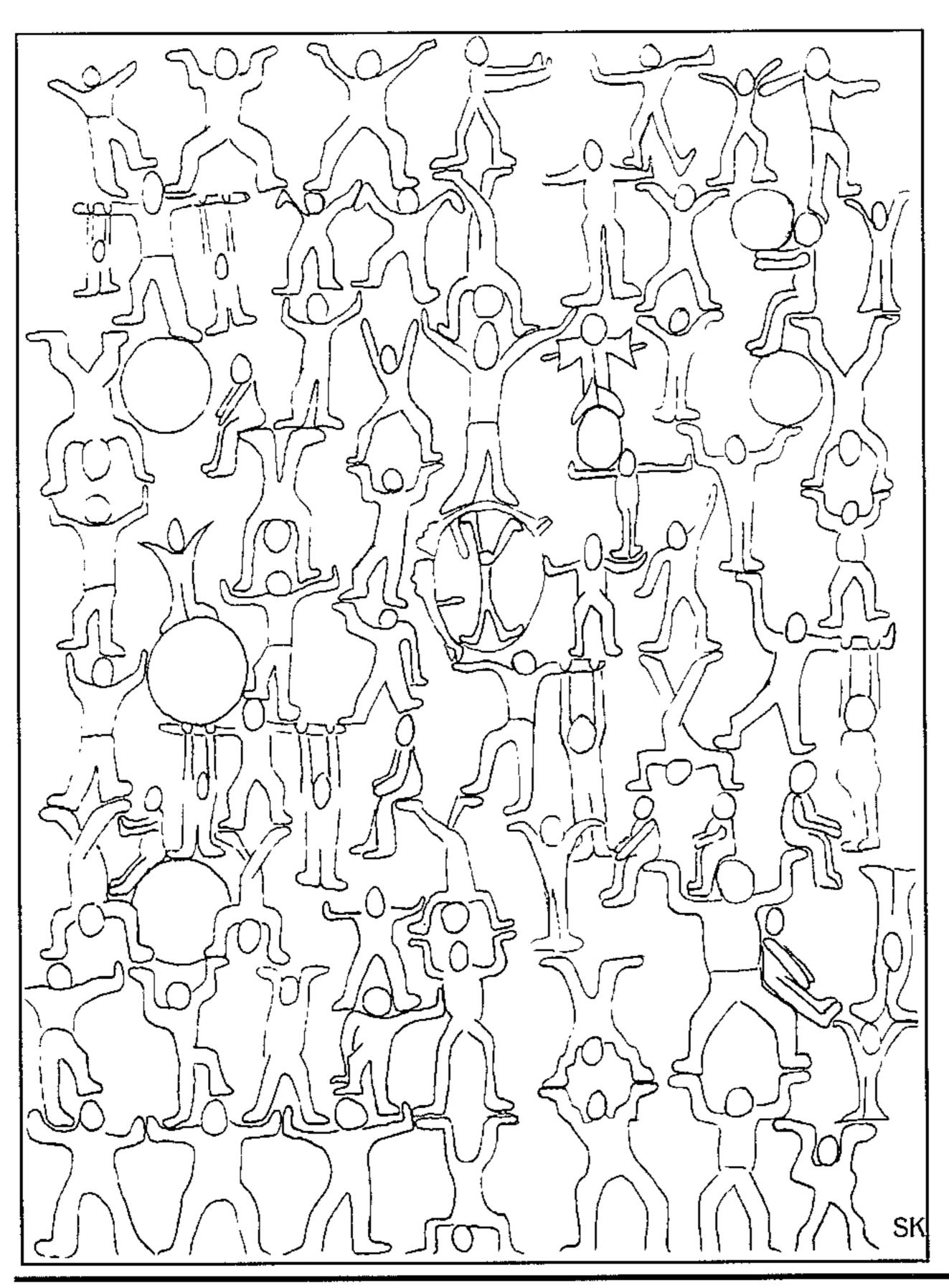
# MANY WOICES

WORDS OF HOPE FOR PEOPLE RECOVERING FROM TRAUMA & DISSOCIATION

Vol XIII, No.6 December 2001 ISSN1042-2277

In This Issue:

# Self-Esteem What to Do to Feel Better



#### **Believe**

Design a dream that is just yours Then step in it and bask in its brilliance

Enfold around the moment Lean back trust

Do not be afraid There is nothing there to hurt

How do you capture a dream and Feel comfortable in its manifestations

Trust go forth confidently Entwine your fingers in it

And draw it close to you And make it yours

No need to hold it gently It will not crumble

It is strength personified Just yours to believe in

Go forth arms outstretched For there are many dreams

> Waiting patiently for Your faith's belief

To step into now To claim your inheritance

Of "your" world

By Kathy A.

<u>MV</u>

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# The Internal Community Meeting—An Invaluable Tool

By CE

Most all of us with Dissociative Identity Disorder can attest to the fact that lack of honest communication between ourselves and our therapist is a surefire recipe for trouble. I believe equally as vital is good communication between you and your alters and also within the System itself.

I will forever be indebted to the psychiatrist who taught me how to arrange and conduct an internal community meeting. I had just inflicted a very nearly lethal suicide attempt upon myself while in a dissociated state and my doctor pronounced that this had to stop!

The inception of the community meeting turned out to be a pivotal point in my healing and eventual integration. If you are unfamiliar with the technique and would like to try it, I have outlined some guidelines:

- 1) Choose an alter you are co-conscious with—preferably one who carries some authority in your System and is stable and never self-destructive. Contract with this alter to be the moderator.
- 2) Find a quiet, comfortable place where you won't be disturbed. (It is your choice whether to do this in or

outside of therapy, but if you can be safe, I think you are better off alone.)

- 3) Use your imagination and detailed visual imagery to set up a meeting place. Mine happened to be a cozy parlor with a fireplace and overstuffed chairs, but you could choose anywhere that you feel would be comfortable for the group.
- 4) This is optional, but you may want to ask one reliable adult to "babysit" with the very youngest children elsewhere, depending on what content is to be discussed or how heated the meeting may get.
- 5) Ask the moderator to take a group vote allowing you to fully participate in the community meeting. Assure he/she that your vote carries no more weight than anyone else's.
- 6) Encourage the leader to run the meeting in an organized manner—one issue at a time, no interrupting, majority vote rules, etc.

The matter of safety is, of course, the most critical issue to address. Expect disagreements, but also expect your System to reach consensus on almost every issue. After all, you have been living with this inner community for years and have survived. The

practice of community meetings will just make things a lot more structured.

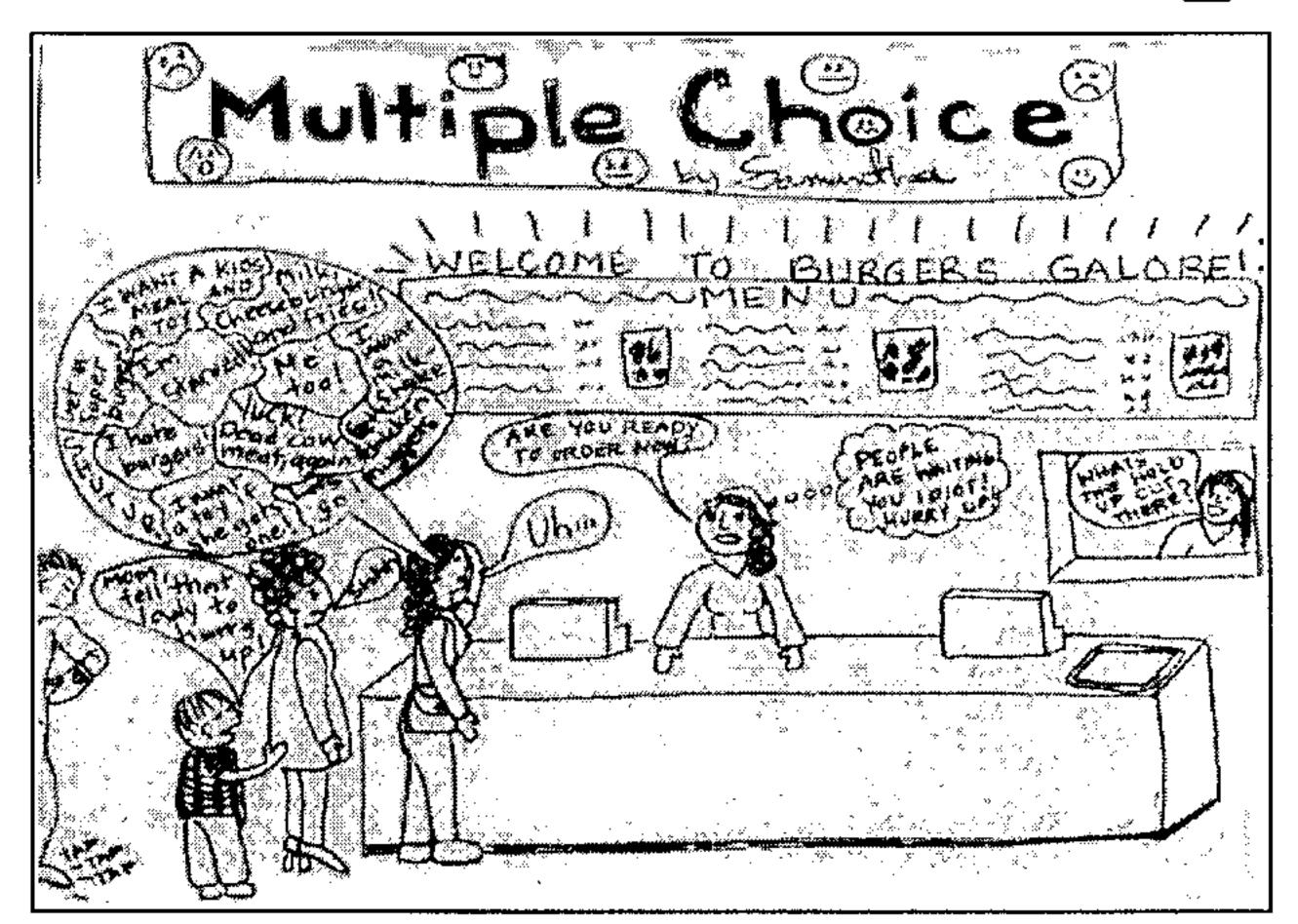
I predict you will be astounded at how well this method eventually will work for you. One of my most prized possessions is the "attendance sheet" I passed around at my first community meeting. Each of my alters (46 minus a few small children and two rebellious teens who refused to participate) signed in and voted on a safety issue. I had collected a variety of colored pens and markers, knowing everyone had their own preference, and the two pieces of notebook paper are a nostalgic reminder of the distinct handwriting and personalty of each of my internal comrades.

Please don't be discouraged if this method doesn't come together for you the first time you attempt it. I think you have to "be ready" for it in terms of knowing all your parts fairly well before you can tap into the power of this kind of cooperative effort. Also, one caveat—I often had a headache after a meeting, especially if it was emotionally charged, which it usually was. Good luck, and I'd love to receive feedback (via Many Voices) from anyone involved at this point in therapy!

## Don't Stop

Don't stop before the Miracle happens.
Don't stop working on Your recovery.
Don't stop working on Issues that upset you.
Don't stop talking to Your Higher Power.
Don't stop looking Forward to tomorrow.

By Patricia R.



# The Candy Personality Test

By Dr. Frank Froman

Many psychologists keep a candy dish in their waiting rooms. There are some interesting correlations in people's candy eating behaviors and their personalities...

...Immature personalities always eat the red candy.

...Orally fixated personalities eat the soft kinds.

...Obsessive-compulsives find one kind, and then contine to look for all other pieces that are the same kind.

...Anti-socials take almost anything, as long as it's hard, and then crunch it with their teeth. They seldom suck on hard candies, preferring instead to chew them quickly.

...Dependent personalities ask if they can have a piece.

...Narcissistic personalities take one as soon as they see the bowl, and never ask.

...Folks who are on Medicaid take a handful, put it in their pockets, and let the doctor know it's for all the kids at home.

...Conduct disordered kids unwrap the candy and toss the wrapper back on the floor.

...Paranoid people check out each piece and then put them back uneaten.

...Histrionic folks select the brightest colored pieces, and then eat them seductively.

...Schizoid types eat many pieces mechanically, with no outward signs of enjoyment.

...Borderlines eat a lot of candy and then tell the doctor that their previous therapist had a better selection.

...Only very strange people eat the green Life Savers.

\*\*\*\*

(This article originally appeared in the Fall 2001 issue of *The Independent Practitioner*, the bulletin of **Psychologists in Independent Practice**, a Division of the American Psychological Association. Thanks to Dr. Froman and the IP editors for sharing this with us! & to Paula who told us about it in the first place. LW)



#### MANY THANKS TO OUR ANGELS!

Del Amo Hospital - Torrance, CA Call Chris McMillin: (310) 530-1151 or (800) 533-5266

Forest View Hospital - Grand Rapids, MI

Call Bill van Harken: (616) 942-9610 or (800) 949-8439

River Oaks Hospital - New Orleans, LA

Call Martha Bujanda: (504) 734-1740 or (800) 366-1740

Timberlawn Mental Health System - Dallas, TX Call Christie Clark: (214) 381-7181 or (800) 426-4944

Two Rivers Psychiatric Hospital - Kansas City, MO

Call David Tate: (816) 356-5688 or (800) 225-8577

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If you know of clinics or conferences that need flyers, please call us! We appreciate your support! — Lynn W., Editor

#### Listen

By Ann

Don't try to change me, or tell me how to live. Sorry if people are different, but I have the right to change my mind and moods. That's what makes me, me.

If I want friends, Please learn to trust that I have changed and can be a very private person. We all need friends to be healthy. Some people need medication to stay healthy and some don't. That just how life works.

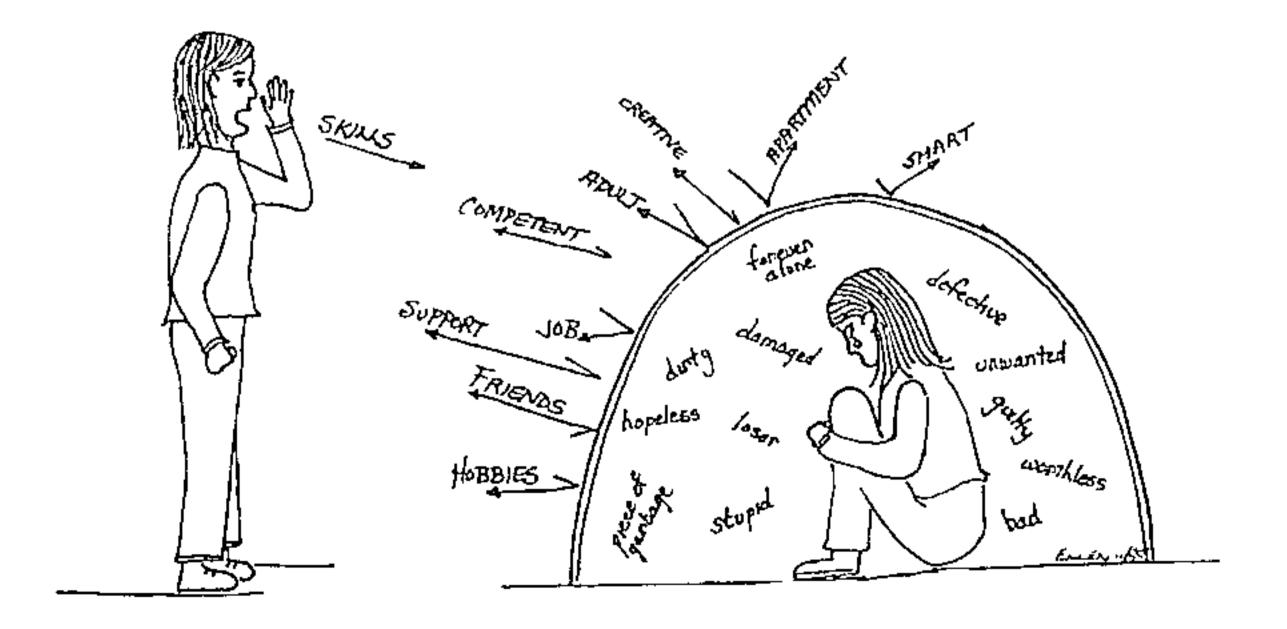
Please don't tease me or put me down. It doesn't help you out for long periods of time. It only hurts me and shuts me out and lowers my self-esteem. And it doesn't need lowering any more than it already is, without help.

All I need is for someone to be equal with, someone I can trust to come home to at the end of the day and not be nervous that I will be judged by and put down by every word or action I might have done.

If I make a mistake then let me learn from it, not pay for it.

Let me find out who I really am and what I like and don't like. I am tired of molding into everyone else's moods. I want my own identity. I want someone to like and/or love me for who I really am. If I change it may only be for the better. I am discovering life and the world around me, and within, too.

I can be a good person. Learn to trust me. I don't want pity or to be carried through life.



# Supporting Myself

By Abby

or many years I had no idea why I got every job I applied for, was a favored employee, but within a year I would begin to have panic attacks before work, confusion and tears during work and then, after work, get lost going home. I had over 30 different types of jobs and quit each one when the panic, tears, dissociation and getting lost got to be too much to handle.

I know now that it was an alter problem. My adults would apply for the jobs. They would work the job for months. Then, as we became comfortable with a supervisor or boss and knew we were especially liked, things went downhill fast. It was then that our lonely little alters would come up and want mothering from "the nice lady." No amount of attention was enough for them and they would cry and get homesick. Each time this began, I would start to leave work early whenever possible, cut down on my hours and then cut down the number of days I worked. The pressure would get worse and worse. By the time I quit each job, I would be having more and more thoughts of suicide.

I ended up applying for and receiving disability. It has been a mixed blessing. It is a great relief to not be going through the new job—leave the job routine. However, living on \$600 a month and food stamps has been difficult in many ways. After living a cozy suburban lifestyle for thirty years, it was embarrassing to sign up for help and hand cashiers food stamps. I had lessons to learn. The biggest lesson was that my worth did not change when my bank account did.

It was Lynn W and Many Voices that lifted me up out of being in the system forever. In 1990 I began to make small clay sculptures to help me communicate my overwhelming feelings of shame, grief and despair as I began doing therapy to heal from incest. It was our alter Abby that made each sculpture. We were not co-conscious with her so we woke up many mornings to find a drawing or

new clay figure that was a total surprise to us. Several of us tried to make the sculptures since Abby was never out for very long. Friends and friends of friends would see the sculptures and want ones of their own. We tried hard to make them but ours looked awful, not at all like Abby's.

After trying for a couple of years, we finally asked a man who creates large outdoor sculptures and fountains to make molds for us. He was quick to say he was sorry but he just really didn't have the time. I was surprised to hear someone inside say, "No, you don't understand. This has to happen. It is what I am supposed to be doing and I can't make enough of them by hand." He stopped what he was doing and looked at me for the first time and said, "Well, come inside and we will see what we can do."

He made excellent molds for me. They were so faithful to the originals that even fingerprints on some of the originals were captured in the molds. I cast dozens and dozens of each of our nine sculptures in my apartment kitchen every month and began to sell them through word of mouth.

Then one day while reading a new issue of Many Voices, I read Lynn's offer of free advertising in the (then) annual Multiple Choices catalog. She wanted to do what she could to help survivors find a way to be self-sufficient. We took her up on her offer and ran ads for several years. We received not only orders but also wonderful letters from other Many Voices readers. I was very happy with the response we got. It was nothing overwhelming but it was steady income. More than that, it did wonders for my self-esteem.

Over the years, Abby Studio and I have had lots of ups and downs. There were many months in a row when we would have no orders at all and then we would get a trickle again. There were many months in a row when I would get lost in flashbacks and depression and then I would begin to rebound again.

Today, Abby Studio has a website, brochures and the ability to place some paid advertising. We wrote a book about the sculptures and healing several years ago and ran copies off at Kinkos—six or a dozen at a time—whatever I could afford. I planned to have an extended version of that book published through a service named IUniverse. For \$100 (or \$200 if there are pictures) IUniverse will offer one's books through all of the major online bookstores and each is made to order. Writers can buy books at a reduced rate to sell themselves. Writers also receive a royalty for each book sold online. It is a great service to first time writers, but I was unable to understand the template they required writers to use. After seven or so tries, I gave up and went back to Kinkos. We recently approved the writer's proof copy and are going to press as I write this.

I have done a few presentations to groups and I love doing that. My hope is that the internet, my brochure mailings, word of mouth and loyal collectors of Abby's work will support us enough to let us get off disability and our fixed income. I hope to speak to an increasing number of groups about healing from trauma. I am also writing a second book—House Built on Stilts—which is my story from ages five to ten—and have a few others rattling up in my head.

I hope that other survivors will accept Lynn's generous offer. I feel sure that I would not be where I am today without that first boost. It put me on the road to success financially and mentally.

The most important thing I have learned about becoming financially independent is that for multiples, we may need to work outside the box. We may not be able to work in a rigidly structured environment, but I believe there is a job out there for each of us. For me, it works to be in total control of how things are done and when. For others, it may work to turn a hobby into a small business or to take on a job that we really love in an

environment that allows for some flexibility. My friend Sue has recently taken a job in a bird shop after managing a large doctors' office for many years. She is learning so much about the environment, birds, butterflies, plants and habitats that she loves going to work.

If you would like to see Abby's work, please visit www.abbystudio.com (use Microsoft Explorer) or you can write for a color brochure to Abby Studio, PO Box 24124, Indianapolis, IN 46224.

<u>MV</u>

### Healing

Since being in therapy I am discovering new and wonderful things about myself. I have the power to choose to be selfish or generous,

Fearful or fearless

accepting or judgmental.

The abuse that tormented me as a child is over.

I can be a daisy that grows in the midst of the black pavement.

Here is my definition of healing:

The road to discovering the self that has retreated into the safety of the mind.

Healing does not only affect ourselves, but also the world around us, as we share the scars that once held us captive.

We are becoming more and more free. Accept the freedom, even if in only small bits at a time.

We need to learn to nourish ourselves. Be embraced by the warmth of the water in a bubble bath.

Hug and kiss more animals—they have insight into our very souls and can touch us deeply.

Our healing touches everyone in our lives.

We're not alone in our darknesses.

While on the journey of healing take time to be alone with your thoughts and dreams.

You will find a very special part of yourself there.

Your life is precious! You are significant!

By KC

## Honoring the Infant(try)

I feel overwhelmed and struggling

Taking on life's activities

as a wounded child.

It's easy to see

a grown adult female

sitting here

"Trudging the road of happy destiny"

with so many maps so many guideposts

Abundant information

and resources the

universe has to offer JUST SAY THE WORD!

CLAP YOUR HANDS!

Yet, from under the soot

of dead ones' ashes

murdered and murderers

Reaches a tiny hand.

How old?

millennia

Grasping for Light

"YOU CAN'T GRASP LIGHT"

a voice BOOMS

the voice that slashes

initiative.

"Reach higher"

Mother Spirit urges, whispering

"The higher I reach the more I'll grow up into the light."
"I'LL STOP YOU

YOU CAN'T

"T'YOW DOY

the voice BOOMS

fearfully.

The dark BOOMING cannot

grasp my Faith.

My writing

reminds me

I have it!

Frustration barks

at

tiny steps.

I WANT TO LEAP TALL

BUILDINGS IN A SINGLE

BOUND!

I thought I was almost done

with memories,

with blinding chains

and chainsaw massacres.

I FEEL EXHAUSTED

But see

a tiny hand

emerging from the soot

The hand is clean,

Innocent

filled with light and power.

ByJH



# Therapists' Page

By Elizabeth F. Howell, Ph.D.

Elizabeth F. Howell, Ph.D. has published a number of articles on the topics of trauma, dissociation, and masochism, and edited a book of readings, *Women and Mental Health*. (Eds., Howell and Bayes). Dr. Howell is an adjunct associate professor at New York University, a member of ISSD, and on the teaching faculty in New York City for the ISSD-sponsored training course on the treatment of dissociative disorders. She is in private practice in New York City and in Brooklyn, and can be reached at (718)797-5539 and (917)534-0700.

# The Tendency to be Revictimized

eople who have been abused are often vulnerable to revictimization. This tendency has often been understood as arising from the victim's desire to be hurt and has been called masochism. In various articles. I have suggested that such "masochism" in the sense of a tendency to be revictimized, does exist, but not because the person desires, or takes pleasure in pain. In my view, masochism (the tendency to be revictimized by others or oneself) derives primarily from two sources: a paralyzed tuning out of danger cues and a dissociative vigilant self-monitoring which originally arose to protect attachment.

When relational boundaries are traumatically damaged, people may lose the ability to protest the damage and to protect themselves, and partly for this reason are often vulnerable to revictimization. A difference between humans and other animals is the relative period of immaturity and dependence up on the caretaker, making the attachment system especially important for humans. For a dependent human as well as for a defeated animal, it may be most adaptive not to evoke aggression by contentious or protesting behavior. Emotional and physical dependence on an abuser often leads to a denial of the abuse in the interests of survival. Danger cues about dangerous people and situations may be blocked out. Thus, a survivor may literally "not see," or not put together the meaning of a threatening behavior. Instead of self-protective responses to threat, procedural repertoires such as submissiveness and pleasingness may be triggered instead. Activation of these repertoires can give the false

impression that the survivor is content with the state of affairs. While this may have been adaptive in the original abusive situation, it is probably not adaptive in current life. The ignored danger cues, such as a danger of sexual molestation, may be the very ones which the survivor most needs to notice.

Another aspect of this difficulty with self-protection is related to the "freeze" state, a biological response to predation in the animal kingdom. In addition to providing camouflage, a freeze response may avoid the predator's strike response, which is released by movement. Ellert Nijenhuis and his collaborators have observed and written about the similarity between animal responses of freezing and those of humans who have been exposed to traumatic terror. Such things as stiffness, paralysis, hiding in dark corners, and getting under the blankets may represent a human freezing response—also based upon survival. Passive, freezing behaviors can be misunderstood by observers or perpetrators, as inviting abuse. People often blame themselves for these responses, and it can be helpful in mitigating self-blame, to be aware of how universal these responses are. In my clinical experience, these freezing states can be re-evoked by circumstances or memories associated with the perpetrator. Pointing this out when I have witnessed it, or if it has been told to me, can be more helpful in understanding the experience and, ultimately, in more and more, restoring something that has been experienced as involuntary, to the arena of choice. In his studies of children's physiological responses to trauma, Bruce Perry found that trauma can alter neurodevelopmental processes, such that problematic patterns of hypo- and hyperarousal may emerge.

He labels the hypoarousal state, "dissociative" and it is characterized by dissociative symptoms such as analgesia, numbing, fantasy, derealization, fainting, as well as by extreme passivity, compliance, and dramatically decreased heart rate. In the light of these new findings about human responses to human predation, the ancient concept of "the spell," so often described in fairy tales, takes on a new meaning. "The spell" has always been characterized by a hypnotic-like vulnerability and an utter involuntariness on the part of the victim in relationship with another, much more powerful person. However, spells can be broken by the caring of others and by accessing personal agency.

Of course, abuse and humiliation generate rage. But it was not safe for that rage to be expressed or perhaps even known about. Thus, while one part of the self, the "good" attachment-oriented self, may be unaware of having been used exploitatively by a caretaker or attachment figure, another part may hold the rage and perform a protective function by vigilantly monitoring behavior that would threaten attachment. This self-state containing the rage may turn into an internal abuser, a "protector/persecutor" which vigilantly monitors the child's behavior. This rage that would normally have been felt at the violation of personal boundaries, has been hijacked in the service of self-policing. The most significant boundaries are now within the self rather than between the self and others. If the priority for the abused child has been to maintain attachment, this may have been at the expense of an adequate capacity for personal boundary maintenance.

All of the above leads to a confusion of mechanisms of trust and distrust,

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such as that the untrustworthy are often trusted and the trustworthy are not recognized. In treatment it is important to pay attention to the importance of these boundary-protecting mechanisms. In the service of maintaining attachment, an individual may have blamed her or himself, for boundary violations that have been suffered at the hands of someone else. While the survivor exhibits the damage, the perpetrator may be less visible. Part of the work of healing involves the individual's reclaiming the legitimacy of her or his own feelings and the importance of protecting personal boundaries.

And the survivor can feel very alone. One thing that the recent terrorist attacks on the World Trade Center and the Pentagon, as well as the recent anthrax attacks and the threats of bio-warfare, have made clear, is that the existence of perpetrators is real. We cannot deny the existence of these perpetrators who are bent on destruction and the creation of terror. At least in New York City, we are looking at mass traumatization, at varying levels of severity. Among the

outcomes of trauma are the shattering of beliefs in a just world and in an assumption of personal safety. Everyone is getting a taste of what it is like to be traumatized. Many people who were not previously traumatized, as well as many who were, are struggling with the question of "How could this happen?" with varying levels of disbelief. And indeed, part of the terror associated with some of the things we face, such as fear of flying, anthrax, etc., derives from fears about trauma, rather than statistical likelihood. The fears of being tortured, held hostage, of physical pain or emotional anguish and humiliation, have a penetrating immediacy precisely because they have not been processable in experience. These kinds of ruthless, psychopathic, sadistic acts are hard to fathom. As Judith Herman pointed out in her landmark book Trauma and Recovery, the earlier definition in the Diagnostic and Statistic Manual of posttraumatic stress disorder which required that the traumatic stressor be outside the range of usual human experience, was internally inconsistent in its

non-recognition of the fact that many traumatic experiences, such as incest, rape, and war are not at all outside the range of usual human experience. (Fortunately, this was corrected in DSM-IV.) It is now clear that psychological trauma is not at all uncommon, and that it is a condition with which many humans must cope.

A problem with the tendency to be revictimized is that when bad things keep happening, it is hard to find the time and emotional space to do the necessary grief work for healing. (And for this reason, it is very important in therapy to achieve a stabilization around issues of protection of the person from revictimization and harm.) However, this is precisely the problem with which so many today must cope: the losses that have been suffered have been devastating, but it has been hard to complete a grieving and healing process, because the terror continues. The losses have been horrible, devastating, and for many close to unbearable; but one small hope of a silver lining is that the commonality of trauma may be recognized.

<u>MV</u>

## PTSD In Our Daily Lives

The shocking tragedies since September 11 thrust the painful facts of traumatic stress into daily life for all Americans.

Those of us with trauma histories are especially vulnerable to being re-triggered into despair and other disabling complications subsequent to these events. As we deal with our trauma response, we may be able to help some of our friends who have been stunned or personally affected by terrorist actions and may even now be facing a period of post-traumatic stress disorder or other trauma-related symptoms in the weeks and months ahead.

In MV, we would like to open up our pages to more specific information about PTSD, especially on techniques that may help people who are new to incapacitating fears, flashbacks and other problems that derive from trauma. We welcome Therapists Pages on this topic, as well as comments

from experienced readers who are learning how to cope with their own difficult symptoms. Please send whatever might be of interest, so we can share it with others. To start, here are a few internet links to explore for up-to-date info on PTSD:

The National Center on PTSD includes current info on terrorism, as well as resources for survivors of trauma, veterans and others: www.ncptsd.org

David Baldwin's Trauma Pages is an award-winning, regularly updated site. It is easy to navigate and very thorough. See it at www.trauma-pages.com

The University of South Dakota's Disaster Mental Health Institute offers downloadable (PDF) handouts on coping with terrorist attacks and coping with the aftermath of a deliberate anthrax attack. See these and much more information at www.usd.edu/dmhi

The website for the International Society for the Study of Dissociation is located at www.issd.org. Its Southeast Michigan chapter is building a website at www.traumahelp.org
Both have helpful links and info on PTSD and its treatment.

The National Mental Health
Association, which has 340 affiliates,
provides specific info on coping for
different age groups as well as
considerable info for survivors and
families. It also includes a listing of
mental health professionals that will
assist terrorist victims. See
www.nmha.org

Please, do write to us with your PTSD information and advice. We want this to be an ongoing project!

—Lynn W., Editor

## Partners Page:

# The Terrain of Home: Part II The Difficult Art of Relationship

#### By Gwen & Bill

\*Note: I use the word "she" because most multiples are female. In no way am I intending to leave men out, but it would be cumbersome to write he/she all the time. \*\* The excellent book on "inner family" dynamics and therapy techniques is *The Family Inside: Working with the Multiple* by Doris Bryant and Judy Kessler. This book has my highest recommendation.

Me: Having been close with a multiple for years (me!) what do you think people just starting out in a relationship need to know most?

Bill: It's most important that they treat each alter as an individual. That is so important. They must react to them at their emotional age. That helps build trust. Because it shows that you really believe them.

Me: I have some questions about this. First: how do you balance treating each alter as an individual and also helping a multiple understand or gain a sense of integration or wholeness if that is their goal?

Bill: The partner has to understand and be able to explain that integration is not a weakening of individual alters, but a strengthening of the whole. That's very important.

Me: Okay, but not everyone is "there" yet. I'm really attempting to get a sense of how you balance the issues of "separate but whole" within yourself, and how you would help another partner balance this. Because in a sense, yes, you need to respect every part as an individual with separate memories, feelings and behaviors. Yet, if that is stressed too much, to the exclusion of working toward integration, I would think that might undermine goals or interfere with work that is being done in treatment. So it's a question of balance. How do you approach this?

Bill: You have to let the multiple bring up the questions of integration so that the partner doesn't seem to be pushing for integration; the partner is supposed to be supporting the multiple. Because that's important; you don't want to start pushing the multiple toward integration. You want to support them when they're ready for integration. It has to be understood

that integration may not be the best thing in the end. That's why you can't push too hard.

Me: What do you mean by that?

Bill: The multiple and the therapist have to be the ones to determine what the final stage of integration will be. The partner should not be the one who is pushing for full integration, if it's not a feasible end step.

Me: So it's important not to push your own agenda.

Bill: Exactly.

Me: Is it easier for you to think of me as a "whole" or is it easier to think of me as "separate"?

**Bill:** Since I've only known you as separate, I can't think of you as a whole.

Me: I think you do it all the time.

Bill: You think I do it all the time?

Me: I think you're excellent at it. It's one way you are incredibly encouraging to me. I feel that all the parts of me are valued as individual and as part of a whole person; it's easier for me this way to accept all myselves because I have that acceptance from you. The question is, if you had to give other partners the formula for doing this, what would it be? You're faced with little child alters, a protector, a feisty "buffer", a "nurturing" alter...is it lonely for you? What's it like? How do you look at your partner and say "This is the person I care about. This person is also many." How do you do that and not lose your mind?

Bill: Is it lonely for me? Absolutely not. It is identical to living with a family. There is always somebody new, different, caring...everybody is caring.

Me: It's interesting that you say it's identical to living with a family...that's sort of my sense as well. And I find that

one of the most helpful approaches in therapy is to deal with the "inner" family ( as Virginia Satir calls it) ...or The Family Inside, which I recommend so highly (see note above). But, to ask a further question: it's not lonely? Not lonely not to have someone consistent and "there" all the time, who can respond to you consistently?

**Bill:** Absolutely, it's not lonely. It's a challenge. It's exciting, it's invigorating, it keeps you young.

Me: I accept that. To get back to this question I keep asking you: how do you balance seeing me as one and seeing me as many at the same time?

Bill: I don't think I see you as one. I'm glad I give that impression.

Me: Why?

Bill: Because it seems to help you.

Me: I'll give you an example. You are always able to, fluently and effectively, help me see how each alter connects to another. Here's another example. You use the word "you" to refer to me collectively. I also have the sense that you care for me as a whole person, that you are able to see my moods and shifts as connected to each other.

Bill: I think you give me a lot more credit than I deserve.

Me: Maybe you're not conscious of it all the time, but I think it's an accurate assessment.

Bill: You're such an easy person to accept.

Me: I don't think so...but we're straying from my initial hopes for this article. (Bill further compliments me...and I stick to the point). I think you are completely evading the question of how to balance seeing me as a whole and seeing me as many—but I think this may reflect how difficult that is.

Bill: That's true.

Me: So it is difficult?

Bill: Very much so. You're outstanding as a multiple, but you'd be awesome integrated.

Me: You are such a smudge artist.

Bill: Some things I can do, but I can't explain how I do them.

Me: How would a partner deal with the drawbacks of dissociation? Let's say some guy told you, "I care about this person, but I'm going crazy dealing with all the switches, lost time, conflicts in what she wants..." What do you say to him?

Bill: There's very little you can say other than you have to learn to accept the person the way she is; you have to make them feel safe. That may help with the switching. Sometimes they switch because they're scared.

Me: That's very true. So, to ask his partner what helps her to feel safe?

Bill: It's important that the multiple can define their safe parameters. Such as: a light on in the room all the time, windows locked, doors locked...those could be some parameters.

Me: Needs will be different for every multiple. So one way for a partner to help would be to get a sense of the multiple's safety needs and how to meet them. Isn't that demanding a lot?

Bill: But this then allows the multiple to trust you more. It builds trust.

Me: So there is safety, and acceptance of each part needed. What else would you tell a new partner?

Bill: Are all multiples as physically sensitive to touch?

Me: I think many are acutely sensitive. Sometimes I think this might be a result of post-traumatic stress where sound and touch become amplified in a sense. Other times it may result from fear or from deprivation of touch. In addition, it may be partly genetic. Multiples are completely individual; no two are alike, but I think it would be a safe bet to say a majority experience amplified senses and acute sensitivities. How has that been for you, to understand my sensitivity to touch?

Bill: It took me awhile to learn that something that was an ordinary bump was something that could be quite painful for you.

Me: I think that might just be me, I'm not sure. So, to be alert to those

kinds of sensitivities. This brings another question to my mind. Do you ever feel as though you are walking on eggshells when you find yourself needing to pay attention to all this minutiae, or what was small potatoes to you before you knew me?

Bill: Yes. There are times when you feel like you are walking on eggshells. For example, a difference of opinion between the multiple and their partner can often be interpreted by the multiple as a criticism.

Me: I would add to that, that it may be interpreted by the multiple (me in this case!) as a denial of their reality. So how do you deal with that. It's gotten sooo much better for us, because now we have spirited discussions and I don't feel invalidated or criticized or have those kinds of emotional memories so much anymore. How do you deal, as a partner, with self-inflicted violence. Particularly when a multiple feels threatened?

Bill: At that moment, the prime directive is to prevent any harm befalling the multiple. This may entail physically holding hands or arms.

Me: That had a tendency to increase my rage.

Bill: But this is to prevent self-infliction of damage or hurt. Stress to the multiple that she may be having memories, repeat who you are so that she knows you are not the abuser.

Me: Orient her in time. Remind her where she is. But be careful not to confuse a valid argument in the present with having memories. Be cautious not to dismiss her feelings.

**Bill:** It sometimes helps if you have a familiar "fluffy" that is not part of the past, but is a part of the present.

Me: A tangible anchor. I wouldn't recommend intervening physically unless there is imminent and potentially critical damage about to occur.

Bill: I don't agree. I think the partner should at all times do their best to gently restrain the multiple from doing any bodily harm—whether it's head-banging, face slapping, biting, cutting.

Me: I would be cautious about giving mild self-mutilation any more adrenaline or push than necessary. But there is also merit to preventing

injury as you do; and in some cases it may convey care.

Bill: I don't want to give anybody any idea that it's okay to hurt themselves since they're only doing it a "little" bit.

Me: I agree. And it needs to be thoroughly addressed in treatment. One book I read, and I won't name the book here, stated that head-banging was not all that dangerous. I couldn't disagree more; in my experience it can be critically damaging—and in such instances, the multiple needs to find ways to stop the behavior so that she stays safe. It can take a really long time, but there are more effective ways to manage the anger that can be learned through therapy.

Bill: Another helpful hint is to sit on the floor so that you don't "tower" over the person. Sit on the floor to discuss the self-inflicted violence or anytime there is a loss of control.

Me: I still am pretty reactive to feeling "towered" over. So many relationships for multiples seem to fall apart. Any ideas to keep the emotional glue intact?

Bill: The glue I guess is really patience. That's very important.

Me: Can you give me an example?

Bill: A lot of the situations the multiple is presently dealing with are new to them and they are learning how to handle these things now with a partner. For example, learning to trust.

Me: I would also add that learning, on my part, how to be less reactive, less defensive, helped immensely. I did this by working through the original trauma so that I wasn't so reactive to experiences that reminded me of the original trauma. Therapy work. Any last little hints? Sense of humor? Your sense of humor has really given our relationship a strong foundation. I so enjoy the laughter, the giggles, the playfulness.

Bill: A sense of humor is absolutely necessary; it's a must-have. It's the grease on the wagon of life that keeps us moving.

Me: On that corny note—

Bill: I'll take my Prozac and go watch television!

Me: Love you.

Bill: Love you too.

(Afternote: Bill isn't on any medication! A true inspiration!)

## What's In a Name?

#### By Echo with Cathy for the Coalition for Joy

I Shakespeare was wrong. I wish I could argue with the author of those words because he obviously did not know multiple as well as he did singleton human condition.

For our system, names became a critical issue. Some alters have parts of the body's "given" name included in their names; others have names unique from the body's name. Our littlest, Jakey, is who she is because our birth parents used that nickname when they expected a son. Although she is female, the nickname was used off and on until the birth of our brother three years after us. She still identifies herself by that name.

The next oldest alter, Cathy Ann, knows she is not Jakey, and yet knows she is not Cathy either. Cathy Ann, as a child, separates herself and identifies her uniqueness from the older Cathy.

Cathy Ann named Kit, an alter who is the body's age. Kit is Cathy Ann's shortened version for kitten, which is how she viewed kit when the alter emerged. She described her as being like a fierce, frightened orphan kitten we found under the house when we were a child. We wanted to help the little wild thing, but every time we got near it, it scratched and hissed and tried to bite us. That kitten had a hard time accepting the help it needed, even though we desperately wanted to help it. Kit is like that; she is distant, self-protective, defensive and sometimes wild. She accepts the name our "little" gave her, and denies having any other name.

Echo came with her own name. She is a spiritual twelve year old, and always stresses that "Echo" is not a hollow sound. She explains that her name came from Greek mythology we studied in the fourth grade. Echo was a wood nymph, favorite of the goddess Diana. She is studying Wicca and female spirituality, and she feels close to nature, the forests, the mood. Echo finds empowerment in her relationship with the concept of Diana's Echo.

We struggled, and still struggle with self-mutiliation. The alter who cut the body cut for valid reasons, even though those reasons made sense only to her. Part of our healing process involved learning to help and to listen to the part identified as "Cutter". During a brief stint in a hospital which deals with dissociative disorders, we met another multiple who struggles with self-mutilation. During that time we discovered our Cutter to be a compassionate, gentle nine year old.

Listening to her help her hospital friend revealed to us her wisdom, and a soft side we had never experienced.

Her new friend recognized Cutter's wisdom, and suggested that maybe she was more than "Cutter." Her friend, Deborah, helped her think of how the name defined her, and together they ran through possible names she might use. They played with many names, from Sally to Pinocchio. Out of that experience came the name Bethanne. Our Cutter became Bethanne because she felt the name was soft, with no harsh C or K sound contained in the rest of the names on our system. To Bethanne the harsh sound was a reminder of cutting behavior. Her new name reminds her that she is more than that behavior; she is also soft, wise and has the capacity to love deeply.

None of us truly identifies with the body's given name. As a child we had two last names. We used our stepfather's last name until our birth father remarried our mother when we were eight years old. At that time we had to use our father's last name (our true birth name). However, changing to his name at that age never felt right, and since he became our perpetrator, we never felt right using that last name.

Names are important; they are all tied up with how we perceive "our selfs". Echo's spirit-search and our continued blending helps us understand that we, individually and collectively, need to honor names. The issue of names became so significant that we have decided to change the body name. For months we struggled with choosing a name right for all within the system. Like an adolescent, we spent hours writing our names in different combinations, playing with choices of last names, looking for just the right name which would reflect who we are.

On our upcoming birthday, a few days away at the time of this writing, we are having a naming ritual. We believe rituals are important in honoring each life passage. Rituals give us the opportunity to pause and reflect on the importance of moments that influence our lives. We will spend an evening with friends honoring our new name (which will become official later after the probate court finishes the documentation.) With friends and loved ones as witnesses, we will each write our name on a piece of paper and place it in a special pottery bowl containing water. Our significant other will wrap a ribbon around our limbs and head, symbolically honoring each of us, our roles, functions and connection to survival, the healing process and each other. Together the system will

write our new body name on a new strip of paper and leave it for all to see.

This is only a ritual; it is not integration by any means. It is, however, a step toward becoming who we want to be. It is public recognition of our becoming, growing and of our commitment to honor and respect each other as we work together for healing.

We encourage other multiples to make an effort to understand who they are. No alter should be nameless or confined by a name that identifies only a role. Names like "Protector," "Cutter" or the lack of any name at all limits their true value within the system. Each alter is within herself/himself a multifaceted important part of the whole. Individually and collectively you have value. How you see yourself is reflected by your name, and you have the right to become who you want.

A name carries with it the power to limit you or to expand your power for healing. Whatever your system does with each name will define who you become. Together you can decide to be more than how you were defined by your birth family, your perpetrators and your function in the system. For us, choosing our true name is a step toward a new way of loving and honoring all of us. Names are empowering; celebrate them.

<u>MV</u>

## The Next Step

We came out of the place of lies and confusion
We survived.

Time to live.

Traveled a road that was twisted and steep.

Road made of light out of tortuous night.

Tore down the walls that kept holding us separate.

Made us a home.

No need to roam.

Now we need to decide what we want to do with our life. Working together. Working together.

By Julie et al

# Living Well

#### By Cheryl

(This article is an excerpted version of a letter to Ellen awhile back. Ellen was concerned that she was not doing therapy the "right way"—LynnW., Ed.)

t's nice to know when I can't seem to do something the "right way" that I'm not the only one.

For a very long time everything I was told and read said I had to remember a memory/flashback/ abreaction to its full extent. I had to have the pictures of what happened, the people who were present (inside and outside), what was said, my feelings, etc. If I didn't remember everything, I was doomed to continue reliving that particular memory until all the pieces came and it could be dealt with and put to rest. But a lot of times I never get all of the pieces, or didn't know if I had retrieved all of them. I eventually hit a point in therapy of knowing that I had to listen to my heart and soul (or gut, if you prefer) in addition to therapists, experts, etc. The "right way" was not necessarily the only way or the right way for me. My heart and soul said that remembering everything was not that important or necessary. What became important was learning how to live with what had happened, learning what kind of reactions/problems it was causing in my life today, and learning to live life today while learning all the skills I need.

I have remembered hundreds of horrific events. Enough to last hundreds of people for their lifetimes. I no longer have a need to torture myself to try to remember every single detail of every single event, especially to satisfy what another person has decided is the "right way" to do something. A lot of times I just know a memory is coming (after awhile you can figure out the pattern) and all I get are the feelings—a massive flood of feelings that aren't able to be attached to anything in the present day. Now, I just make the assumption they are from the past and deal with them as such—even without all the details. I see if I can find what triggered them so I can work out a plan to deal with that trigger and not let it keep having a devastating effect on my life. But if I

don't figure out the trigger, I accept that and move on. Sometimes I will get bits and pieces of pictures of events. Other times I hear a conversation when nobody externally is present and it is not coming from any inside the body. It just happens. It's part of the joys of living with flashbacks and DID.

I would like to believe some day all the flashbacks, reactions, etc. will disappear. They will run their course and be gone. But until that happens, my job is to find a way to live with them in a manner that is the least distracting, that will still allow me to have a life.

I no longer think it is my job to reclaim every grisly detail. Whether I have the full memory back or a piece of it, today I need to deal with what interference it is causing in my life today, and how I am going to minimize or eliminate the past's effect on life in the present.

As a person with DID there is enough to worry about and learn without having to overwhelm ourselves. If we have to have details, I think most of us can take a partial memory and apply either the worst scenario or the least painful scenario. I don't need to make things tougher on myself when they are already pretty tough.

My father was dead before I ever entered therapy. My mother died six years after I started therapy. She never accepted any responsibility for anything that happened to me, or anything that she did. There was no reconciliation before her death, and she made sure none of my sisters, uncles, aunts, cousins etc. would have anything to do with me.

However, that did not prevent my forgiving them or myself. I needed to learn I had to forgive myself as well as external people. it took a long time to come to terms about forgiveness in a way I could handle it. It didn't open up my family to me, and I doubt it ever

will. But it brought me peace—a kind of peace I had never felt—the kind that reaches down to every part of me and who I am.

When my therapist first told me that part of the long-range goal was to forgive, I told him that was impossible. I was angry and demanded to know why I had to forgive them for what they did to me. As I saw it, this philosophy fed into the idea that I was the one who had done the wrongs, and it really was my fault. That is not what I think today. Now I see refusing to forgive in a number of ways: 1) it is a childish way of saying you hurt me, and I am going to make you continue to remember and pay for it by refusing to forgive you; 2) you never asked me to forgive you, so why should I? 3) what you did to me is beyond the realm of forgiveness; 4) I didn't do anything wrong so I have nothing to forgive; 5) it isn't up to me to forgive, but up to God.

I am sure if I sit thinking about it long enough, I could come up with a lot more reasons and excuses. But ultimately, I would never reach a level of forgiveness using any reason or excuse, and I would deny myself the peace I was seeking, so I could have revenge against my perpetrators.

At first I decided I didn't need to forgive anyone for anything. But I needed to come to some sort of acceptance about what happened to me, who the perpetrators were, and what I was forced to do.

I don't believe in revenge. I believe that you reap what you sow. Being revengeful makes me become like my perpetrators. That means I also give them a victory, because they tried very hard to make me be like them. My best revenge is to find a good life for myself and to live it well. That will ultimately give me peace and a feeling of accomplishment that they will never have.

Part of the strength I found in me was in forgiveness—to forgive whether or not someone asked me to forgive, whether or not I felt it was justified, to forgive when I felt I had nothing to forgive. If I was angry enough to remember a wrong, justified or not. against me—then apparently something needed to be done by me. I needed to resolve my anger or live with it and let it slowly eat my soul and happiness. I don't want to live with negative feelings anymore. What was left for me to do was to forgive the other person and move on with my recovery and life.

The second-best revenge is to wish your perpetrator a good life. Chances are they don't know how to have one.

The majority of people I have forgiven do not even know that I have forgiven them, or why I forgave them. But I know. And it was my peace I was searching for, not theirs. My giving them forgiveness doesn't necessarily give them peace. They still have to live with what they did or are still doing. Forgiveness also is not exoneration. Exoneration is to free from blame or responsibility. Whatever that person did is still their problem.

I am far from a saint. Like most things learned in therapy, forgiveness is an ongoing process. I am still learning, still trying, and at times, still failing.

Life is not always fair. But that does not mean we should not be able to have a decent life. I hope by learning to live better, I can minimize the number of unfair things that will happen to me from this point on. And if I can't stop all the unfairness towards others or me, I hope I can always remember how to forgive and move on with my life.

Live your life well. Forgive yourself and your perpetrators. Have the kind of life they never intended for you to have. And pass on a kindness each day to someone else, even if that kindness is only a smile. It not only does each of us good, it is good for someone else too.

### Coming Together

I want to fly with the hawk sitting on the passing fence post yet settle in quietly with a cup of lemon tea and watch the sunrise alone I feel confused and suspect I confuse a lot of people treasuring most those few secure enough to support me in whatever path I choose to explore next walking with me as I continue this journey

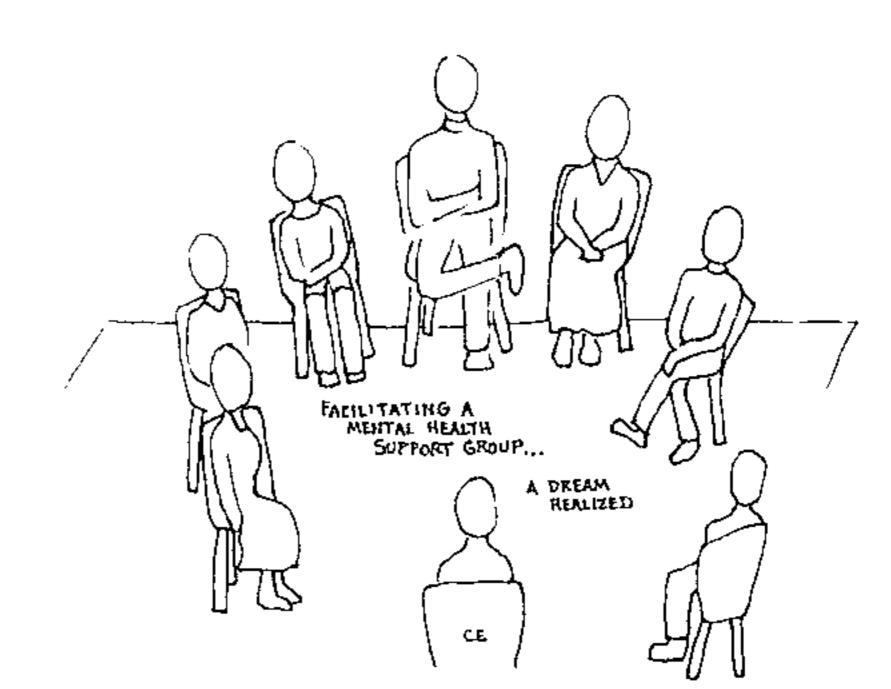
towards me

We are coming together
one or two colors at a time
blending
into a patchwork rainbow
of colors
Some remain distinct
separate
vibrant
soft
independent
contemplative
Others
are traveling towards one another

wings extended hands reaching out joining on occasion then slipping away to finish some uncompleted work not yet ready to give up their separate voices It is a time of increasing restlessness peace joy sorrow coming together pulling back being introduced to colors we are most unfamiliar with accepting older ones gently removing them from tapestries of shame placing them on quilts as yet unfinished

We are coming together one butterfly at a time Saying goodbye and hello all in the same day celebrating with hugs smiles different flavors of ice cream and hope.

By Hannah D.



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## MPD=Gift or Curse - Another View

#### By The Sunflower House

have been on disability for six years. It's been hell. I've worked since I was 17, and I went to college in my mid-30's, graduated and had begun a new higher paying career. It didn't last long. After bouncing from job to job—once again in my life—I decided to get a little job with great insurance and spend a year or two in therapy trying to find out where I was going wrong.

I've been married 25 years, but my husband and I live like roommates who have signed a contract to share expenses, which is what a marriage actually is legally. Neither of us is unhappy with the arrangement, but to get here was a lot of pain, years of self-destructive mutual hate and loathing initially, after dreams of love and a supportive life together. We ended up with a supportive life, but no one would call this what people normally mean by marriage. We call it "it works". We have money, insurance, a house, cars and a cat. Fortunately, we never had kids. We seem to boomerang on working. I couldn't work for a few years, then he couldn't, then I couldn't, then he couldn't. But we were always able to have respectable holes in our resume. So, life-wise, we have been lucky, but at the time it never felt like it. We (in the marriage) are at peace today, knowing we have all we can truly handle. Both of us are survivors. I am in therapy, he never is, except for occasional times when he was forced to go.

I have MPD, which I did not know until seven years ago. I discovered it by my paying attention for the first time to the voices I had always heard. I suddenly realized these voices were different people, and the visions I had were things they had lived through, but "I" hadn't. (In this paragraph, I relate my host's experience. I am not actually the one who was born, but I have her memories. I did not experience this discovery like she. Sorry for the confusion, but I suppose it's why I can think about it. She never could. She fell apart in suicidal behaviors, emotional

breakdowns, and severe depression and hatred of God, because she was religious but lost her faith. I will write this as a composite person, which apparently I can do, my "gift" to the system.)

I cannot work now. I do not have a respectable hole in my resume now; I have a Grand Canyon. I cannot see how to get back my old life whatsoever. She who lived our adult life is gone, and with her our emotional work abilities. We do not have time anymore. We do not have her abilities to stick to one thing, even for an hour, anymore. She could "forget" her feelings, but we can't. She had faith; we do not. And so on and so on.

She often wondered about this MPD "gift" as well. She did not see it as a gift, but as a curse, and wanted to die. Because of the threat to our life, we have had to go back and try to find our way out of this serious depression and suicidal feelings, of feeling tricked by fate, of feeling let down by all of the truisms like "If you are a good person, mostly good things happen to you" "If you work hard you will succeed at whatever you want to do" "God will never let you down, but always do what's good for you""If you really try you will get what you want," etc. etc. We have tried EMDR, but it doesn't work for us. Some of the drugs they put me on have caused gum damage from dry mouth. Even though I found drugs to work for a year or two, that all changed in time and I have had to try another round of drugs. It's very distressing and physically demanding. For two years I had more bad days than good.

Now I seem to be in a period of equally good and bad, and the bad isn't so bad anymore. When memories come up to slap me upside the head, it feels more like, "Not this again!" instead of horror...but the gulf between my old life and my new one just seems to grow and grow. I have broken off all of my old relationships, every one. After three years of silence between my

only sibling and me, we have cautiously made up and at are at least talking again. It all was so painful and lonely, I spent many nights crying and crying. I regret the loss of my old life, my old friends and family, my working life. I was connected in many ways to being a normal person, and now I have almost no connections. I pissed off my friends. I shocked my church friends, and I purposely, meanly, dropped everyone else. I have been in weekly therapy ever since, and while there has been tons of movement and change, there has been no cure, no getting better, no fixes that work except temporarily until the next crisis. I've lost functionality and I've gained many ignorant, young, stopped-in-time innerchildren. It's like going from childless to suddenly being the proud stepmother of twelve children.

We grew up in the 60's in a city and graduated from high school in 1971. That means we have gone through a million fads, a million women's magazines, and churches, and volunteer work, and books through every stage of age in life (yes, how old you are makes a difference. In your 20's, you want to be gorgeous, popular and admired, and everything is with friends, and everything is about having fun. In your 30's, you want to be rich and famous even if it's only at your job, and you make decisions that enhance your career, not your life—maybe go back to school for a money-making degree, and everything is very, very serious—politics, being a good or bad person, having the right cars in the right neighborhood, wearing the right clothes. In your 40's you go over all of your mistakes, read more books, make older friends where you try to fix and discover where you went wrong in life, maybe start going to church, volunteering, maybe go back to hobbies, maybe try a new girl or boy friend, restart exercise.) Every possible kind of therapy we have read about it, attended a few workshops, spent a hell

of a lot of time in bars with friends discussing life, God, work, friends, marriages, boyfriends. We joined groups for help in being adult children of alcoholics, meditation, exercise fads.

I have no friends now. I cannot maintain a friendship. The two who could include the one who fell apart, and a young pre-teen. The pre-teen is not able to function well enough in an adult world to "fool" people like we could with the one who fell apart.

I have never, never found a reason for anybody's bad times or good times over the years. I have been around and been religious most of my life. I've gone witnessing, I've been a member of two churches, I've believed in faith-based support and cures. I have been robbed and screwed over by "religious" friends, and they didn't have bad lives or suffer much. I've seen saintly people recover and recover and recover from awful things they didn't deserve, and I've seen saintly people unjustly sicken and die, get killed, lose everything they had. My husband and I owned homes, changed cities, made new friends, lost or kept old ones. We've owned big boats and joined clubs, we've owned airplanes and joined clubs. There are no curses and no gifts. There is luck. Most of what I have seen, heard, read or lived and thought about years later, I saw was simply luck.

I found my answer. I like to read, so I still subscribe to magazines and go to the library. Since college, my reading choices are what they call literate or literary, and I enjoy science. I was electrified by a few articles, finally that explained new areas of research into evolutionary "blank" (fill in the blank, this is a new fad), but one made sense to me.

We are not just people living our lives in our circle of neighborhood, country and church and TV. We are evolutionary beings, consisting of evolutionary changes to our bodies, our minds, whatever it took to continue our species. MPD is not a gift from someone like a God or health or something. It's not a curse either, because your father was a bad person or you killed someone in a car accident. MPD is an evolutionary tactic to survive bad times. Many many brains get shocked by the scary things

that happen to it. Many brains don't survive from mental shocks.

Do you know that more than half of humanity lives on less than \$5 a day? I'm lucky to be in America. I have electricity, running hot water, great medical help, some spending money after my bills. I have been a jerk. I have made serious mistakes it took years to correct. Would any of that have been different for a more-singleton brain? I have years of money and privilege. I have years of poverty and mean-spirited society. I enjoy good food, so I get it sometimes. I like to exercise, so I do when I can. I have learned hobbies, which has led to friends and conversations. I decided to get a cat, and he makes me laugh as much as cry. On sunny days, sometimes the day is so glorious I have to take a walk. I find the next new book in my library and I feel lucky to have got it before anyone else. The radio will be on and suddenly a song comes on that is pure bliss. My neighbor leaves me flowers from her garden and they are so beautiful; how nice she thought of me. I think what I could do for her. I see a TV ad for a new movie and I wonder if there is a theatre near me with a cheap matinee time? I see in the newspaper the latest political scam, and I turn to that page and eagerly become outraged. I read William James after hearing about his classic book about religious feelings, and I get amazed.

Has my life been ruined? Yes. Has my life ended? Who knows. If I wasn't MPD would I be thinking like this? Damn right I would. It happens to everybody.

Life is serious, and it isn't. It doesn't matter what I feel or think, life is going to happen anyway. I have days when I think I'm not going to make it, that I'll be eating dog food for dinner in a few years, and maybe I will be, too. But I think already about the stories I've read about free food from grocery store garbage, and food banks, and such, and I know I'll figure it out.

Letters

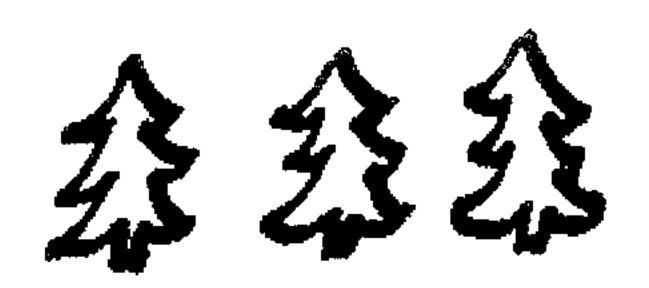
After 3-1/2 years of no hospitalization, almost finishing my degree, and 2 years under my belt of successful employment, I am experiencing flashbacks, more dissociation, and suicidal ideation, as well as periods of self-abuse.

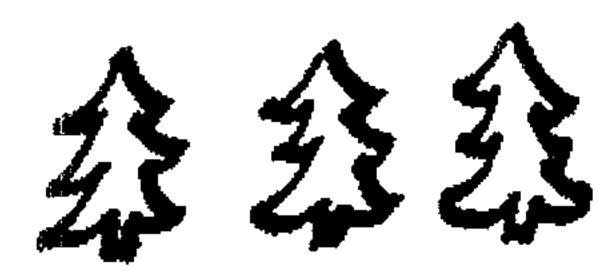
My current therapist and myself thought we had integrated down to three alters. But recently in my line of work I have encountered a man who is triggering more lost memories, after 13+ years of uncovering what I thought was "everything." It has become almost unbearable again. (Me with my "should haves"...should be recovered, should be integrated, should be employed at a really high-functioning job, and should be in a sexual relationship...yet I find myself here!)

I worked with my former therapist for ten years. He was invaluable. He worked long and hard with us uncovering and integrating. The last year with him he started wrapping up our therapy because he planned on retiring. Unfortunately things were put into fast forward, and when we thought we were integrating most of the alters, many were actually going down and hiding. We created not an "integrated one" but began another personto handle the confusion of what was going on. This went on for a long time. I think, looking back, that I should have realized something was wrong when none of our previous talents survived the process of integration. There was no more drawing, or public speaking, or poetry, just confusion and lots of dissociation.

Now when this man entered our employment, he began to trigger memories we had not been aware of. The alters who had gone into hiding surfaced to protect us. The memories are coming back slowly, and I know that after a time in the hospital we will be ready to begin again. We are wondering now if we really want to integrate to one or just integrate to a few strong alters and learn to work together. Has anyone done this—worked together instead of integrating to one? Also, has anyone experienced new memories after a long time of nothing? Please let us know. Thank you. —Kathy A.

(You may reply to Kathy via MV. I will forward your letters. If we may also use your replies on the website, please give permission.)





#### Black Like Me

For Brenda Sue Anderson

Black like me Comes in spots, Hidden memories of shame and fear.

Black like me is an inside job Feeling not part of, not equal to. Disenfranchised.

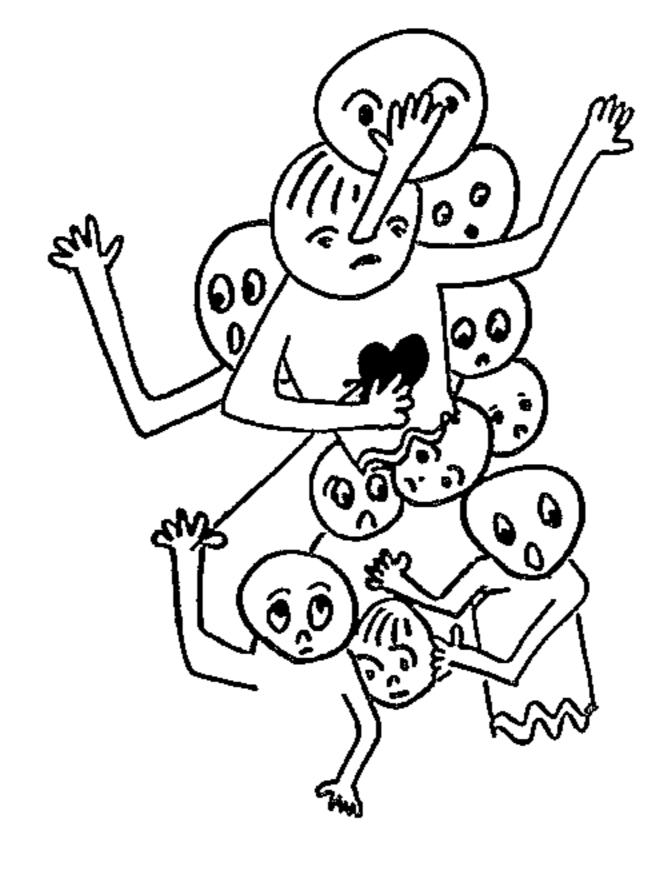
Black like me
Has to do with stigma
by me to me
by others onto me
It is a dark load
of shit.

Black like me is believing in myself, knowing that black is good, and so am I. And so I am. Growing, learning, Stretching myself. Loving Myself and others.

By Irene F.

MV

WHO ... ME?



By Paula

#### Stone Words

Today I write a poem. Today I will have a voice. I will give wings to my pain, my anger, my betrayal. I am writing it down in permanent ink for all to see that I AM A SURVIVOR. In big letters I write those words. No more secrets and denial. No more masks of pretending. No more walls to block its reality, but MY VOICE. My braving, tentative voice I want others to hear. This is my poem. My simple, courageous poem. A poem of truth. The truth can set me free. By Diana S.

<u>MV</u>

## Books

# Treating Psychological Trauma and PTSD

Edited by John P. Wilson, Matthew J. Friedman, and Jacob D. Lindy © 2001. Published by The Guilford Press, New York. \$45 467 pages. Hardcover.

The timing of this new book for professionals is highly appropriate, in the wake of terrorist attacks which highlight the crucial need for Posttraumatic Stress Disorder (PTSD) treatment. The editors (who co-wrote many of the chapters) have top-level qualifications in the study of PTSD. John P. Wilson, PhD is a professor of psychology at Cleveland State University, and past president of the International Society for Traumatic Stress Studies (ISTSS). Matthew J. Friedman, MD PhD is Executive Director of the National Center for PTSD, and professor of psychiatry and pharmacology at Dartmouth. Jacob D. Lindy, M.D. is a training and supervising analyst at the Cincinnati Psychoanalytic Institute, and is also a past president of ISTSS. Each of these authors has published widely in the field.

This comprehensive book summarizes much of the current theory and treatment for PTSD. It is written for professionals, and is organized in sections that cover theory,

clinical treatment in general, clinical treatment for special populations, and case history analysis. Of particular interest to those working in crisis situations will be the chapter on Acute Posttraumatic Interventions by Beverley Raphael and Matthew Dobson. The authors point out that most of the models suggested for use after disasters have not been scientifically studied. Certainly clinicians may want to keep careful records of their methods and results with the growing population of newly-traumatized clients, for possible assistance in such research. Other chapters cover treatment methods for childhood trauma, PTSD and comorbidity, and treatment for families and couples. It is impossible for me to condense the value of this rich, solidly researched book in a few sentences. But any therapist who is not up to date on PTSD should buy it...and most of those who are up to date will surely want to compare their insights with these sensitive, knowledgeable, trauma experts.

# Trauma and Cognitive Science A Meeting of Minds, Science and Human Experience

Edited by Jennifer J Freyd PhD and Anne P.DePrince, PhD. © 2001 by The Haworth

Press, NY. 335 pages. \$89.95 hardcover, \$49.95 softcover. Discounts possible. Call 1-800-HAWORTH.

This is a very interesting book on memory research, emphasizing traumatic memories. It is written for a professional audience, but may be of interest to non-professionals as well. Numerous contributors approach the topic of memory formation from different perspectives, operating under the assumption that it is possible for both recovered (or 'discovered') memories and false memories to occur. Virtually all chapters may have relevance for MV readers who want to better understand the mechanisms of memory as viewed by scientists today. Among examples, Kathy Pezdek discusses what role suggestibility may play; Michael Anderson discusses Active Forgetting; while the chapter on memory disturbances in childhood abuse survivors (several authors) explores the quandary of childhood memory gaps. While this book answers many questions about traumatic memory, it raises far more questions. It is an excellent starting place for much more research. Well worth reading. —Lynn W.

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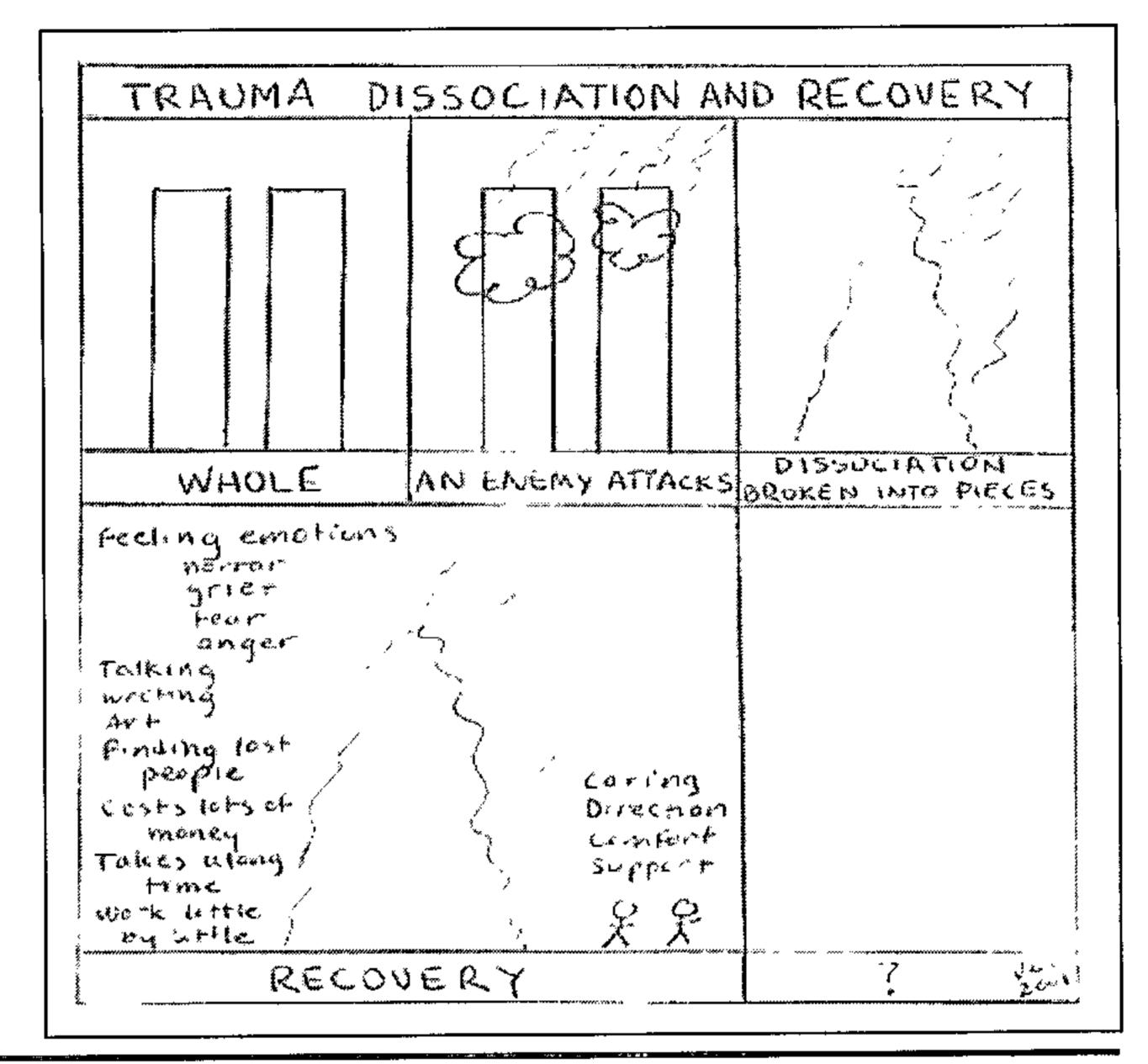
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