

MANY VOICES

WORDS OF HOPE FOR PEOPLE RECOVERING FROM TRAUMA & DISSOCIATION

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In This Issue:

Finding Support Healing from PTSD & More...



For Anthony

You were
An open hand when we needed
help
The angel we could call that
was always there
We reached new levels of trust
with you
None of us had experienced
our entire lives
You always went the extra mile
And didn't laugh or make fun of
us
When we cried
But held our hand
Showered such tenderness
And gave us safe hugs
you had hope for our healing
When we had no hope at all
You shared your gentle strength
with us
When we were overwhelmed
with fear
You gave us a safe place
to be real
Where everyone inside felt
valued
You listened and didn't abandon
us
When we misbehaved or
acted out
You were truly a gift,
A treasure
A FRIEND.

By Diana and Co.

MV

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What I Wish You Knew About Me

By Josephine Dawn

I am a multiple, living in a world where most people are "singles," and I am trying to navigate my way through minefields of trauma memories and intense feelings, while fighting my own internal civil war of denial. I would not have come this far on my journey had it not been for the encouragement, love and support of others. I have a few close friends and a very supportive husband. These are the things I want these people to know about me.

1. Together, my parts make up a complete person.

No part is any less "me" than any other part. I have watched some of my friends struggle with this concept as they have sought to identify the "real person". This has been painful as some parts have been ignored, disbelieved and discounted. I would like for you to respect each of my parts, and at the same time I would like for you to recognize all of me as a whole person.

2. I am a trauma survivor.

My personalities are not "craziness" - rather, they represent a sophisticated coping skill. I am very intelligent. I am able, with help, to undo what I have done with my brain. To the extent that you can affirm my intelligence you are helping my recovery. To the extent that you affirm me as "crazy" or "mentally ill," you are hurting my recovery.

3. Sometimes my biggest challenge is to get through the day.

Most likely, you will never see the parts that hurt the most. Some pain is beyond verbal expression. Please realize that "Fine" as an answer to the question "How are you?" may be hiding a tremendous amount of pain. Just because you do not see my hurting parts, this does not mean their pain is not real.

4. I want to stand on my own feet, but I hope you'll let me lean on you at times.

My own system is composed of a mixture of independent and dependent parts. Sometimes the thrill of completing a task on my own feels like a breath of fresh air. At other times, I may ask for your help. If you are able to give help, please do so. If you are not able to, then please let me know that too.

5. Let me know when you are weary.

Life's problems can be very heavy. Let me know when you are in need of encouragement yourself. Tell me when you are too tired and hurt to listen to my pain. I know life is a picnic for no one. By sharing with me your own limitations and heartache, our relationship will be able to grow from a one-dimensional dependency to a multi-dimensional interdependency.

6. I am very sensitive to rejection.

The worst thing you can do is to "leave me alone" because you do not want to upset me. This disorder is a very lonely disorder. The pain of the internal world can be very intense at times. What I want most from you is to know that you care. The rest is gravy.

MV

What We Say

Okay, it is about our mothers. What we say are all the true things saved up in the box of our bodies.

One of us has cancer, in her breast over her broken heart. The other is an alcoholic, who drowns the sound of remembered cruel words.

We all have covered ourselves at one time with our sick shields.

Later, they have to be replaced with the bright examples of who we can become:

Women who grow despite our mothers' inabilities.

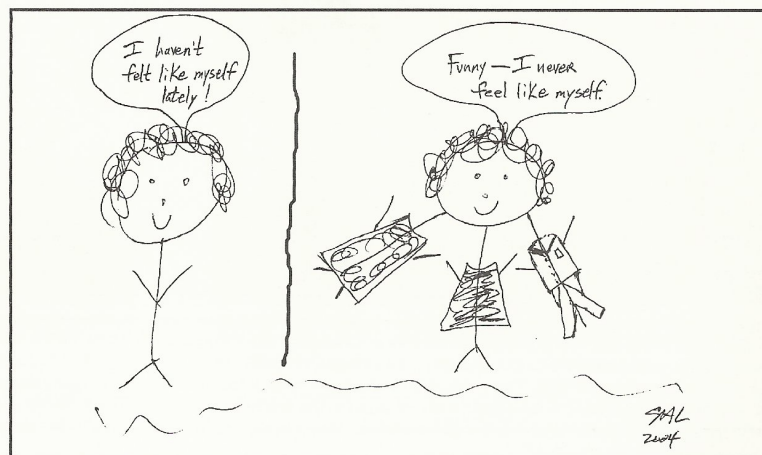
We can speak now between the shadows, nod in agreement, though our pages of memory are different.

We find that we can smile in these moments of sharing what has been our past, and never will be our future.

We will be women who love and let go of women who cannot.

By Elizabeth F.

MV



Here I Stand

Here I stand
Waiting
Waiting for the world to happen.
Waiting—yet nobody comes.

Here I stand
Fighting the things that will make me
human
Fighting, fighting
Resisting the only answer.

Here I stand
Examining the life I haven't led
Looking at all the joys I haven't
known;
Seeing all the people I haven't met;
Wondering about feelings I haven't
had.
Is it really worth it?

A million truths
From a million mouths
And
They're all wrong.

Here I stand
cursed by my past forever to live in a
shell
Away from all I want.

Here I stand
Listening to the fools in the streets
In the places fools congregate
And I know they, not I, will rule the
world
And I wish I could go away and cry
But I know that
They'll be here when I get back.

Here I stand
Living in a harsh world
Surviving from day to day—
But just barely—

And I think:
Why can't I reach out to the people
that surround me and tell them
I want to be with them,
of them...

Be them?

By Carol L.

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MANY THANKS TO OUR FRIENDS!

River Oaks Hospital - New Orleans, LA

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

Sheppard Pratt Health System - Baltimore, MD

Call Kimberly Colbert: (410) 938-5078 or (800) 627-0330 x5078

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

Women's Institute for Incorporation Therapy - Hollywood, FL

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We appreciate your support! —Lynn W., Editor



Lessons Learned in Building a Support Network

By Josephine Dawn

I've learned a great deal as I have sought to surround myself with supportive people who will walk with me through this journey of recovery from trauma and DID. We are all unique individuals, with different needs, strengths and weaknesses. However, I hope that some of what I have learned may be helpful to others.

I am not writing as an expert, but rather I write from my own experience. Several years ago, I began a very difficult season in my recovery from trauma. I did not know how long this season would last, nor did I know if this season would be followed by even more difficult seasons. I decided I needed more than just one hand to hold on to. I unofficially "enlisted" seven people and in the course of the next few years, I have learned from them and leaned on them. Here are a few things I have learned:

1. Everyone has his/her own troubles. I have learned that I need to remember that "it's not all about me" as the saying goes. Each person has struggles, hurts and shattered dreams. I am learning that I need to be more sensitive to the burdens my friends carry so that I may walk alongside them in their journeys as well as enjoying their companionship on my own journey.

2. People have limitations. Every human has a finite capacity to love, to listen, to forgive and to understand. I have learned that if I am not careful, I may trample on these boundaries by demanding to be loved, listened to, forgiven and understood. Also, some people may not even be aware of their limitations and they may overextend themselves and then burn out emotionally. At other times, I have insisted on voicing my anger in full force and it has destroyed the friendship.

3. Communication is a challenge. A lot of my parts love to communicate

with others. The more that trust is present in a relationship, the more my parts want to participate in conversations. For example, my husband is the person I trust the most and sometimes it's a revolving door as each part wants to clarify and enlarge upon a previous part's statement. My husband takes this in stride, but some of my friends become absolutely exhausted. Communication is a two-way street and generally with words, less is more. My friends' limitations have actually helped me because as I work to choose my words carefully, I have increased internal communication as "we" compromise on what "we" want to say.

4. People are only able to share truth which they have integrated into their own experience. In the course of some of my friendships, I have discovered that some of my friends suffer from dysfunction, as do I. For example, if my friend believes she is not a worthwhile person, I can not expect to learn how to truly accept myself by watching her and I need to remember she has this weakness before I take her statements to heart. We are all on journeys and occasionally I have been able to help my friend on her journey.

5. I need to be continually watching to make sure I am not confusing my friend with a person from my past. I have found that I have a tendency to replay past relationships in the present with the hope of achieving a more favorable outcome. For example, I may want my boss to accept me and approve of my work in order to fill the void left by a father who called his daughter a "dumb bunny." I bring issues like this to my therapist as often they are complicated to untangle by myself.

6. I have learned that as a multiple, my hopes and expectations of

acceptance are skewed because of my disorder. I am a multiple who deeply desires for all my parts to be accepted and loved by people. Thus, my hurting parts tend to only feel accepted if they have shared painful emotions and the person still remains a friend. In "single" language, I tend to share the deepest recesses of my heart with my closest friends. I have had the experience of overwhelming a friend with my most painful emotions. This has been painful for me and my friend. I am learning that a friend can accept me without knowing all of my parts. Just as I can accept my friend without knowing all of his/her painful emotions. It's a fine line between authenticity and over-exposure - a line I am still navigating.

7. I have a lot to offer in a friendship. Recently I have moved from viewing myself as a burden to viewing myself as carrying a burden. My experience with multiplicity gives me a broad view on life. For example, I was recently talking with a close friend who is going through a time of feeling distant from God. I can relate because I have parts who feel they do not know God at all and I have parts who feel close to God. I believe that multiplicity often brings with it tremendous insight.

8. My closest connection needs to be with someone who is not overburdened by the severity of my pain, nor exhausted by the longevity of my need, nor overwhelmed by the broad extent of my problem. I have tried to force my friends and my husband to fit in this mold. For me, the only person who fits this mold all the time is Jesus Christ. When I try to force others into this role, I am left disappointed. As I bring myself to Jesus and let Him nurture me as only He can do, I allow my friends and my husband to be human.

Way Down

What's fearful?
 Overwhelming?
 Down there
 Over the cliff
 Why do
 I fear
 Falling
 Down
 Way down
 Into
 The unknown?
 It's Terrible
 Terror full?
 To be let go
 Alone
 Falling
 Helpless
 Hopeless
 Vulnerable
 No protection
 No escape possible
 No power
 To save
 Myself.

I think
 I need
 To not
 Fall
 I think
 I need
 To climb down
 Slowly
 And not
 Alone
 I think
 I need
 A rope
 Someone holding me
 Securely
 As I climb
 Down
 To face
 My fear...

By "My Heart"

MV

Eternal Gratitude Can Turn You Sour

By Carol L

I am one of the very lucky ones...I am married to a man who has stuck with me through the hospitalizations, medication changes, alternating personalities, weekly therapy, many tears and just plain strange stuff. Most of the alters love and appreciate him although some, of course, refuse to acknowledge the marriage at all. When I married him, I had had only one hospitalization and at that time it was believed to be for simple depression that would not recur. I was six years younger, bright and pretty. We were both considered lucky to have decided to marry.

But as hospitalization followed hospitalization and medications had bad side effects and just didn't work, people's pity for my husband became evident. I gained quite a lot of weight, didn't look after myself or the house and had problems with suicidal ideation. He took me to therapists, visited me in the hospital and at times, had to hand out my medicine to me. My diagnoses were all over the place and nothing ever seemed to help for long.

But after five years or so, what set my teeth on edge was how often family and friends would gush over just how lucky I was to have such a great husband. I was grateful, very grateful, but to have it pushed in my face all the time was a bitter pill to swallow. This may seem petty considering all that was going on but it caused me to act poorly and not show any gratitude at all. This just increased other people's pity for my husband and he began to be filled with self-pity.

We then separated for almost a year at his instigation. During that time, we both came to realize our life together was far better than our life apart, but some changes had to be made. My husband had some real issues with my psychiatrist who had continually changed my medications in an effort to find "the" drug for me. This led to frequent hospitalizations. I also agreed to go into weekly talk therapy because I had been relying on

my husband for too much. My new psychiatrist was a resounding success, as he was the first to identify the dissociative disorder, get me stable on medications and through talk therapy, identify the alters and get them to work together. I had 18 hospitalizations before being seen by this psychiatrist. During the past 7 years dealing with him, I have only had one hospitalization (due to emergency hernia surgery that messed up my medications).

In an ironic twist of fate, my husband has had serious health problems in the past couple of years, gone on complete disability, and I am *his* primary caregiver. I still take my medications and go to therapy weekly. My dissociative disorder still needs lots of work. However, now people say how lucky *he* is to have *me*. I have to remind myself not to expect constant gratitude from him as I remember well how expected, forced gratitude in the other direction was very difficult to express.

We love each other and take care of each other...but always with safety valves and the help and input of others. The myth that a husband and wife can live in each other's pockets and be everything to each other is both false and harmful. There needs to be a support system for both partners that spreads the burden when one has serious problems. Each partner needs to explore their own interests and have their own friends.

We also share a great deal, but have long ago dropped the idea that if we didn't share an interest, it wasn't worth pursuing. We will be married 25 years next year and still have bumps and hiccups in our relationship but it has never been stronger.

MV

Healing From PTSD

By Paige Alisen, Ph.D.

Dr. Alisen is an educator, author, and activist who has conducted extensive research on PTSD and trauma-related disorders as a result of her own trauma experiences. She is the author of the book "Finding Courage to Speak: Women's Survival of Child Abuse."

Posttraumatic stress disorder (PTSD) is considered a psychiatric disorder affecting up to twelve million people at any given time in the U.S. alone. PTSD develops as a reaction to severe, often life-threatening trauma whereby a person feels absolute helplessness, terror, and violation in the face of trauma. In many cases, the trauma happens over an extended period of time.

The most common reasons for developing PTSD include severe child abuse, domestic violence, and war. People who suffer with PTSD frequently have flashbacks, or the reliving of past traumas as if they were happening in the present. Posttraumatic stress symptoms, such as flashbacks, severe anxiety, and sleep disorders, can begin right after, a few months, or even years after the trauma has ended. PTSD is a natural psychological reaction to sometimes horrifying trauma.

PTSD is also physiological. People who suffer from PTSD frequently have abnormal hormonal secretions in the brain and experience severe and chronic hyperarousal, the phenomenon of being hypersensitive to sounds, movements, and other environmental stimuli. There were times in my own healing when just hearing a car door slam sent shock waves through my system and it felt like my fingers were jammed in a light socket. PTSD can leave one feeling extremely confused, exhausted, fatigued, depressed, and overwhelmed.

Fortunately, PTSD for most people is treatable, meaning that once symptoms start, there is a high probability it can be "cured." There are a myriad of ways to treat PTSD, including psychotherapy, medication, biofeedback, more holistic approaches, or a combination of

these. What I have found is that therapy and medications alone will not adequately address severe symptoms. What is needed is a full commitment to healing, and this means having complete love and respect for yourself. Certain acts practiced regularly can make a tremendous difference in whether one simply lives with or suffers from PTSD. With conscious intention, over time symptoms can disappear altogether.

* Daily Meditation and Yoga Practice

When practiced regularly, meditation and yoga calm our very beings. Certain yoga postures are particularly helpful in relieving anxiety; others are great for sleeping problems. Meditation can help clear the mind of intrusive and violent thoughts. Daily mantras can help us feel better about our life.

* Eat Well and Rest

When we eat well, we feel well. Eating foods low in saturated fats and eliminating processed sugar from the diet is an immediate way to start caring for yourself. Meals should be well-balanced and regular, with particular attention given to whole grains and fresh vegetables and fruit. A good multivitamin (with plenty of B-Complex) should be taken. Give yourself down-time and the permission to rest. Our brains need rest!

* Engage in Body Therapies

Body work provides a powerful means for us to reintegrate our splintered minds, bodies, and spirits. Professional body therapies, such as massage or acupressure, provide an excellent way to release toxins in the body. Self-care practices are also important. Give yourself regular head,

foot, and hand massages, take baths, and try to reconnect with your body.

* A Calm Home Environment

Simplifying your home environment can do wonders for the person experiencing posttraumatic stress. When possible, minimize external stimuli by turning off the ringer of your phone, turning off the radio, and putting the television in the closet. Only play positive music in the household and de-clutter your house of unnecessary stuff. Lightening your external world can have a direct, immediate effect on your inner world.

* Comfort Yourself

Your recovery can progress more easily if you begin to treat yourself like a frightened child. Leaving a nightlight on at night or wrapping yourself in a soft blanket can do wonders; reading children's books or listening to a children's meditation CD can also be effective at calming and soothing the body and mind. Learning to parent yourself well will make an immeasurable difference in your healing.

* Minimize Things that Trigger Past Traumas

Part of self-love means not re-traumatizing ourselves unnecessarily. The more we can understand our triggers, the better able we are to address the underlying causes of them.

For those in the throes of posttraumatic stress, give yourself permission, at least for awhile, to avoid situations that are triggering.

* Release Your Feelings

Finding healthy outlets for your intense emotions is critical. One option is to engage in moderate to heavy exercise, such as running or

PTSD, *Cont'd.*

dancing. Get out into nature when possible. Finding healthy avenues and spaces to release anxiety, anger, rage, and grief will help your PTSD symptoms significantly.

* **Laugh and Love -**

I have a magnet on my fridge that says, "Live Well, Laugh Often, Love Always." It is a motto I take to heart now. Allowing love and friendships into your heart will help ease the PTSD experience.

Severe trauma profoundly damages the spirit; one loses a sense of self, identity, and even a place in the world. Learning to love and respect ourselves is perhaps the most empowering thing we can do to heal. Ultimately, it is what we have most control over.

I feel great compassion for anyone undertaking this journey. Peace and light to you all.

MV

Who Says

who says...

some say lost innocence...

i say gained compassion

some say abandoned...

i say freed from him

some say hurt...i say healing

some say weak...i say survival

some say abused...i say stronger

some say helpless...i say fighting

some say voices...

i say pieces to my puzzle

some say failure...i say learning

some say halfway house...

i say 100% opportunity

some say guilt and shame...

i say hope and faith

some say broken...

i say growing more complete

some say crazy...

i say it finally all makes sense

By Marie P.

MV

TFT- A Useful Technique

By Dianna

I have a wonderful, supportive doctor who I've been seeing for over two years now. He diagnosed me after all previous doctors (who weren't helping) failed to see the PTSD/MPD/DID. I feel extremely fortunate to have found him, and that I can talk to him about anything and everything, and that he won't go away. (He even put that in writing for me - that he will not go away.)

He is extremely compassionate. A number of medical and psychological professionals in the field have told me that he is both a good man and a good doctor. This feedback helped me realize even more how fortunate it is for me to be seeing him. (But he says he's not God, and that he doesn't walk on water unless it has 6" thick ice on it. He says he makes mistakes just like other normal people.)

I tell him I wanted healed faster and that he's too slow, but he tells me that if he doesn't hear that from me at least once every session he would think maybe something's wrong.

He tells me that humor is good and that humor is a stress reliever.

He keeps up with all the latest

techniques and statistics on their healing rates and potential. He was using EMDR in sessions but recently started using a new technique called Thought Field Therapy or TFT. This involves touching your own acupuncture parts of your own body, in specific sequences for panic, anxiety, depression, addictions, disorders, etc.

What I have discovered is that suddenly there are many more switches that I'm becoming co-aware of, plus more and more parts or alters (I call them 'frames of mind') that I wasn't aware of before, are surfacing.

Even though it is very hard at times to get through this, both financially and emotionally, I feel like healing is occurring, because of the fast results I'm seeing. I feel like all this time I told my doctor, "I need healed faster" he has listened to what I've been telling him, and he looked into doing something about it. I don't feel so stuck anymore and things are moving much faster towards healing.

I have a great, supportive doctor and I thank God for that.

MV

Therapist's Page

By Harold D. Siegel, Ph.D.

Harold D. Siegel is a psychologist licensed in the state of New York. He received a doctorate in psychology from Hofstra University in 1977, and has been teaching in the psychology department at Nassau Community College since 1975. Since 2002, he has been a member of the International Society for the Study of Dissociation, and completed the organization's Psychotherapy Training Program for Dissociative Disorders this past June. His email address is psyprof@nass@aol.com. Please be patient on replies to email inquiries. His office telephone is (516) 876-0755.

Dissociation and Trauma: A Professor's Perspective

First, let me thank Lynn W. for her invitation to write this Therapist's Page.

I will begin by introducing myself. At this point, I have a fledgling private practice specializing in the diagnosis and treatment of dissociative/trauma disorders. That being said, I have spent more than a generation as a tenured faculty member of the psychology department at a popular two-year school on Long Island (i.e. suburban New York City). The view that I have of most of our students is that they are potential consumers of information. Thus, I've always taught with more of an eye to what pragmatic impact the learning might have in their lives, with less of the theoretical or scientific subtleties that are quickly forgotten after an exam.

In November, I will be presenting a paper in New Orleans at the annual ISSD meeting, entitled: *"Bringing dissociation into the mainstream of undergraduate psychological education: The present state and the future"*. What I want share with you herein are some of my thoughts and experiences about dissociation from the perspective of teaching undergraduate students.

My professional interest in dissociation began, ironically, on the Friday before 9/11. At work, we are bombarded by mailed solicitation and promotions for all types of books and videos of a psychological and/or mental health nature. On that day I was given an offer that I would not refuse: a free book for the price of shipping. The book was Marlene

Steinberg's *"Stranger in the Mirror"*. What grabbed my attention was the subtitle, *"Dissociation-the Hidden Epidemic"*. Having known people with undiagnosed dissociative disorders, naturally, I was curious. The rest, as they say is history. Within months thereafter, I became a member of ISSD.

For most of the last ten years, I have primarily been involved with teaching developmental psychology. I have taught some adolescent psychology, but mostly child development. This was due in part I believe to my status as a single father. Teaching abnormal psychology seemed to be part of my past. However, as my knowledge and interest in dissociation grew, I began lobbying to get abnormal psychology back in my schedule. A little more than a year ago, I got my wish and started teaching it again. A good part of my paper presentation at ISSD deals with the problems that all abnormal psychology textbooks seem to have with respect to the presentation of dissociation and particularly DID. While I will refrain from boring you with the details here, I indicate in my paper that the textbook that I selected is "the least of nine evils".

What I will focus on here are two issues: 1.) the preconceptions that undergraduate students seem to have regarding DID and 2.) issues of prevention.

It has been my perception that with respect to dissociation and particularly DID, undergraduates tend to have a sensationalized view. Their sources of information about these disorders seem to be talk shows and movies. The film *"Identity"* has recently been one such source of information for many of them. They

treat this preposterous story as if it were a documentary. Students who are interested in an accurate portrayal of dissociation are encouraged to read Dr. Steinberg's *"Stranger in the Mirror"*, and visit her excellent website (strangerinthemirror.com). For those who are into fictional presentations, I recommend the novel by Wanda Karriker, *"Morning, Come Quickly"*. In a review on her website (www.morningcomequickly.com), I wrote, "It was really a treat reading a fictional story about dissociation that was so scientifically accurate."

This notwithstanding, the media has helped to paint a picture of dissociation that is quite unrealistic. The fact is that some of these same students who are swayed by this sensationalism would be shocked to learn that they are dissociative themselves. Thus, it is no surprise that dissociative patients frequently feel stigmatized about their diagnosis. I had a patient who was a very recent college graduate. She vowed to remain forever in denial of having DID, because that's "really crazy!"

It is amazing to what extent dissociative patients resist their diagnosis as compared with other disorders. As a therapist, I have a magical wish for all dissociative patients: BE ACCEPTING OF WHO YOU ARE! I realize that this might be easier said than done, but you are not crazy. You adapted to your life circumstances using very creative coping mechanisms.

It must be stated over and over again that traumatized populations are not responsible for what has befallen them.

When I teach, I try to portray dissociation as a struggle in emotional adjustment. Many people

Therapist's Page, Cont'd.

forget that in the days of the DSM-II (1968-1980), when the world of mental health was essentially divided into the psychotic and neurotic, multiple personality was classified neurotic. Believe or not, I still think of it this way.

Would a patient fight with their therapist if the therapist suggested that the patient was depressed? Would a patient fight with their therapist if that therapist suggested that the patient was anxious? Thus, why do dissociative symptoms have such a negative connotation?

We desperately need a lot of public education about the real symptoms of dissociative disorders, so that patients might present to their therapist reporting these symptoms in a manner analogous to the way one might disclose depression or phobia.

Frankly, the foregoing should be unnecessary to address in the first place, in that dissociative disorders are largely preventable. As I indicated previously, I have spent years teaching sections of a child development course. Even before my specific interest in dissociation, in lectures, I took the opportunity to link DID to abuse of children. While I recognize the limitation of one's semester's worth of teaching, I do spend a lot of time dealing with parenting issues and skills. While some depraved tendencies of would-be parents are beyond the reach of an admittedly somewhat idealistic psychology professor, there is room to illuminate the evils of abuse and neglect.

Parenting is a job that requires great effort and dedication. I fear that one of the severe problems that we face in our society today is the notion of raising children "on the fly". There is gross neglect that is so severe that it usually attracts the attention of child protective or other law enforcement services. However, there are other subtler forms of emotional neglect

that fall under such legal radar. When a parent neglects to appropriately prioritize their child, the ensuing damage is potentially profound. It all hurts an innocent youngster. I ultimately urge people to think about whether parenthood is an occupation they really seek before they step into the job.

Also, for more than a generation, one of the missions that I have undertaken has been to urge the eradication of physical abuse. Many of the students that I face believe that part of a parent's job is to use physical force when their child misbehaves. It is my belief that even a mere slap on the wrist is psychologically damaging. How is a baby to reconcile the idea that they are so attached to their parent and that the parent loves them with the notion that this same parent imposes pain upon them? Inevitably, even if momentarily, this has to generate a schism in one's developing psyche. In 1977, when I first taught child development, most students emphatically informed me that I was wrong, that it is impossible to raise children without hitting them. They were wrong. I raised a very active son without once using physical force in any way. Not only is it possible, it is quite gratifying to interact in a non-violent way. It is a disgrace that hitting by parents and some schools is still legal in the United States.

While I actually believe that I have gotten through to many students about non-aggression, I fear that many would-be parents still have an "us vs. them" mentality about raising children. Why? We would have a healthier society mentally with parents acting in a manner that isn't coercive to their children. If all parents would simply honor their offspring, we might not be worried about dissociative disorders.

MV**References**

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17 Ideas from Sara M.

1. A survivor never gives up.
2. Hurt people, hurt people.
3. Life is change.
4. Just say NO to them and YES to you.
5. Laugh more loudly.
6. Smile more spontaneously.
7. Breathe deeply and do something new.
8. Accept and approve of yourself always.
9. If you are falling down, dwell on your blessings.
10. Fight fear or fear will F— you.
11. Read *G-d Calling* by A.J. Russel
12. Try an alternative healer with a microwave touch; no cracking or twisting.
13. 85% of the abused know their perpetrator.
14. Statistics are inaccurate and low due to amnesia.
15. A relative or close friend is the person to check out.
16. You are stronger than you think.
17. Anything worth doing is worth doing poorly.

MV

A Tale of Two Dogs

By Carol Barrington

I have a black and white dog named Spot who is the love of my life. Spot has been with me for a very long time, and during the worst times of my life he has always been around to sit with me with his head on my leg.

Spot and I found each other in Georgia around 13 years ago. The vet told me that he was at least a year old at that time, so he's at least 14 years old now. Spot has the greatest personality. He's a very happy and laid back dog. He loves people and he is always excited when company comes over. He likes checking out new people, trying to tell where they've been by their smells, and he likes the attention that they give him. He makes little jumping movements with his back legs when he's so happy.

Even though Spot is a male, when the pregnant cat I took in gave birth to kittens, Spot would sit with the kittens and allow them to cuddle in his belly. I would have to take the kittens away sometimes so they could nurse, because he would growl whenever the mother would try to come near her own kittens. I kept one of those kittens, and his name is Koshka and he is now 8 years old and thoroughly imprinted upon Spot.

Spot doesn't see very well anymore, and he hasn't been able to hear anything at all for a long time now. He has a lot of gray now where once there was black, and his back legs are getting pretty weak. Spot has never had any fear of strangers, even though he spent his first year of life as a stray. Since he can no longer hear, he doesn't bark at noises outside or at the sound of the doorbell. But he never really did; rather, he was always happy because noises meant company might be coming in for him to meet. To Spot, the world has always been an adventure, something exciting, something good.

About 8 years ago, when Spot was six years old, I happened upon a little

black dog in Mexico. She was a stray and was only a few months old. I named her Sobaka, and she turned into a happy, energetic, loving, and loyal dog. She follows me from room to room and always sits next to me on the couch and sleeps with me on the bed. Her bark becomes a high-pitched screech of excitement when I come home each day from work.

But her personality is really different than Spot's in regard to the outside world. She is very suspicious of people and has even nipped ankles twice. I now either keep her locked up when someone new has come over, or I put her muzzle on her. She is particularly protective of the couch and the bed - if someone approaches one of them, she jumps up on it and barks at the person and won't let them sit down. I've always assumed it was because those are the places I sleep and she knows I am most vulnerable there. When I take a bath or shower, Sobaka always sits in the bathroom doorway, facing out, as though she is on guard. She barks at the slightest noise, she barks at the doorbell, and she even barks when she hears the familiar voices of the neighbors outside. She seems so on guard all of the time.

What I find most interesting is that the personalities of my two dogs exemplify two different sides of my own personality. I wonder sometimes if the different stages I was in when I got each one of them shaped them into dogs with two such different views of the world. When I got Spot, I viewed the world in much the same way as he does. Things had always gone well for me, I never wanted for anything, and change was always something that was for the better. New people were interesting and exciting. Life was an adventure, something to charge into and explore. I didn't pay much attention to "red flags" because nothing bad ever came of them. I was in a long-term relationship in which I felt very loved

and safe, and every day I was getting closer and closer to my professional goals.

By the time I got Sobaka, my life had changed completely. My ten-year relationship had ended, and the pain and my inability to deal with that pain had led everything in my life to fall apart. I left graduate school, I moved across the country, and I began living a life very similar to a fugue state. And I lived in absolute fear - fear of the creditors I could not pay, fear of the hoodlums in the huge city in which I now found myself, fear of losing my low-paying job, fear of being so close to having nothing. I was afraid of answering the phone, I was afraid of checking the mail out of fear of finding more bills, and I was afraid when the doorbell rang. My house was burglarized twice during this time, and I have no idea what may have been done to the dogs by the burglars.

I no longer found new people exciting and very seldom invited people to visit me, because they might be people who could hurt me, whether physically, financially, or emotionally. I no longer saw life as an adventure, because now it only seemed like an insurmountable challenge. I felt defeated and afraid. I became increasingly isolated, and I found solace only in the privacy and solitude of my own home. I didn't want anyone to bother me there; I wanted just to be left alone. The outside world wasn't welcome in my house, because it only represented unpredictability and caused me fear and anxiety. Change was no longer exciting, because now it only brought trouble.

Looking back, I can see how Sobaka so clearly manifests the same attitude towards the world as I had come to develop. I had stopped trusting people blindly and went to the opposite extreme of not trusting them at all. I sought isolation as a means to keep the danger of people away

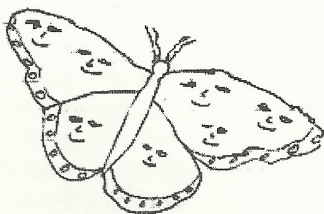
Two Dogs, Cont'd.

from myself. With those people I couldn't avoid, I kept interactions very superficial and emotionally distant. Similarly, Sobaka is always on guard, particularly when she knows I am bathing, sleeping, or interacting with another person. She is most relaxed when we are all at home, sitting together, with no outsiders around. It's almost as if she is the physical manifestation of my own defense mechanisms.

Spot and Sobaka are such different types of dogs, that it's difficult to take them out for a walk in public at the same time. It's emotionally draining and makes it hard to enjoy the walk when one dog is too vulnerable because he can't see well or hear but wants to go excitedly and unwarily out to explore, and the other dog wants to bark and growl and chase any other people away.

I wonder if there is some way to shape the dogs to be a little more like each other and embody less the extremes. So that they aren't cheerfully racing off blind and deaf into possible danger, but they also aren't so guarded that they can't even experience and appreciate non-dangerous situations and people.

Postscript: Spot died on July 19, 2004 at the age of 16. I'm hoping to honor the memory of my old friend by continuing my struggle to reclaim the side of my personality that he himself never lost.

MV

I wish I were a butterfly. So, we could fly away.

VIXIAN S

Growing**Bad girl!****How can you be so stupid?****Can't you even take care of yourself?****You are 38 years old! Get a grip.**

I deserve to be loved and cherished.

Geez! You think by now you'd have figured it out!**I can't believe you are such an idiot.****You have dashed all my hopes for you.****What kind of example is this for your kids?**

I am a kind and loving person.

Don't you understand how important this is?**Get it together!****Haven't you spent enough time in therapy?****Just focus on the present.**

I am intelligent and creative.

You deserved to be punished.**Why don't you cut yourself?****You can't express your hurt, it's against the rules.****I am so disappointed in you.**

I am strong and capable.

You'll never get this right!**You have wasted your potential.****You could have been a doctor.****You could have been wealthy.****I chose the path in life that is right for me.****What a loss!****I had such high hopes for you.****You could have been so successful.****You were smarter than the rest.****I choose to walk the healing path of light****Why aren't you listening to me?****Don't you care about me?****I did so much for you!****I made so many sacrifices!****I can make healthy choices that are good for me.****I don't live there anymore. I am my own person!***By Jenn***MV**

Finding Support In Therapy

By Katieshouse

It doesn't seem possible. I can recall the very second, what I was wearing, what she was wearing, where we were standing, when it felt our world was about to crumble. It wasn't some ancient moment covered through the years with debris from the perversion and abuse we had lived through to come to this place and time. It wasn't a moment in space when one became two and two became three and life began to multiply in groups through a series of acts to which Katieshouse was forced if any of us were to survive.

No, it was the moment our friend, our confidante, our mentor, our counselor, our spiritual director, our therapist, confirmed the deepest fears of Katieshouse. She was contemplating moving and her husband was already planning an interview a 1000 miles away. The blow was life altering. There were no words to mutter aloud, but, inside, the chaos was unfathomable. Doors we had pried open were again slamming shut and bolted. Children were wild-eyed and terrified. Light we had worked years to turn on, suddenly went out. Little feet ran frantically for safety and there was no place to hide. Katieshouse was shattered. Nothing was recognizable. It did not matter "my" intuition had been processing this possibility for months within the confines of Katieshouse, behind the closed doors. We dared not murmur our worst fears.

I recall looking at her and saying something to the effect, I knew it was coming. "Someone" turned to walk down the long staircase of her home, and out the front door. Shock. Turmoil. Anger. Despair. Desolation. I had a 45 minute drive in front of me. Maybe I would drive myself into an on-coming semi, or off a bridge. "Driver took over. There was no other way. Sobs wrenched the life out of me. I could not function on my own. All the resources we had used to survive in the past, and that I had slowly been releasing or integrating, I pleaded to come

forward. A multi-level world she helped me to uncover was collapsing and the oncoming storm would leave nothing or no one standing. Every cell of Katieshouse would be hammered with the relentless echoes of, "We told you so". Whimpering voices of children resounded in the halls. Difficult and hesitant children and adolescents it took years to bring out and to accept and trust her were chanting and taunting. No one could decipher truth from pain. Comforting words and gentle hugs were lost or used to bruise each other. Had she ever loved us or cared about our suffering? It seemed another game we played, won, but lost. Winds of immeasurable force came gusting through the core of Katieshouse threatening to obliterate everything we had painfully, with great sorrow, endured, as we had come to trust this woman we thought God had put into our path to rescue us. Now, it was as though shards of broken glass were being hurled at the heart of Katieshouse and wounds barely healed were suddenly hemorrhaging again.

Several months have passed since the gales battered us to the ground. We have survived. Isn't that what DID is about, survival? We were able through yet another awesome act of God, to find someone we could lament to through the changes, through the packing, moving, phone calls, tears, tumultuous emotions of good-bye. Nothing was easy. Every day, every hour, very minute, every second, someone had to breathe for Katieshouse, taking turns because the effort was exhausting and depleting. We pushed through a heavy suffocating fog. We were on automatic pilot. Get up. Get dressed. Go to work. Go home. Take pills to sleep. Fight not to sleep. Sleep fitfully. Get up. Start all over again. I had regressed. Within Katieshouse, people had to take turns to do my day and survive my nights. I was lost, once again, in an abyss of confusion.

Katieshouse had not easily

confided to "Joan" the secrets of a lifetime. Now, we were faced with feelings of abandonment, betrayal and, yet, to shut down, if we could, would be a self-betrayal and wasted untold hours of pain and discovery. Not to shut down, and try to go on, was a betrayal as well. There was no way to win. It was feasible no one inside/outside would live. How could we possibly trust another human being? We were riding a tidal wave of unspeakable hopelessness. It felt new. It wasn't about yesterday or the day before or last year, or 10 years ago. It was now. This minute. Our lives depended on staying afloat and weathering yet one more storm. We had worked so hard, come so far, relived horror and terror, sought refuge in the arms of this woman. She was the only person some of Katieshouse had ever known. Her voice was the only voice and her touch the only touch some of the children had experienced. How could we possibly risk allowing yet another person into our lives, only to be left alone. How could we not after coming so far and visiting this 3-D world in which she existed? But, we could not imagine another person understanding or knowing us or offering us safety. Still, somewhere deep inside, we took one more step.

"Ann" was able to hear our cries. She understood better than we had thought possible the despair of losing Joan. She didn't label us with the dozens of names we screamed to each other in our despondency. We were able to release some of the anguish by talking, not of the past, but the perceived betrayal of our beloved Joan. What we could not share with Joan, we shared with Ann. And the healing began, again.

We did not look to this new therapist for solace in the same ways. Our expectations of her were less identifiable. Where Joan had been nurturing, and able to read between the layers, where Joan was able to call someone to the "front" with the simple touch of her hand, Ann,

listened, and in listening, slowly, the winds subsided and some iota of hope was born anew.

We struggled with the issue of taking drugs to calm the raging seas, but, in the end, it was a blessing to have a reprieve and to feel the calmness even for a moment. It took the edge off. Orange pills. Blue pills. White pills. One. Two. Four. We did not have battle to death every second of every minute. We could breath again and sometimes forget or pretend for a short while without the harmful consequences. Yes, it seemed, and still seems, a false calm, a quietness, disguised, as we ingest the ingredients to ease the gush of tears, or silence the screams of terror and betrayal, or to hold steady the hand wanting to slice and cut or empty several bottle of pills to assuage the pain. But it works and we live. I have let go of accusations that to help myself through medication is a sign of utter weakness and labels me more of a failure. Isn't that the essence of DID, to live and survive against all the odds?

We recently went to visit "our" Joan. We stayed a week. Katieshouse has found a quiet place again. We realized the move did not end our life, the life of Katieshouse, the relationship between friend, therapist, counselor, client. Yes, people have come and gone. Others remain apprehensive, stoic, but, others are thriving and finding peace amid the chaos. Some are rebuilding. Some bid good-bye and walked over into fields where flowers were sheltered by enormous, deeply rooted oak trees and laughter danced upon the soft petals and kissed the morning sun.

Recovery comes in stages. Seasons. There are seasons for everything. Living. Dying. Hello. Good-bye. Healing. Hurting. Loving. Hating. Anger. Peace. Recovery is about power. Power that comes from surviving one more storm. Each time we ride another wave, we grow stronger in our resolution to reach solid ground.

We can't tell you, even today, with absolute confidence, faced with the

horror of being separated from someone you have come to rely upon, trust, find safety, that "it will be okay", "you will survive". We wouldn't presume to minimize the anguish of your soul and what permeates your world as absolute truth in these dark hours. I know many of us have spent life times finding a measure of peace that comes with finding one living human being that understands, cares, and loves us. We want to believe it will never end. We want to believe no one will hurt us again or that we will not experience the same feelings of abandonment, separation, or the desertion that propelled us to create the worlds we live in daily, just existing. We don't want to think we could be left, again, on the side of the road, broken, bleeding and unnoticed.

I can tell you, that we survived and we are a little bit stronger because of it. We believe you, too, will survive and grow, having come so far. The odds weren't always in our favor, but, the same inner strength and power, that same "hope", as tiny as the flicker may be, will rise up again. The growth you have experienced with your "one and only" therapist...that person who found and rescued you from the dark hiding places, that heard the silent voices...that will be the very person, and the very essence of why you will push on and continue to live, to grow, to uncover the secrets that have held you captive. In the darkest hours of separation, the connection established with your beloved therapist will encourage you to keep on keeping on.

You can find someone else to support you. You will rebuild a trust. It may look different, but, it will come and your "job" is to be and trust yourself. Rest in the knowledge that you are in this particular place to meet tomorrow's challenge because you are a blessed survivor..

MV

Plenty X's Me

I lived on a planet called earth
It turned and turned
and turned on me.

But I was clever
(maybe only three)

I could not grow so big so as to bully
a planet
But I could become
Many, many of me.

And so it began.
A little one here.
A little one there.
And before you knew it
We were everywhere.

We grew up together
And became even more
With lots of gifts and tricks in store.

We put an end to victimhood
And lived private lives
As the dignified should.

We live on a planet called earth.
But now it turns to a different tune.
It dares not turn its back to us...

For we are brave
And we are many

Our love and strength
Have fought the enemy...

We'll rock your perceptions
We'll rock your world
And, oh,
We'll rock babies to sleep.

By Emily and her Own

MV



Letters

It seems every day I fight with flooding thoughts which enter my mind. I read that a majority of people seem happy to integrate. I guess their therapists work with each individual part and somehow manage to get the host to work with them. My therapist believes this method makes the client feel better but does not get them better. He treats his clients as one person, since they are such.

I do know sometimes I don't hear what goes on in therapy, or know I change and don't know what goes on. I know because I record each session. I want to get the most for my money. I know one session I was extremely rude to him. Treated him like dirt. Another session, I didn't say anything at all. I thank God he has a great deal of patience and understanding. It is amazing how much he can put up with. He also has e-mail available for in between sessions. You should see some of the things I've written. Simply horrible! But he understands.

Are there other options in treating DID? I was just wondering.

By Brenda

A Good Question

My therapist and I have been reading a book called *"Amongst Ourselves, A Self-Help Guide to Living with Dissociative-Identity Disorder."* It's written by Tracy Alderman, PhD and Karen Marshall, LCSW, and published by New Harbinger Publications, Inc. © 1998. I question some of the positions it takes, and wonder what others think.

For example, in the first chapter, they talk about letting others know who is "out" at a certain time.

I feel that MPD is a safety net for those of us who have been abused. To let the public know who they are talking with would enable them to find out about what has happened to us and make it unsafe. It would cause confusion and anxiety.

I have an alter that is the gatekeeper, and I know he would not allow the public access to where they should not be. Who knows—maybe

One Answer

The International Society for the Study of Dissociation (ISSD) has compiled guidelines for treating Adults with Dissociative Disorder. Although intended for professionals, the guidelines are available for the public to read at

www.issd.org/indexpage/isdguide.htm

I also encourage MV readers to support ISSD's fundraising efforts. The organization is raising money to provide more educational outreach to professionals and the public about dissociative disorders. They need our help!

Readers who have comments for Brenda may send them C/O Many Voices. I'll forward them on - and would like permission to print any that might be of interest to a broader audience.

Thanks - *Lynn W.*

MV

Support

My/our support system consists of our therapist, psychiatrist, spouse, and friends. Also MPD/DID bulletin board online, multiple Treasures 2 @ smartgroups.com — a Christian online support group.

It took a long time to bring these special people together. I sometimes think of them as my "fan club."

Many disappointments came for us when our siblings, parents, and some friends refused to believe in alters and MPD/DID itself. They deny "we" exist.

My support people are those we talk to by phone, see on occasion, and communicate with by email.

When things are very bad, we call local crisis lines, too.

By Sally B.

MV

Healing Love

To love and to cherish
for these we all strive
It's the love of our
lovers that keeps us alive
Passionate yearnings
compel us to learn
In bad times and good times
we twist and we turn.
Our future is waiting
Our past is all done
Each part of us thriving
We function as one.

By Sally B.

MV

our perpetrators would be lurking somewhere. On the net, in some chatrooms, I have heard others allowing themselves to open up. Now on the net, you never know who is listening.

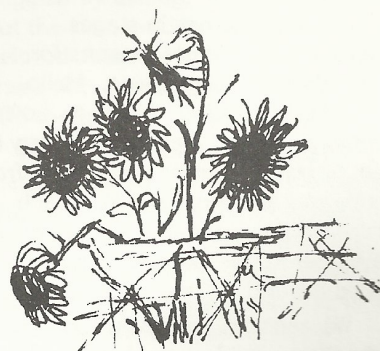
The only times I and my gatekeeper allow such to happen is with my therapist and a couple who know me very well. Also with another friend of mine who has MPD. We have grown to trust each other.

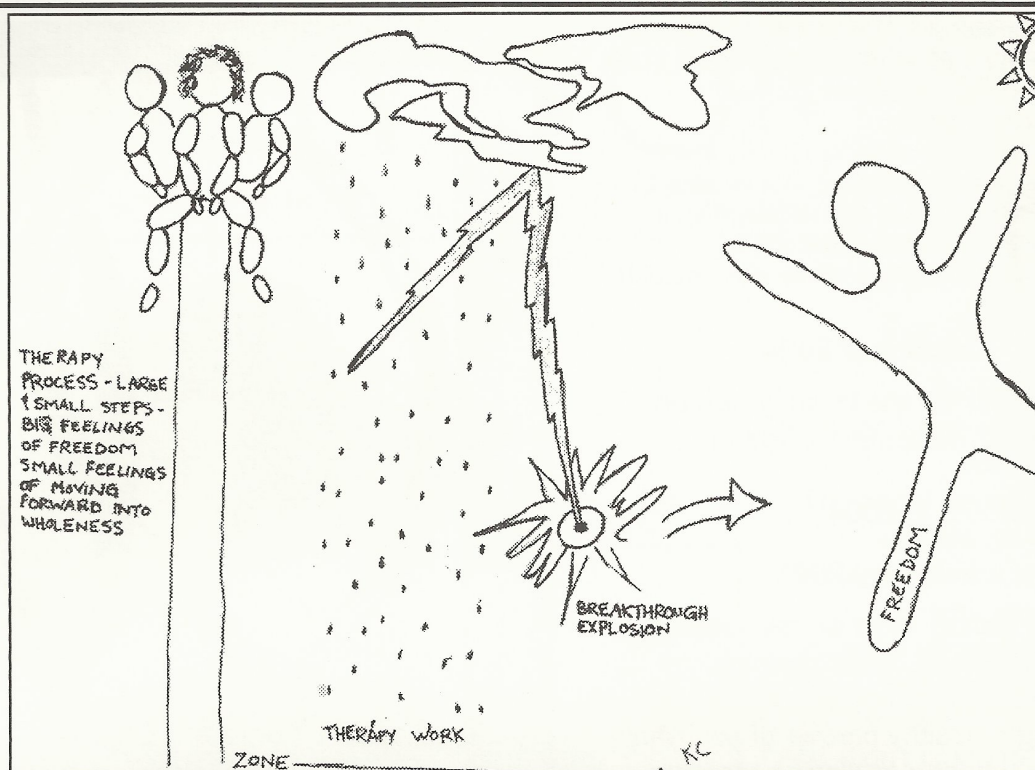
So I wonder what others think about this, both professionals or people who dissociate. When is it appropriate to let others know about our alters?

By JoJo

(Send replies to JoJo c/o Many Voices. Please give me permission to print responses in the newsletter in the future. Thanks. Lynn W.)

MV





Books

The Jumping Jealousy Bug: A Unique Collection of Children's Stories About Feelings

Stories by Marguerite; Pictures by Juli. Selfpublished. 8 x 11" Coloring and Story Book. \$7.50 + \$3.00 shipping to Marguerite Stucki, 819 Tred Avon Rd., Baltimore, MD 21212.

This is a warm, friendly little book that features a Christian slant in stories for children or young "parts". God is regularly recognized as an encouraging support and source of strength and comfort in Marguerite's tales. The simple pictures by Juli are suitable for coloring.

Trauma and Sexuality: The Effects of Childhood Sexual, Physical and Emotional Abuse on Sexual Identity and Behavior.

Edited by James A. Chu, MD and Elizabeth S. Bowman, MD. © 2002 by Haworth Press. ISBN 0-7890-2043-2 Co-Published simultaneously as Journal of Trauma & Dissociation, Vol.3, Number 4, 2002.

It's an easy assumption that the experience of childhood abuse affects future sexual functioning...but the study of exactly how sexual identity changes is not often addressed. Here, several professionals offer their close examination of problems related to adult sexual identity following childhood abuse.

Topics include reasons underlying creation of "good girls" vs "sexy girls", and sexual compulsivity, among others.

This book includes some surprising conclusions. One of the most interesting views is presented in the chapter by Toni Cavanagh Johnson on Children with Sexual Behavior Problems. She points out that not all children who molest other children were sexually abused themselves...and that there is great risk of unfairness if sexually abused children are presumed likely to abuse other children. In fact, she presents documentation that not all children who were abused will develop any problematical sexual behaviors, and only a very small number will molest other children while they are children. She believes it is very important to treat all who were abused, and to carefully identify those few who are likely to abuse others. Help in such identification is the substance of the chapter.

Altogether, this is a useful book for those trying to understand more about the development of sexual preference as well as those dealing with response to sexual trauma.

Rapid Recovery: Accelerated Information Processing & Healing

By Stephen P. King © 2004 ISBN 14101646-0. Available through Trafford Publishing, Victoria BC Canada . www.trafford.com 1-888-232-4444. 235 pgs. \$23.70 US, \$29.99 CA. Softback.

Stephen King is an outpatient addictions counsellor at Pathways Addictions Resource Center in Penticton, BC. His book offers an overview of several types of alternative healing techniques, such as Applied Kineshetics and Thought Field Therapy. Careful instructions in these techniques are provided, some of which can be done by patients on themselves.

King considers the concepts of chakras, human magnetic fields, body energy channels or "meridians" and other ideas that could be categorized as "New Age" thinking. Whether the ideas are scientifically sound remains debatable, but King is convinced that the methods he studies are effective, and gives examples of successful outcomes.

It would take some time and study for individuals to verify whether Rapid Recovery techniques work for their specific problems. But since cost is low and potential payoff is high—in reduced fear and improved functioning—this book could be a very worthwhile investment.

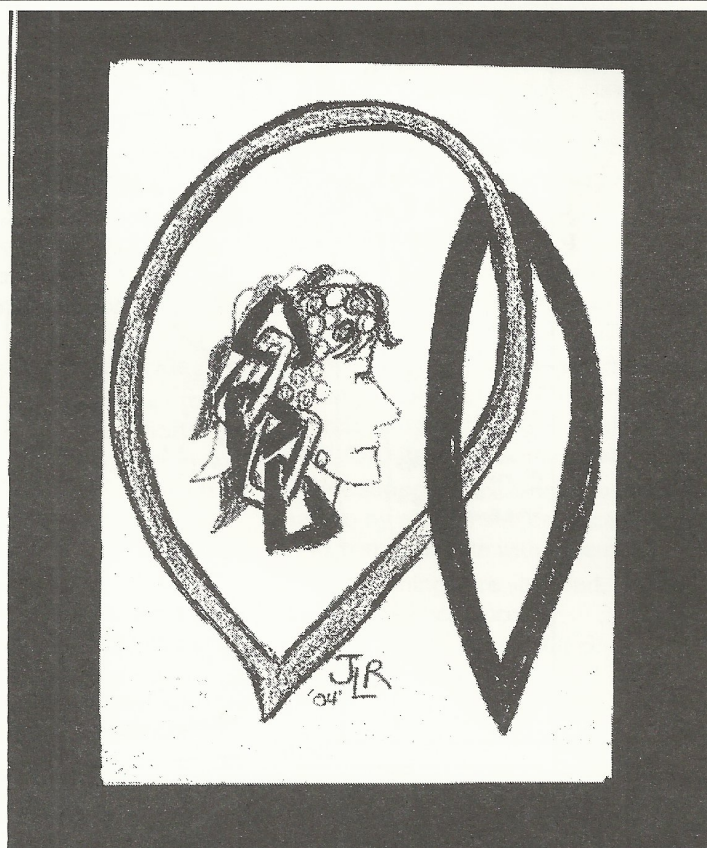
—Lynn W.

We REALLY need lots more to choose from!
ALSO- If you're a professional with an idea for
 the THERAPIST'S PAGE, or a Partner with a
 Partner's Page -- PLEASE CALL ME at
 513/751-8020. MV readers will be glad you did!
 - Lynn W., Editor

Peace Strategies for the Holiday Season.
Art: Meaningful Treasures to Give or
Receive.

February 2005

Partners in Healing. How we can help our partners understand. What partners can do to help. What if your partner needs help too? Finding a healthy partner (if you want one.) ART: Working or playing together. DEADLINE: December 1, 2004.



Prose, poetry and art are accepted on upcoming issue themes, (and even on NON-themes, if it's really great.) DO send humor, cartoons, good ideas, and whatever is useful to you. Please limit prose to about 4 typed double-spaced pages. Line drawings (black on white) are best. We can't possibly print everything. Some pieces will be condensed, but we'll print as much as we can. Please enclose a self-addressed, stamped envelope for return of your originals and a note giving us permission to publish and/or edit or excerpt your work.

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