

MANY VOICES

WORDS OF HOPE FOR PEOPLE RECOVERING FROM TRAUMA & DISSOCIATION

Vol XVII, No. 3

June 2005

ISSN1042-2277

In This Issue:

Fear Vs Courage
Coping with Flashbacks

& more...

*The Door to Life's
Journey*

Open the door; peek out, there before
you
lies everything, yet nothing

The view is overwhelming, but empty
its sight seems to go on forever, yet
somehow stops here

It is full of excitement, yet full of fear.
Today is the day hoped for, dreamed
of, yet dreaded

Ah, but what a special day this is
A day of departure into a lifetime of
journeys

A day that begins a road into
explorations, triumphs
but, riddled with hazards and
jeopardies

And only you hold the key to this door
You have worked hard and long for it

Only you can determine how wide you
open
the door, how far you walk beyond

Only you can walk to everything within
the nothing
the brilliant within the empty

The excitement within the fear
Rejoice for your special day

It will lead you to your doorway
to everyplace and everything.

By Kathy A. MV



Handling Flashbacks

By Kimberly D. Bertrand

I was in the trenches of abuse for many years. This abuse comes back to me at times, not as often now as in the past. There were days when hour after hour the flashbacks would come, reminding me of where I've been, what my life was once like, and how I became who I am today. There were days I knew nothing in how to help stop the memories, or how to handle the feelings that came afterward. Since then I have learned some things that have been very helpful.

When I feel a flashback coming on holding ice in my hands or putting it on my neck helps me keep grounded, keeps me aware of where I am. I find staying grounded the hardest part of flashbacks, of realizing that it did happen, but is not happening now. The ice will get really cold and may be almost painful. When it gets too cold to hold on to, put it down and pick it up later if you need to.

Another technique is to focus on an object. Look at the object in minute detail, look at every nook and cranny. If possible, hold the object in your hands or touch it. Feel the texture, the smoothness, the roughness, smell it, listen to the sounds it makes. I do this until the feeling passes and I feel safe once again. It is a good grounding technique.

Something else that is helpful is to talk to someone about how you're feeling. Concentrate on their voice—on the inflections, the rise and falling of sounds. Listen to the sounds of the words, how they follow each other and tumble over each other—how they sound melodious and harmonious, how the sounds grate on each other and sound harsh, how they sound gentle and musical. The person you are talking with can also count and have you repeat the numbers after them, but make sure they know ahead of time not to count in order. By counting in order, it is so routine, our mind can do it by rote and does not need to concentrate. By mixing up the numbers, our mind must concentrate

on the numbers and it helps keep one grounded. For example: 1,5,9, 3,6,8,17,21.

The most helpful technique for me is to deal with the feelings I am having to begin with. What am I remembering? How does it make me feel? Then I take the answers to my questions and write them down. I have written many poems, journal entries, short essays, short stories, and even part of a novel trying to sort through the feelings I have had as a result of flashbacks, hence the abuse.

Writing is a freeing way to explore what is inside your mind, inside your soul, in a safe and private way. Writing has to be shown to no one and is the cheapest and easiest way to cope with pain. It is also safe. Writing is a way to take pain and create beauty.

None of these techniques makes flashbacks easier to have, just more tolerable to experience. They don't make the pain go away or disappear, they just make the pain more able to be borne. Flashbacks are a necessary part of the process of healing, unfortunately, and having successful means of dealing with them is always helpful and necessary.

I hope you all have found this helpful. I wish no one had to experience abuse or maltreatment. This is one way I have found to take back my life—writing about my experience and reaching out to help others. I hope you all take back your life as well. You deserve a happy, healthy life full of richness and prosperity, one that is also safe and grounded in today's events, not yesterday's abuse.

MV

Flashbacks

The memories come
They flood every cell in my body
There's no telling when they will intrude
When the floodgates will open to the pain of past trauma

In my mind I know
That these rememberings
Are in the past
But they are so real in the now

I can feel the pain
I can hear the voices
I can taste and smell
I see all that was done

The flashbacks are much too real
So real I freeze in pain and terror
But I can't let them win
I need to lessen their hold on me

I long to be grounded in the present
To feel safe, secure and loved
Try to tell the hurters
It was them not I to blame

To release the shame and guilt
To honor myself for having survived
To be able to see the past from the present
These I work on daily

I have shown much strength
And need to keep moving forward
I am really whole
The child within to be nurtured

I am worthy of good things
The work is hard
It is a long journey
But one worth the travel

By Virginia

MV



Inside

We are terrified.
 We will not come out.
 We will stay safe inside.

No one knows how
 scared we are.
 We become numb inside.

We dream of sunshine
 blowing bubbles in the wind
 Having someone hold us gently

It's nice inside. No one
 harms or scares us.
 Send us love, inside.

By Sally B.

MV

MANY THANKS TO OUR FRIENDS!

Del Amo Hospital - Torrance, CA

Call Francis Galura: (310) 784-2289 or (800) 533-5266

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

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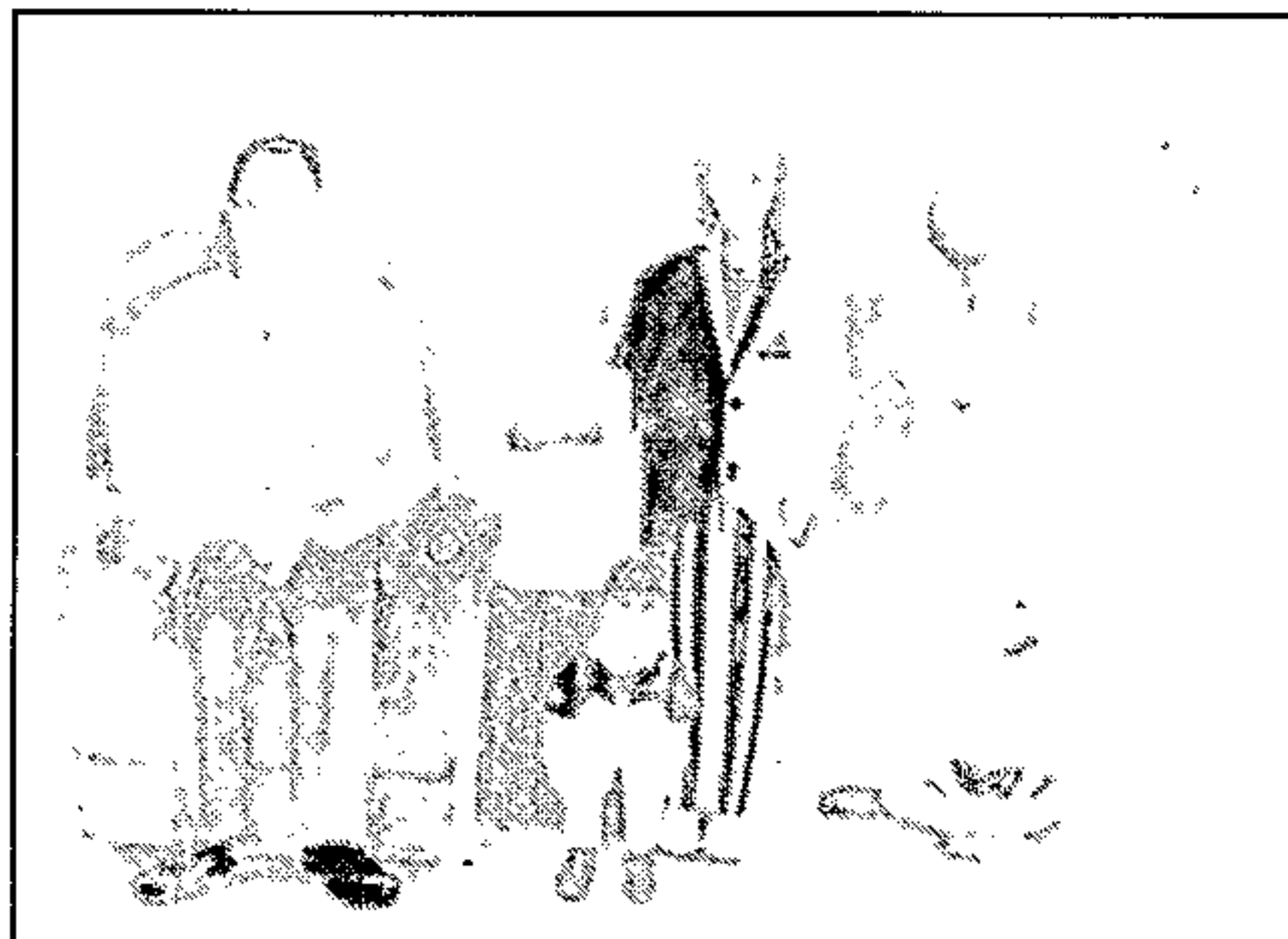
Call David Tate: (816) 356-5688 or (800) 225-8577

Women's Institute for Incorporation Therapy - Hollywood, FL

Call Larry Spinosa: (800) 437-5478

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



Many Among One

Into the recesses of my mind I travel. Looking back at the formation of the others.
 We who make up who I am or who we are. Events that so indelibly changed the boy we were meant to be.
 Tragedy upon tragedy, pain piled on top of pain. Each blow etched deep into the soul of one so pliable, moldable, controllable.

No one moment can account for the end result. No event to explain how all the pieces came together.
 Just the lingering thought that all is random and without reason. Like a strong structure built without a plan
 Although the pieces are so different, a square, triangle, circle, all fit perfectly like a giant jig saw puzzle.

Without reason, or thought, the parts were forced into this mosaic or collage of a man.

Many faces staring out of a single pair of eyes. Looking at a world that makes little sense,

Wondering who we are, and who we're not. Waiting for the next heartache or life altering "surprise"

That will produce yet another member of this club. Living cramped, jammed in, sharing a heart, liver, lungs, body, a face

The same face but each seeing something different in the mirror. All longing to be free to be themselves.

How did "I" get to be plural? Can "We" ever be made singular? Will I ever be free from the ones who make up myself?

Are these simply the ramblings of a mad man, or the journey to enlightenment of Many Among One?

By John C. Mac Iver

MV

The Big Bad Wolf

By Melissa B.

Once upon a time, a long time ago, I was an ambitious young woman with lofty aspirations and a bright future. I wanted to save the world. Toward that end, I worked diligently and graduated from college with honors. Then came a quiet knock upon my door, soft enough to ignore, but always in the background. Soon it became a pounding, deafening in its insistence, that tore off the hinges and stole me away. This unwelcome visitor was depression. Now I live in its house and can't even save myself, much less the world. Perfect summer days are wasted on me now. I'm broke and broken and my friends are gone, even those who promised never to leave.

Depression has made a liar out of me. I have a cover story so no one knows that I survive on a monthly pittance from the government and live in substandard subsidized housing. I don't have visitors because I don't want to give myself away. I don't know where the hot spots are anymore. If I did, I probably wouldn't go anyway. I'm ashamed of what I've become. I'm tightly held in depression's grip, immobilized by self-hatred and paralyzed with fear. I'm just burning daylight, out of synch with the world. I don't know how my life has gotten so far away from me or how to get it back.

The shame of depressive illness is compounded by societal stigma. Experts in the field claim that depression is a medical illness, but treat it as a personal weakness. Some patients seek help but are refused treatment because their conditions are considered hopeless. Some therapists terminate with patients whom they deem too sick or risky. No other medical condition evokes disdain rather than compassion when the illness takes a turn for the worse. Cancer patients aren't blamed if a tumor reappears. No one would dare tell a Parkinson's patient to just snap out of it. Leukemia patients aren't

derided for not trying hard enough to get better or for draining the system if they collect disability. Would anyone consider a quadriplegic lucky for not having to wake up early every day to work a 9-5? Would anyone advise a wheelchair-bound person to "just get up" and then blame him when he doesn't?

The trivialization of depression is seen in one particularly offensive anti-depressant commercial that portrays depression as a whimsical cartoon character whose problems are solved once it pops a pill and begins chasing butterflies and ladybugs. Others characterize depression as more than a lack of energy. I suspect this has something to do with the fact that everyone has had "the blues." Equating "the blues" with a depressive illness is akin to claiming to know what it is to have third degree burns because one has experienced mild sunburns.

Those who suffer from them often internalize society's misconceptions of depressive illnesses. Not only do we deal with the hopelessness, despair, and self-condemnation that come with a depressive illness, we begin to question whether we do, indeed, have an illness. If we can get better by not dwelling on it, perhaps we can pull ourselves up by the bootstraps. Stop being weak and indulgent and tough it out like everyone else does.

If that's the formula, why then, am I on three potent medications? Along with their benefits come side effects that have, at times, been intolerable. If this is a personal failing, why endure the indignity of having to take medication? Nix the medication, try harder, put on some make-up and get on with it already.

If only it were that easy.

I know it isn't. You aren't weak, lazy, or simply lacking motivation. You are fighting for your life. The battle is both inside and outside you. Maybe you feel that no one understands what

you're going through. Find someone who does. Affiliate. Have compassion for yourself.

Read books by people who've been where you are. I recommend *The Noonday Demon: An Atlas of Depression* by Andrew Solomon (Simon & Schuster, 2001) and *Darkness Visible* by William Styron (Vintage Books USA, 1992).

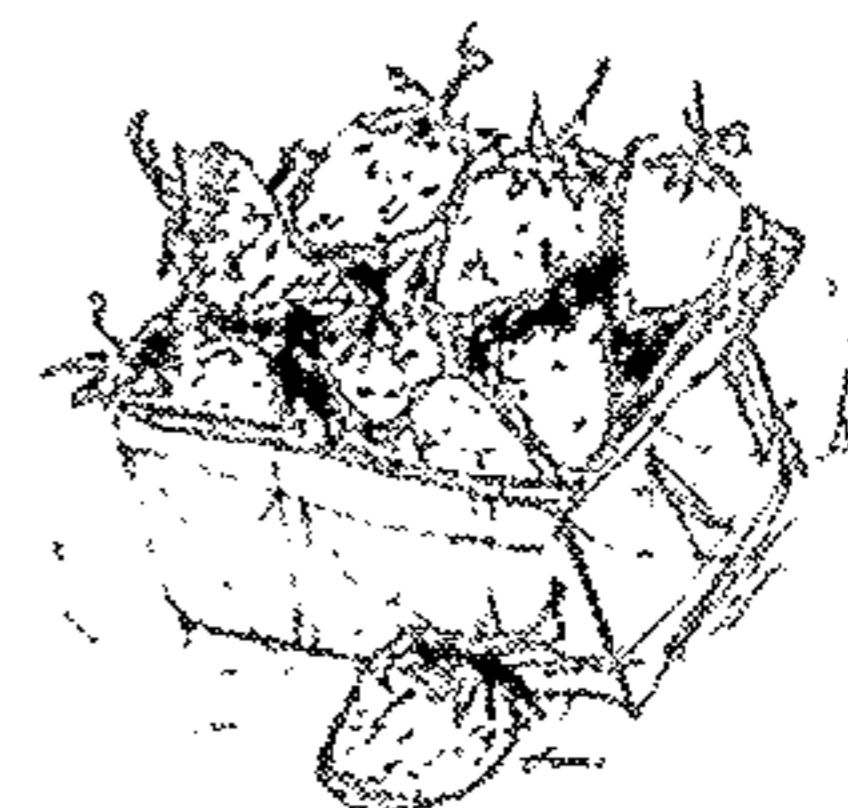
You're not alone. Hold on to hope and tread water until you can swim.

MV

Courage to Conquer Fear

Courage is found deep within
Knowing that I am a survivor
Knowing I am stronger than any
fear
Fear of the past
Fear of the unknown
Fear of myself
Fear of being hurt
I can conquer all these
With the help of my inner self
To believe in my strength
To accept the caring of others
The power of all the parts
Working together as a team
A family of support
Looking out for each other
The strength in numbers

By Virginia MV



Being Multiple

By VelvetFairy

Oh the trials and tribulations of being a "hidden" multiple in today's world.

Today I walked into my client's home to teach yoga with tears barely dried on my cheeks. This is not unusual for me. Often I cry in the car on the way to my private classes, and then cry on the way home. It takes so much effort to contain my feelings for work. Often I feel like I am being buried alive.

But fortunately, as soon as I am alone again, the tears usually start to pour, and then I feel better. My true dharma, the thing that I will be doing when I am completed with my healing, is acting. For this profession, I will not need to hold my feelings back. Just the opposite! All my feelings can come out, and I will even be paid for it! How lovely is that! But for now, teaching yoga requires me to be controlled. I have chosen to put acting on hold because I want to be a whole actress, and I feel very strongly about this. I want to play characters that are whole. And I cannot truthfully do this until I am whole!

I am so careful now about whom I tell about my multiplicity. I have lost potential friends. Sometimes I have told people and it just slides past them, and the subject is never brought up again, as if it never was talked about. People just can't seem to deal with multiplicity, with what causes it in the first place. Sexual and ritual abuse are still such taboo subjects. Since I have barely begun my healing in these areas, I do not feel it is appropriate to be outspoken about these issues, but, once I am further along in my healing, I vow to be one of the loud ones. I will make sure that these horrible acts are brought to the light.

The False Memory Foundation does not scare me. It seems that they have scared so many therapists, and that is perhaps why I have been having so much "trouble" finding therapists who treat D.I.D. We cannot

let the false memory people win this battle. I will not.

I tried to get some therapy at the Trauma Center where I live, a non-profit agency that specializes in sexual abuse. They give free counseling. I called them up and asked if I would be eligible if the sexual abuse had occurred long ago, and they said yes.

But when I went in, and told them I had D.I.D., they said they could not help me. I had a few sessions anyway with one of their counselors. As soon as I spoke about a dream I had about a five year old being involved sexually with adults, she became very nervous and quickly changed the subject.

We even had a brief switch in the office. Being triggered by a teddy bear, "Six" came out. The counselor didn't even notice! I knew Six was out, but this counselor wasn't present enough to see, or perhaps she just didn't want to see.

I am so disappointed with this place. It's supposed to help sexual abuse survivors, but obviously only those who have been abused as adults. Where are the non-profit agencies that help people heal D.I.D.? Where are they? It is absurd to me that there are agencies for adults who've been raped, for people with PTSD, AIDs, cancer, etc...yet none for people with D.I.D. the hidden disorder of today.

This makes me livid. I intend to change this in the future. Everyone who is multiple is entitled to treatment, regardless of how much money they have. I am so angry about the lack of free assistance there seems to be for people like me.

In his book "Ghosts in the Bedroom" Ken Graber says that anger is the backbone to healing and that if you can't get angry, you can't heal. I agree. I am the host of a large gang, and it is time for this host to relinquish her victimhood.

I will never give up on my quest for healing. I will be in full time therapy healing my MPD. I will be whole

again, and free. I will be much more than a survivor. I will thrive. And I welcome anyone else who would like to join me!

(Postscript)

There is a new non profit agency called The Emma Center in Arcata, CA which provides information, referrals and support for trauma survivors. They have many wonderful long term goals. Their phone number is 707 825-6680.

Their website is www.emmacenter.org/emma

MV

Body Memories

My body holds such memories that my conscious mind doesn't share.

I feel sometimes that I must be mad to react so strangely to common things, which on another day I'd ignore.

These feelings come from somewhere but I don't know exactly why. I know that they didn't spring from a void, and I know there's a reason that they exist. The truth is I'd rather be crazy than discover the who and the how

By Candace E. Barnes

MV

Here Be Dragons—Strong and Bold!

By Loletta

Therapy wasn't new to me. I'd spent more than two years working with issues that had kept me bound in a thirty-year-long abusive relationship before I was able to push through to divorce. Now here I was four years out of the marriage and eager to get on with healing around sexual matters, but things weren't moving along as I'd expected. I could not make sense of the feeling that I had a great deal more work to do.

I struggled to give words to what was happening inside. In frustration, I told my therapist, "Someplace I feel like I have to deal with THAT!"

"THAT?" she queried.

Feeling that I was such a horrible, wicked, bad person. Feeling alone. I can't put words to it. I don't know what it is. I don't KNOW what it is that's missing - or wrong - or in pieces. 'Something's in pieces! Still in pieces!' I cried. Near the end of my session, an image of shattered red glass in a tiny, white, satin-lined coffin-box rose from some deep hiding place within. After some guided containment imagery, I left the vision with my therapist and went home.

The picture I saw that afternoon meant nothing to me when it came. I went about my daily tasks; but despite containment exercises, I could not keep the image away. For nearly a week, I battled with it and the accompanying disquietude.

Although I had practice sitting with difficult feelings, this struggle was too much for me. Finally, I gave up. In desperation, I demanded that Somebody (inside) show me what this was all about. I grabbed my pencil and notebook and wrote the answer as it was revealed.

I was 56 years old when The Knowing broke through. My father's death preceded The Revelation of the abuse by about five weeks. Although some part of me fought against it,

that January evening the invisible wall between Knowing and Not Knowing was lifted by an Internal Guardian of the Truth; and the long-buried knowledge surged to the surface of my mind.

The reality of the abuse had been suppressed for over five decades, and the courage to face this previously walled-off information did not come easily. The majority of The Masses (the name I chose for my personal cacophony of inner voices) reacted with fierce denial. Internal Judges raged against The-One-Who-Knows, the part of me who took on the task of revealing to the rest of us the long-secreted, grim truth of the molestation. Inner Defenders of my father called her a liar. They demanded external proof. They insisted on evidence from other witnesses.

With quiet persistence, The-One-Who-Knows spoke to the others inside. "This is what is. Why are you trying to force me to back away from what I know is the truth?" The screaming inside became riotous, but The-One-Who-Knows courageously stood her ground with a preternatural calm and certainty. She had no external witnesses, no external proof. Weary though she grew, she endured the resistance, for at the center of her Self she knew the truth.

With the help of my therapist, The Masses arrived at a somewhat fragile truce, thus making room for the expression of differing feelings and thoughts concerning The Revelation and allowing our healing work to continue.

As the reality of the incest leaked into my consciousness, child parts emerged; and as these Victim-Survivors made their way into the present, they brought with them body memories filled with the pain and the fear of the Terror Time. These feelings spilled throughout, causing great unrest amid The Masses. Among The Little Ones who appeared in the early

weeks after The Revelation was Little Lettie, a child alter perhaps four-years old. She had begun to relive the horror of her long-sequestered memories and was convinced that she would once again be trapped and hurt. Although my adult parts knew that the threat of harm from our father was past, Little Lettie was experiencing a sense of danger in the present. As my body and mind took on the pain that this wounded child part of me had endured, my physical and emotional distress intensified.

It became increasingly important to me that Little Lettie tell her story; but having learned from experience that the world can be a very dangerous place for little girls, she felt far too vulnerable to disclose the secrets she held. If healing was to come to us, she and the other Little Ones would have to find their long-silenced voices. But before that could take place, they would have to know they were well-protected and safe from further injury.

I tried, with minimal success, to find a nurturing part inside who could comfort and reassure Little Lettie. The truth was that all of us were greatly troubled at this time. It took considerable strength to keep my adult parts functioning well enough to fulfill my work responsibilities. By the time I arrived home each evening, my adult parts who had dealt with a classroom full of fourth graders all day had precious little energy left to give to the wounded Little Ones inside. Fearful of harsh judgment and rejection, I did not feel free to seek help from family members; and many of my closest friends were dealing with serious matters of their own. So I faced the challenge of creating a space inside and out where my deeply wounded child parts could find safety and soothing.

Together, my therapist and I made a list of means for dealing with the situation when I was on my own. I would, of course, maintain my long-standing habit of journaling, using

both paper and tape recordings. I sought to preserve the truce among The Masses by providing time for all parts to voice their opinions without fear of hurtful criticism or threat of silencing from internal sources. I would also continue to explore drawing, coloring, painting and playing with clay for those parts who were not comfortable with verbal expression.

Following my counselor's suggestion, I decided to begin a bedtime routine that included lullabies and stuffed toys for Little Lettie. Planning to create a safe haven at home for The Little Ones increased my sense of power during a time when my inner world often felt out of control.

While I was learning to soothe and comfort my child parts at home, my counselor and I were searching for a way to establish safety for The Little Ones during my weekly therapy sessions. Previously, my conscious memories of my father were of a loving, caring man who sacrificed for my sisters and me and gave us every advantage he could. The Revelation divulged to The Masses a very different daddy. Little Lettie knew The Bad Daddy, and she was afraid of him. In her small-child view, he was the most powerful human who ever lived. She believed that she could be further harmed if she dared to talk about what this strong Daddy-Man had done to her.

Child alters of adult survivors of childhood sexual abuse sometimes need strength beyond that of humans to help them face and deal with newly revealed, years-old terrors, particularly when the terrors are the result of the actions of those upon whom the vulnerable child most depended. So it was for Little Lettie. With some assistance, she found a power that could help her. All it took was my therapist's invitation to the Little Kids' Space (a children's playroom adjacent to my counselor's office) and Lettie's own creative survivor spirit.

There were lots of toys in the playroom. My counselor gathered crayons, markers, and drawing paper while I chose a box of snake-like Pick-Up Sticks. But the thing that caught Little Lettie's eye was a teal green

puppet. Back to the doctor's office we went, hands full. I used the snaky Pick-Up Sticks to tell a recent frightening dream. A seven- or eight-year-old child alter joined in by giving a lecture on snakes. My adult self entered the conversation again. While discussing the similarities between snakes and fingers and talking about my long-held fear of hands under my bed, I became aware of a very frightened child inside. I pulled my legs up tight under me. My therapist recognized the emergence of the child part, too. "This way nobody can get to you," she said.

"Right. Nobody can. Nobody can reach. You know!" As I slipped my hand into the plush, teal green puppet, the toy dragon came to life. "And I know THIS much!" The puppet hissed and Little Lettie laughed gleefully. "I KNOW," growled the dragon. "THAT IF I WERE THE DRAGON OF THE WORLD, I WOULD NEVER LET DADDIES TOUCH LITTLE GIRLS! R-R-R-WOW-R-R-R! I WOULD KEEP THEM AWAY! THEY COULD NOT GET TO LITTLE GIRLS! R-R-R-WOW-R-R-R! R-R-R-WOW-R-R-R! I'D SCARE THEM AWAY!" In a commanding voice, the mighty Dragon of the World delivered his unmistakable message. "R-R-R-WOW-R-R-R! I WILL KEEP THEM AWAY!" He moved from left to right and back again surveying the space around Little Lettie, watching for Big Man fingers and repeatedly roaring to warn them away. "I'LL BE THE GUARDIAN AND PROTECTOR! NOBODY CAN EVER TOUCH THE LITTLE GIRL! SHE'LL BE SAFE ALL THE TIME!"

The Dragon of the World promised safety and protection to his special little girl and swift and sure destruction to anyone who posed a threat to her. Little Lettie fell in love with him immediately. In a few minutes' time, he had gained her trust and cleared an invisible path so she could begin to release the anguish of the Terror Time.

For many months, this mighty dragon and his invincible kin stood as fiercely vigilant guards, protecting Little Lettie as fragmented images, frightening impressions, and painful somatic responses surfaced. These

strong and mighty beasts made it possible for this little one to raise her voice in rage against the daddy who had injured her.

Over time, The Masses have come to accept the truth of The-One-Who-Knows. Even though we have no absolute external proof of the molestation, none among us doubts our internal knowing. The Masses have adopted Little Lettie's dragons and have written poems, stories, and songs lauding these fearsome defenders and their noble deeds. Dragon figurines can be found in every room of our house. Dragons sit on our tables and shelves, lie on our bed, and curl up in the corners on our floor. Their pictures decorate our walls. Thanks to trusted friends and family members, our collection of dragon toys and books is growing and growing.

Today Lettie and the other Little Ones don't need these visible images as they once did. Our dragons are fun and sometimes they help comfort us, but we all understand that The Dragon of the World and his powerful family are really representations of our own invisible strength. We know that no matter what the future brings our way we hold inside a brave, powerful, already-proven-unconquerable spirit. We know that in the deepest part of our Self, here be dragons- strong and bold!

A Riddle

This is the Dragon of the World.

It guards a treasure rare
No precious gem or jewel
could possibly compare

It's prettier than emeralds,
Rubies, amethyst, or pearl
It's brighter than the brightest
Blue star sapphire in the world

Its value can't be measured
In silver or in gold.
This treasure's worth more diamonds
Than all the earth could hold.

This dragon guards a treasure
More precious than all these.
In fact, the treasure's priceless
For this dragon's guarding me!

*By Little Lettie
with help from The Masses*

Partners Page:

Coping With Flashbacks

By John, SO for Keepers

What follows is one SO's experience with his multiple wife. I am not a medical expert or a psychological therapist, just a guy who loves his wife and wants to tell other SOs how I learned to handle flashbacks.

Flashbacks, the harrowing reliving of past events, have to alarm you, the significant other, for no other reason than you have no idea where your loved one is, who they are with, what you can do. All you know is that they do not know who you are or they think you are someone else.

As time goes by and flashbacks either slowly eliminate themselves or you understand what is happening, you will have a better idea of what to do.

Flashbacks are, quite simply stated, a reoccurrence of a past event that is so real to the one experiencing it that to them they are going through it in its full power. They feel pain, both emotional and physical, and you as their SO want to help them, to take them away from the pain, yet sometimes you can and sometimes you cannot. They are there in that past moment in time and you are here in the present. It's like they are travelling back in time and you are along for the ride but not able to touch or reach out to them.

Your words are about all you can offer and even that must often come after they have gone through the majority of the flashback.

I have seen flashbacks, or abreactions, lasting for minutes, hours, days and while some of the alters are in the flashback, some, like whoever is in control of the body is here with you physically, but they are not "all there," something is amiss, something is not right, some alters cannot be found. As Keepers say it, they are "not on all thrusters."

So, how did I as the SO cope? How does one handle what is going on and at the same time offer

assistance to them?

As difficult as it may be at times, try not to react to any degree of excess, try to remain as level headed and level voiced as possible. If they were yelling at me, telling me to stay away, chances are they were not seeing me; I had to remember that. I did not reach out to them, except with my words, words of support, of who I was, of where they should go to.

I say *where they should go to* because over the years we learned that our home was a 'safe' place for them, so we agreed that if they heard the words, "go back to 1745," our address, they knew to somehow head there, inside they could go down that path and return to 1745 leaving the abreaction or the flashback behind, and they in turn would "return" to the present and be back with me. Sometimes it was or is an alter or two at a time coming back and at other times the whole brood would return at once.

As a flashback subsides or they "escape from it" and returned to me I held them as I would have if I had been there to hold them the first time. Comfort them, offer them the protection of my arms around them, protect them from "them, him, her, whoever, whatever" and just love them. Let them feel safe and protected for once, let them know someone cares that they went through that, that I was sorry it happened to them, that they did not deserve that to happen to them, that it wasn't their fault and that they are not bad. I let them know they are good and loved and I would be there for them. Then I held them as long as was practical, as long as they needed it. Sometimes that meant curling up in bed at 7 o'clock in the evening and staying there until I got up for work the next day, but it was the best thing I could do right then.

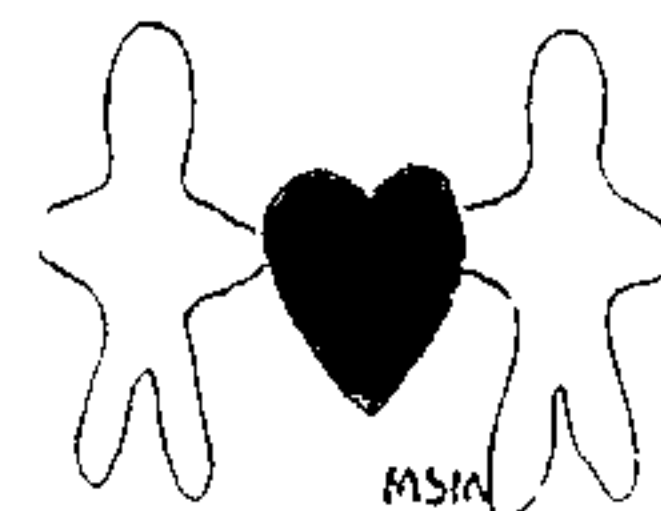
My wife is 54 now and the flashbacks have decreased in their

intensity and frequency, but that does not mean they are over. All it takes is a trigger and we can be off to the races again. Now though, she has others who can help her cope with the flashbacks. She volunteers at "the Center," she helps the office manager prepare the weekly church bulletins, answer the phones and offers her a sympathetic ear.

Lyn, the office manager, has proven to be very adept at seeing the multiplicity, feeling free to ask questions to better understand it and has on several occasions recognized that "something has happened." She has handled it delicately and gently, asking to find out who is in abreaction; sometimes she finds out then, sometimes not until later, but each time through a soft sympathetic approach, never condescending, she has brought them back to where they felt safe again.

I really believe the biggest key in helping someone through flashbacks is to have their trust before they go into the abreaction. If they don't trust you and have faith in you before a flashback, you cannot help them while they are in it. They had to trust me to listen to my directions out, or to "come to me" to come back home to the present.

If you are confronted with your SO having a flashback my advice is to be as sympathetic as possible, as supportive as possible, keep at arms length as *you are not you* then, speak softly and considerately, never demanding or condescending in your tone. When they return to "now" be there for them, to hold them, give them a place to be safe, in your arms.

MV

From My Mirror to Yours

By Sandy K.

I was first hospitalized back in 1982. I was 17 years old. Since then I've been hospitalized more than 25 times with various diagnoses. The one that finally stuck and was correct was DID. While the doctors were disagreeing on what was "wrong" with me, I was focused on the people who actually ran the wards/units. I'll never forget the man who told me to "Fake it 'til you make it." I thought he was crazier than me.

Nevertheless, I dutifully wrote down affirmations and obediently taped them to my mirror, never once believing they would do any good.

Years passed by and my affirmations grew and changed. It was many years later when I realized some of those affirmations were coming true.

Now, I'm a staunch believer in the concept of affirmations. When we were kids, negative messages bombarded our little minds, and we adopted them as part of our own thinking. Now, it makes sense to me that we would need to repeat positive, supportive, loving messages over and over and over again to replace all those negative messages. Now, I believe in affirmations.

I still have various things taped to my mirror so I can read them over and over as I brush my teeth or dry my hair. I thought I'd share some of those affirmations and healthy reminders. They help me; I hope they'll help others, too. Some of them, I wrote myself. Others, I found from various sources:

"When we withdraw from a situation in order to spare ourselves from failure, we have just chosen a different kind of failure." – author unknown

"Don't run away from it. Don't bury it. Don't try to produce a different reality getting all strung out on something or eating your

way through your feelings. Don't slash your wrists. Just deal with it, because it's going to keep coming back if you continue living anyway. It's painful, but you just have to keep going. It's just part of life, really." – Soledad from *Courage to Heal*.

"Give as much commitment to healing as you did to surviving for the last ten or fifteen years." – Dorianne from *Courage to Heal*.

"Most of our faults are more pardonable than the means we use to conceal them." Francois de La Rochefoucauld

"Life is tough, but I AM TOUGHER." --me

"If you do what's hard today, tomorrow will be easier." --me

"None of us can rely on how we once were; we have to rely on who we are now." --me.

"We can never be free if we are not free within ourselves." – Dorian Beth Wenzel from 'Community Vision' Newsletter.

and my current favorite...

"Let reality and all the people in our lives hire their own protection. We need to rescue ourselves from the monsters we fear, heal our unrepeatability, and stop depersonalizing our own private experience of hell." from *Rebuilding the Garden*.

Something else I found recently:
Take Back the Power

"Lonely people suffer from fear. They honor their anxiety. Instead of moving out to find and love others, even though this means tolerating some anxiety, they move away from others

so they don't feel anxious about rejection or slights. By opting for temporary comfort instead of putting up with risk and anxiety, they keep themselves hurting from the infinitely greater pain of loneliness. If you are lonely, you may decide to continue avoiding initiative in relationships. If you do, you will give anxiety the power to disrupt your life. You will continue honoring your anxiety as if it were a little god, and anxiety will dominate you.

But you will tell yourself the truth, combat your radical relationship misbeliefs and your other relationship misbeliefs with truth, and initiate and work at relationships in love, you will be able to see how the application of love can and will cast out fear."

From *Untwisting Twisted Relationships* by William & Candace Backus

MV

Rocky Places

Wandering the boulder field of my memory
I pause, and stoop to look under a large rock.
A memory looks back at me from the darkness,
and behind it the smaller form of a lost emotion.
Many nights it frightens me to be so close
to these childhood memories and emotions as
to do so as a child would have threatened
my very survival. Today though I know that if I can find the courage to look into these dark places in my mind that eventually the light of acceptance will reach into every corner of my being
and one day I will be whole, and free from the ghosts of my childhood.

By Eileen S

MV

Growing up the Alters: Proper Aging and Integration

By Leah, with help from The Scholar
and other co-conscious members of E. Pluribus Unum

At one point in my therapeutic process of identifying over a hundred alters (and hundreds more sub-alter), I realized that they were all under the age of sixteen, and most under the age of twelve. This means that while I, the core host, am chronologically 55, most of me is made up of babies, children, and young teens. I have been relatively integrated for several years, and still have access to the integrated alters individually.

The difference now is that I feel in charge and see the alters as aspects of my own self rather than as separate independently operating entities. The spontaneous integration I experienced, along with some planned integrations, was a beginning to the process of becoming whole. This process has raised an interesting dilemma: how to become a fully mature human being, who does not merely act her age, but actually is her age.

The difficulty is that each alter did not grow up as a normal child would, but is frozen at the age at which he or she was created. Therefore, when integration occurs, there are still fragments, if not of personalities, then of ages. There is no continuity. The host is faced with fractures in the growth processes that normal children undergo, maturing from infancy to childhood to adolescence to adulthood.

In normal child development, life experiences trigger a learning process that allows the child to mature by processing the event and responding. In the multiple, life experiences tend to create another alter, who starts afresh and leaves the previous alter unchanged. This leaves growth gaps, and is a hindrance to complete integration, as well as to the host having some internal continuity.

How can an integrating host deal with this situation? Here is the initial way I reasoned that I would proceed.

First, the alters need to be made to understand the true situation, that each is frozen at the age of his or her creation and that that is a hindrance to the stability of the alter and of the host.

Second, each alter can agree to experience growth and aging, from which he or she has been exempt until now.

Third, the alters can agree to teach each other, to help one another to mature.

I figured that this process would be frightening and confusing for the alters, due to the perceived threat of any change experience. A methodology needed to be developed, with the consent of all parties involved.

I've experienced group discussions among alters at therapy sessions, when there is a common issue being raised, or at entertainment events, where many alters want to hear the music or participate in the dancing, so there is precedence for this kind of cooperative work within my system. Some of the older children already work with the younger ones as protectors or caregivers, so a trusting interactive process is already established. I imagine that eventually, when integration is complete, these interactions between alters become what a normal person experiences as different personal viewpoints. For now, for me, in the midst of the integration process, it resembles a town meeting, with clear leaders and an agenda.

My initial idea was to line everyone up by age and time of creation, and have the older convey the knowledge he or she has to the next younger. For example: let's say we direct our attention to one of my child alters, Lindy, who is about 5 to 7. We can identify the alter created next after her, Jenny, and find out what event triggered the creation of the new alter. Generally, in such a situation, Jenny

will know Lindy's story already, but Lindy will not know Jenny's. We can ask Jenny to teach Lindy, to share Jenny's story and assist Lindy in learning, choosing, and growing.

Having attempted this process, the initial problem was that it is cumbersome and time consuming (albeit very appealing to the more obsessive-compulsive within the system). And all the alters were resistant to or unable to comprehend the process, especially the babies. I could only go so far back down the line with this method. Most importantly, while logical, this process in practice just did not feel right to anyone.

So I discover that I have the right procedure but the wrong idea. Each alter is a separate entity, and by his or her very nature, not able to grow past the age of its creation. This is the whole definition of multiplicity. I was attempting to turn lead to gold, or apples to oranges.

I discovered that it is much more practical to promote the connections between alters without attempting to grow them up. Thus I can still line them up in order of creation, but rather than have the next oldest attempt to force the last to mature, I can have each offer information for the purpose of creating a chain, with sized beads strung onto a thread of common understanding, a golden chain that unites them all together. This chain is the whole truth, the real story, told from beginning to end, unedited and unchanged. Like an epic poem, it has a beginning, a middle, and an end, and each word and line is important in its own place. Thus we create a necklace of truth and fasten it upon the body of the host, who can wear it as a rosary of strength and power. And like a normal adult looking back on a normal childhood, the memories are there in order, and a coherent life can emerge.

School of Thought

By Brenda

As I have just completed my first year in therapy, I have many issues to contend with. As all of us know, being sexually abused as children (incest) we are all dealing with or have dealt with DID. We all know how extremely difficult the measures we take to change our lives. We are not to blame but find it hard to make ourselves believe this. I believe the patterns are similar for us.

We carry parts of ourselves with us throughout our lives to survive. In order to survive, we tend to block anything which seems to violate us. Sometimes great spans of our lives have vanished. Gone. Nothing to retrieve. When... suddenly it hits you. You can no longer depend on old patterns as they seem to be more of a problem. Something is wrong. What?

This is when it's time to seek professional help. Learning you have DID can be distressing until you can come to terms having this disorder. My therapist has worked very hard with me. I know it is distressing to him also.

Gep has given me many thoughts to work on to change my life. In my thoughts, I have decided to go to school. Most of my school years are banished from my mind. Being 46 I cannot go to high school. Besides, I have a high school degree and completed high school in three years. How I did this, I do not know. I have saved my report cards to look at so I know.

This past fall, I enrolled into a local college. I was very nervous yet

excited to be going. I even had to get my immunization shots updated. As the time grew nearer, I had thoughts of not going. Maybe I would fail. Maybe it wouldn't be worth my time. But deep inside, I wanted to see what school was like. So I pushed myself to go. I only took two courses, as I hold a full time job and did not want to over-do it. I decided to go along with my place of employment and major in Financial Services. I took a Math course on campus and Financial Accounting on-line.

Math was such a fun course. The professor was great and even had a good sense of humor. We had to work in small groups. I had a wonderful group, with which I still keep in contact. We even had to do algebra, which I do not believe I ever did. I never missed a day for fear I would miss something.

I did find it hard to stay with the class. They would be doing one thing and I would be doing something totally different. They would sometimes look at me funny and make smart remarks. I can remember the professor saying once to me "Are you with us today?" It certainly got my attention but still, my mind would wander. I knew they had no idea of my problem, so I tried to brush it off.

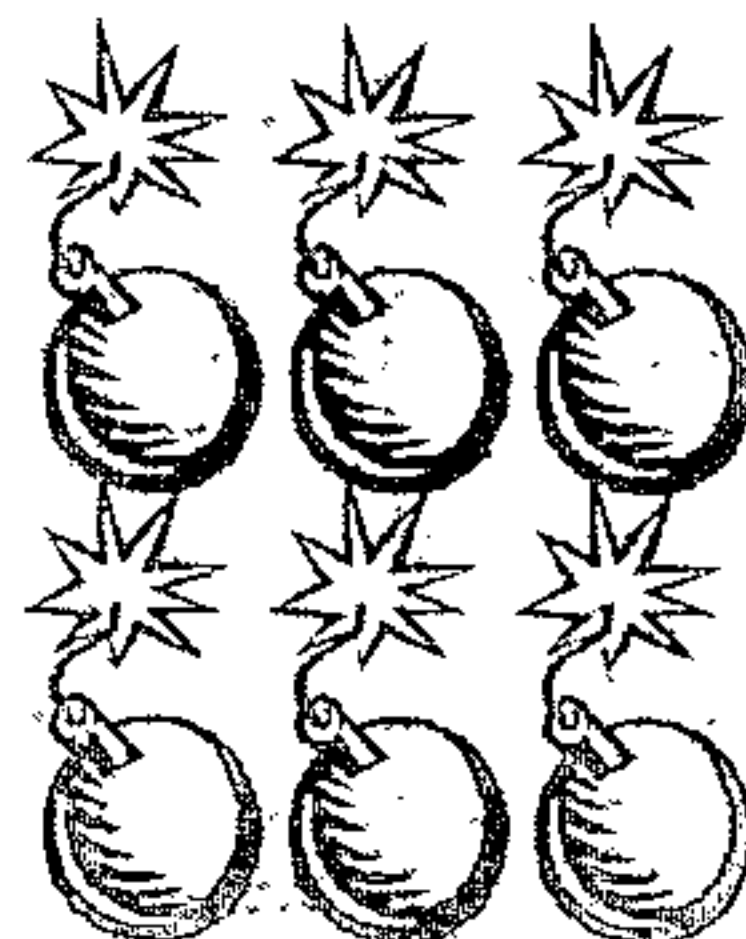
Tests were another issue. I had asked the professor to give the tests last so that I could take my time and not feel rushed. I was sure to take my medication before a test as not to panic. I did receive an 87 on one test, but most were 100's or high

90's. My final grade for this course was an A. I guess I did ok with this class and felt a great sense of accomplishment.

Accounting was another issue. I have learned, never ever take accounting on-line. I found this course very difficult. I even went to the professor for extra help. I knew I was struggling with this class, but I was again blessed I had a wonderful professor who used his time to help me. I worked everyday on this course. I didn't think I had a prayer to make a good grade. My therapist reminded me I was taking courses to see what school was like. These were nothing I HAD to do. I didn't need it for my job. So I just had to do the best I could. Final grade: B-. Totally surprised with the grade, I almost cried. When I look back, I guess my work was not all that bad. Just not perfect. A flaw in all of us to be perfect. I need to work on this more.

As the next session will soon be approaching, I will again attempt to continue my education. Again, I am excited and nervous. I will be taking Marketing, QB Methods and General Psychology. Why the Psychology class?... just because. I want to that's why! Going to school gives me a sense of accomplishment. I love learning, interacting with other students and most of all, lets me know I have choices. This is what I choose to do and love it. I feel a sense of self worth which is something I have never felt before. It is a wonderful feeling.... Thanks Gep for all your help!

MV



Land
Minds

Dissociative Identity Disorder from the Outside In

By Mariel P.

The following text is excerpted from a report made for a psychology class, discussing the author's view of the term Dissociative Identity Disorder

"I was never able to hang my hat on any one family tree. 'I know not who we are' is a good description of MPD." – MP

What is DID?

According to Dr. Colin Ross, Dissociative Identity Disorder, or DID is "a little girl imagining that the abuse is happening to someone else. The imaging is so intense and subjectively compelling, and is reinforced so many times by the ongoing trauma, that the created identities seem to take on a life of their own, though they are all parts of one person." In this way, the trauma is happening to someone else and she doesn't have to remember it.

Dissociation today is looked upon as a powerful coping mechanism. What would happen if it didn't exist? Would we, as children, survive traumatic ordeals? I don't think so. Would we just get over the memories, as some suggest? I'm not sure that's possible. I was so fortunate to find a therapist who was skilled in this area and provided me with the incentive to go on. With therapy, I am better understanding my multiplicity. I don't know if I'll fully appreciate the wonder of it all, could it be God's way of putting us into "infant" shock in order to cope during the actual abuse?

In our text, *Exploring Psychology*, by David Myers, it states that people have two or more personalities. The first is usually dull and restrained, and the second more impulsive and uninhibited. I believe these are misleading statements. From a psychological perspective, the ability to dissociate is a defense mechanism, which allows victims like myself to survive.

According to the DSM IV, DID is characterized by the presence of two or more distinct identities or personality states that recurrently take control of the individual's behavior, accompanied by an inability to recall important personal information that is too extensive to be explained by ordinary forgetfulness.

When processing information, people first encode, then store and lastly retrieve the information. DID makes retrieval very difficult and it has been suggested by researchers that the hippocampus plays an important role in the biological aspect of DID. The hippocampus, a processing center located in the brain's limbic system, helps process explicit memories for storage; names, images and events are stored into long-term memories. Some research indicates that when abuse happens early in life, the hippocampus is left underdeveloped or smaller than normal. This plays a distinct role in the retrieval of long-term memories.

For me, lapses in memory create some of the most frustrating, recurring symptoms of DID. There is a fear of the unknown—will I act in an intelligent manner? Will someone recognize me that I don't know and will I be able to convince them that I've known them all along? Being in a group of people, life for me is like Center Stage: always performing, always ready for the unexpected and always very tiring. After about two hours of being in a group, my surroundings become very vague and concentration becomes utterly impossible. Too many alters (alternate personalities) are trying to take executive control.

DID is the most severe chronic dissociative disorder, but with proper treatment, individuals can reshape their thought processes and live a more normal life. This is much easier said than done. It takes time, tears and patience to struggle through therapy; we always wonder where it will take us next and we feel frightened about what will turn up as new memories. The past years in therapy have been the longest and hardest years of my adult life, but they have also been the most gratifying. I only wish I had started sooner.

DID has three core categories: psychiatric, neurological and medical, with a multitude of sub-categories. According to Dr. Frank Putnam, symptom percentiles include the following: amnesia, the highest, at 98%; fugue episodes, at 55%; feelings of depersonalization, 53%; sleep

walking, 20%.

I would like to touch on the categories with which I've been diagnosed, perhaps giving insight to the inside rendition of a fascinating and necessary disorder. As an adult, I have suffered from self-mutilation, depression, sleep disorders, depersonalization, auditory and visual hallucinations, eating disorders, headaches, amnesia, time loss, trancing and out-of-body experiences.

There is a definite tendency toward self-abuse and even violence, both self-inflicted and outwardly directed. With self-inflicted abuse, cutting, slashing, burning, and clawing and suicidal behavior are common. Pain is never an issue. There is an absence of feeling, basically due to the endorphins, which are produced naturally by our bodies and act as a pain killer, much like morphine. The absence of pain is a conditioned response, learned and utilized over a period of a lifetime, even after the abuse has stopped. According to Dr. Colin Ross, self-destructive behavior is not a "cry for help" or an act of "attention seeking," but often is a sign of internal conflict and hostility. The victim battles with her internal world and her external environment simultaneously, keeping her in a constant state of confusion. Self-abuse can also be directed by "voices" instructing the patient to harm or to kill the body, then going back "in" to let the host suffer. She doesn't realize that if they host is killed, she also will die. It has been found that at least three-fourths of DID patients have made one or more serious suicide attempts during their lives, some more blatant than others.

Amnesia is prevalent among patients with DID and is so difficult for others to grasp. I drew what I felt was a blueprint of how my mind was compartmentalized. It consisted of seven separate boxes, each with a thick, black barrier (an "amnesiac barrier") separating it from the rest. There were no connecting pathways and each box contained its own resident alters. A major goal in therapy is to break down the barriers and start a dialogue between the alters. It's a long and arduous process.

Chipping away at those barriers takes time and patience, especially for the therapist.

Depression is a common thread that runs through each individual with DID. Unlike major depression, this type does not operate within a time frame. It's a constant state that we live in, year after year, until finally someone recognizes the symptom for what it is, diagnoses it and points us to proper help. Again, not everybody is going to be that fortunate. Many of us fall through the cracks and disappear.

Insomnia and other sleep disorders are also common with DID. A typical insomniac will have trouble falling asleep or staying asleep. With DID, the sleep disorder includes recurring nightmares and terrifying dreams just after falling asleep or before awakening. These more pronounced symptoms have been documented in careful studies of persons with post-traumatic stress syndrome.

Depersonalization of abuse often shows up as distortion in subsequent recall of the abuse. Memories may seem detached and dream-like, which makes you question if what you've remembered is actual or fabricated. Questions foremost in our minds are: "What if I'm making this whole thing up?" "Is that at all possible?" and "How could somebody do this to a child?" Depersonalizing the horror of the abuse helps by giving us time to internalize the memories and deal with them at an acceptable rate. My first big hurdle was accepting the multiplicity. The next hurdle was accepting the abuse, and that is still difficult, to this day. I continue to distance it in thoughts at times, but slowly, I'm beginning to understand the complexity of the disorder and how it fits together with my patterns of behavior.

Eating disorders are one of the hierarchically lower disorders within chronic trauma disorder, and are related to sexual abuse in general and DID in particular. Both anorexia nervosa and bulimia can occur. The distortion of the body image can be caused by the co-presence of an alter, bombarding the host with negative information about how she looks. We're not concerned about how we're viewed by those around us, but we are concerned about how our internal world views us. They are the ones who dictate our behaviors. The way I understand it, these are self-abusive alters sent to destroy the body and bring on a

slow and unknowing death by suicide. The meaning of suicide for me, in the general sense, did not apply to the complicated reasoning brought on by the eating disorder. Again, amnesia was at work, allowing one behavior to turn into a multitude of behaviors, more or less like a chain reaction. I can remember being absolutely thrilled when weighing less than 100 pounds. I'm 5'6" and at my lowest weight of 98 pounds, I was told I looked gaunt. The more I was told that, the more determined I was to keep losing. It was a long trip back, but I now weigh around 120 pounds and have outgrown my size two's and graduated to a size four or six.

Some DID people report visual hallucinations, seeing themselves as different people. There are times I see an older woman when passing by a mirror. She's very old, with short grey hair and hunched over slightly. She doesn't look like me, but I'm the only person standing in front of the mirror. My immediate inclination is to move away from the mirror and avoid mirrors as much as possible. This type of hallucination also allows us to "see" our alter personalities as separate people existing outside our bodies.

Some patients can look down from above and view themselves as if watching on a moving screen. These out-of-body experiences may show violent images.

Auditory hallucinations typically include voices that berate and belittle the patient or command them to harm the body in some way. Other patients hear crying, screaming or laughter. My experiences have been to hear an infant crying and screaming constantly through the day, and calling out "Mama!" It can give you a headache just listening to that, day in and day out. I suffer headaches quite frequently, due to the battles that rage within my head. As a patient of DID there never seems to be a "quiet time" or even time away from our "reality." Given this scenario, substance abuse is understandable, in my opinion.

Switching of alters is vital to the functioning of a DID patient. In switching, a child suffering an abuse is able to take what's happening and give it to an alter that has been created to take that particular abuse. It only takes the abuse that it has been created for. We also create alters out of sheer anxiety, ready and willing to switch on cue. It's automatic for

us to switch personalities without knowing it. I've often been left with my foot hanging from my mouth, and my only recourse is to cover it up with a big smile and an "Oh, is that right?" confusing everyone, including myself. Then I excuse myself and head for the nearest exit.

Personally, I started therapy for what seemed a "small" problem, several years ago. After considerable testing, I was finally told that I was dissociative. My first reaction was one of shock and embarrassment. I felt dirty, ugly and repulsed by the diagnosis and I can remember being very confused by all that was uncovered. It took a while for things to calm down and for me to take in what was happening. It felt like I existed to survive for just another minute. I didn't remember what I was supposed to remember; when I did, I forgot to remember what it was that I forgot.

Confusing, isn't it? I lived in the mind of a recluse, never letting on that I had no idea of what was going on around me. I dared not say a word, or I'd give myself away. Silence was always there, but silencing the pain cost me a lot.

My abuse started early in life, and my mother was my abuser, not my father. She left us when I was four-and-one-half, not to be seen again until I was in college. By the time I was five, my father had brought home a new "mommy". I don't remember much of my childhood after that. I remember making the decision to leave, to go where I was mentally safe. My world was my own and I did not want to share it with a soul. It was hard enough to share it with all those people inside.

You know, being a multiple is like having all the company you can stand, but nobody goes home. There's only one word to describe it—exhausting!

I continue in therapy and don't know how much longer I'll be there. I was glad to hear that it's not imperative that alters are blended together or that full integration has to happen. I feel that my alters have been with me a very long time and I don't necessarily want to part with them. I'll make sure that whoever wants to hang around can and will, until they want to integrate and become part of a whole.

Secrets

Secrets shuddered me,
 stuttered me
 Always beyond my reach
 Someone knows,
 just like a teakettle blows
 From warm to hot,
 to bubble to boil
 from steam to scream.
 The Secret shears me,
 cuts me to shreds.
 "We" are left
 picking up your threads and darning,
 sewing, twining, mending and
 pulling pieces together again.
 NOT the same,
 never the same—
 just a worn, tattered, hobbled
 together version of myself.
 No holes in my head
 from Mt. St. Helen's ash spread;
 No lava pouring from my hands
 you see:
 No plumes of fire
 coming from my shining hair
 No danger of burning steam
 flowing from my mouth:
 Face not red, chest not heaving
 from this mountain's dread.
 NOT an actual explosion SEEN.
 NOT a bursting of eardrums BLED.
 NO fires flashing eyes to BEHOLD.
 NOT a scintilla of lava
 from hands POURED.

Yet, they are all there inside of me,
 feeling what can't be seen,
 heard or felt by you.
 The pulsing fuse of explosion
 expands, demands so much of me.
 I shake, burning in a thrashing
 sandstorm
 as the teakettle has tumbled
 and boiled.
 I write, defusing some pressure
 as a teakettle is removed from heat.
 I talk, releasing steam
 as a teakettle's spout is opened.
 I pray, letting heat flow
 as the tea is poured.
 I share, scattering the storms about
 me
 as I share my bounties of tea.
 I cry, replacing my fears with cleansing
 tears
 as I stir my teas; enhancing the tastes.
 And sometimes, I can just sit back
 and enjoy
 my delicious cup of tea;
 relaxing with my friends or
 alone reading a good book.
 Then I don't explode.
 I'm not so overwhelmed.
 I'm not so frightened.
 I'm not so alone.
 I don't feel so chaotic
 I Survive Another Day.

By LJK

MV

MV

Research Project Help Needed!

Dear Friends,

I will be presenting a paper on Work and Disability topics this fall at ISSD's conference. I'm looking for input from people who have received Social Security Disability payments, but are ready to move back into the workforce, or who have completed the transition back to work.

I am also interested in the experience of qualifying for Disability...how you decided it was the best course for you, what the application process was like, and what you see as your future.

If you are willing to share your experience (anonymously, of course) please contact me by email at LynnW@manyvoicespress.com, phone: (513)751-8020, or drop me a note at PO Box 2639, Cincinnati, OH 45201.

If an interview is appropriate, I'll call YOU (just leave me your # and best times to call) to save you the long-distance charges.

If you know people who don't subscribe, but might be good candidates for surveys or an interview, please let me know.

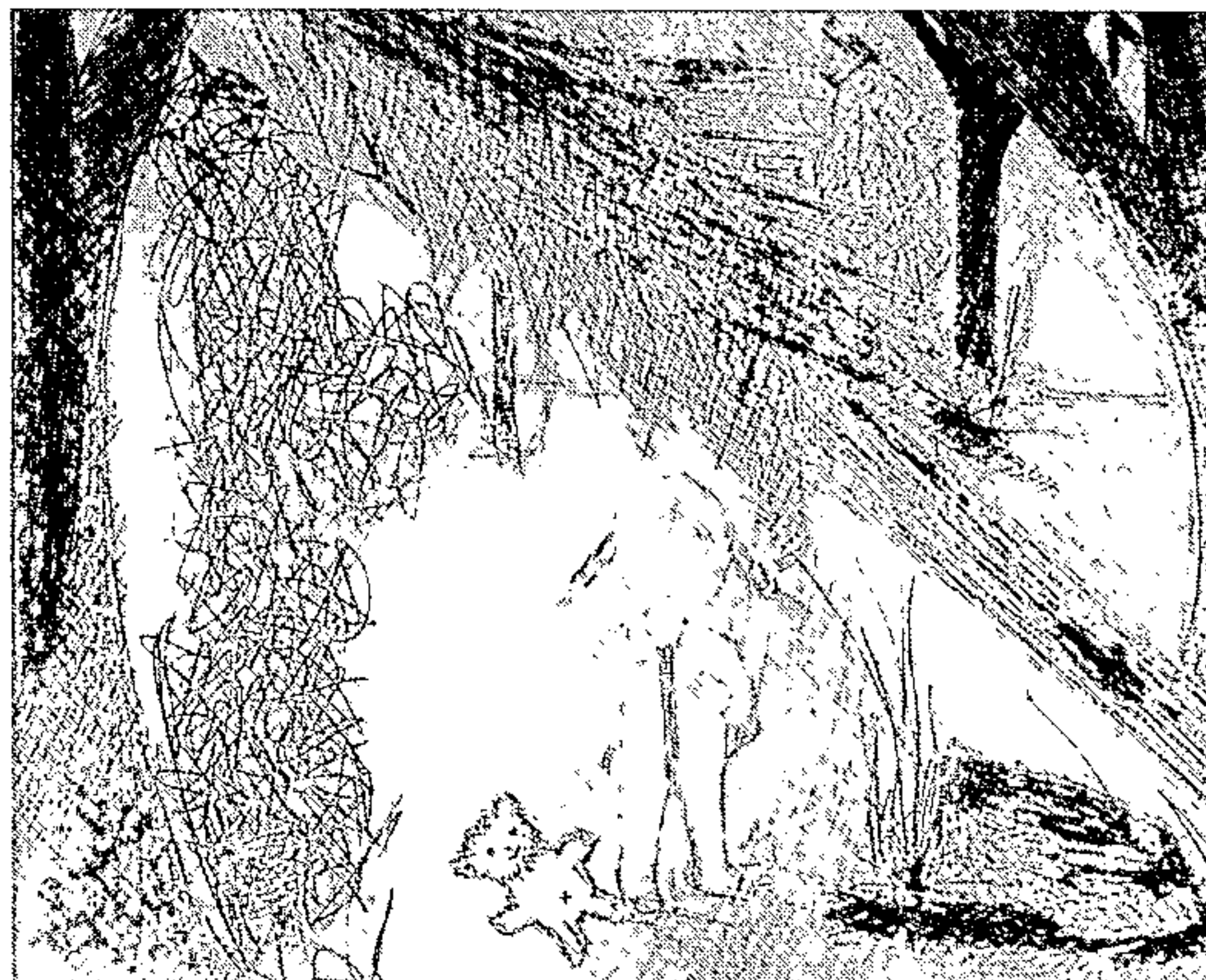
Thanks again, so much!

Lynn W., Editor

MORE ON FEAR

I believe fear has become my closest companion. I have learned to look it in the face and accept it as a big part of my past. It still haunts me today. I can only hope that I will find out through the Many Voices publication that several others struggle with unrelenting fear. My only hope was in giving fear to God and studying scriptures daily which addressed fear. I literally carried note cards to bed with me and in my automobile which had verses written on them about how God protects us when we are afraid

By SS



Hilary T.

Once in a While and Sometimes

Sometimes
I feel like a child
sorrow-filled eyes
leaking tears
Understanding only
that love and anger
are interchangeable.

Once in a while
I feel like a child
asking questions
about lady bugs
stars
how clocks work
Believing in
a Santa Claus god
holding love in his hands.

Sometimes
I feel like a child
waiting for footsteps on the stairs
choking on Old Spice
Living in
a grown-up world.
Old at seven.

Once in a while
I feel like a child
running with the fall wind
toward hot dogs and toasted

marshmallows
Embracing dancing leaves and
all that is good.

Sometimes
I feel like a grown-up child
fear filled eyes
reflecting only adult sadness
Remembering
batterings of a childhood spirit
betrayal of her soul.

Once in a while
I feel like a grown-up child
inhaling deeply, fragrant summer air
relishing a scoop of chocolate ice
cream
with restraint.
Living in
the absolute beauty of the moment.

More often now
I feel like a woman
embracing all
the happy, sad, cowering, bouncing
little girls and grown-up children
Free at last
to honor them all.

By Hannah D. MV



Remembering... The Nature of Recovery

I press forward
I stumble back

I see clear
I am blind

I touch truth
I grasp air

Details flood my mind
All scraps of the past
evade me

By N & M

MV

BOOKS

Beyond Trauma: Conversations on Traumatic Incident Reduction

Edited by Victor R. Volkman ©2004
Published by Loving Healing Press, 5145
Pontiac Trail, Ann Arbor, MI 48105.
www.LovingHealing.com 286 pgs plus
index \$21.95 US, \$28.95 CAN Paperback.

This encyclopedic book is essentially a
testimonial for the technique of Traumatic
Incident Reduction, or TIR. It includes
numerous interviews with therapists who
have utilized the desensitizing technique,
developed by Frank Gerbode, M.D., the
former Director of the Institute for
Research in Metapsychology. A number of
traumatic events treated by this method
are described, including automobile
accidents (often those resulting in a loved-
one's death), fires, and incidents such as
the 9/11 attack on the Pentagon and the
Oklahoma City bombing. There was little
mention of TIR treatment for long-term,

chronic abuse in these pages. The actual
treatment descriptions are brief, in
comparison to the praise of TIR, which is
extensive. TIR may be a fine therapeutic
technique, but this book oversells it, in my
opinion.

Biting the Hand that Starves You: Inspiring Resistance to Anorexia/Bulimia

By Richard Maisel, David Epston and Ali
Borden. © 2004 Published by WW
Norton, NY www.wwnorton.com \$35.00
297 pgs. Hardback.

In an innovative approach to the
treatment of eating disorders, this book
describes anorexia/bulimia as a
personification, a character, not a
condition. (This would fit well with
dissociative clients!) They strive to
externalize the "voice" of a/b from the
individual who is suffering from its results.
For example "How does a/b compel the

person to adopt these practices. What
might be its intention toward the person?
What tactics and strategies does it
employ? What support does it receive
from the larger culture? What kinds of
relationships with others does a/b
encourage, and what kind of relationships
encourage a/b?" After answering such
questions, the patient is encouraged to
dialogue with this anorexic voice. Some
write letters of outrage (included in the
text)

Viewing a/b as an external force
supported by the current culture, rather
than a deficiency of the individual, her/his
parents or as a disease, opens the path to
alternative ways of dealing with the
problem.

This book is certainly worth reading by
those treating or suffering from
anorexia/bulimia

By Lynn W

MV

THANK YOU!

Your sharing helps ALL of us! MV needs ARTICLES (short, long and inbetween) and ARTWORK--horizontal, vertical, cartoons and small bits that fit in small places. (You can send poems too, of course, but we need the other stuff more.)

PLEASE HELP! WE NEED YOUR WONDERFUL WORK!

August 2005

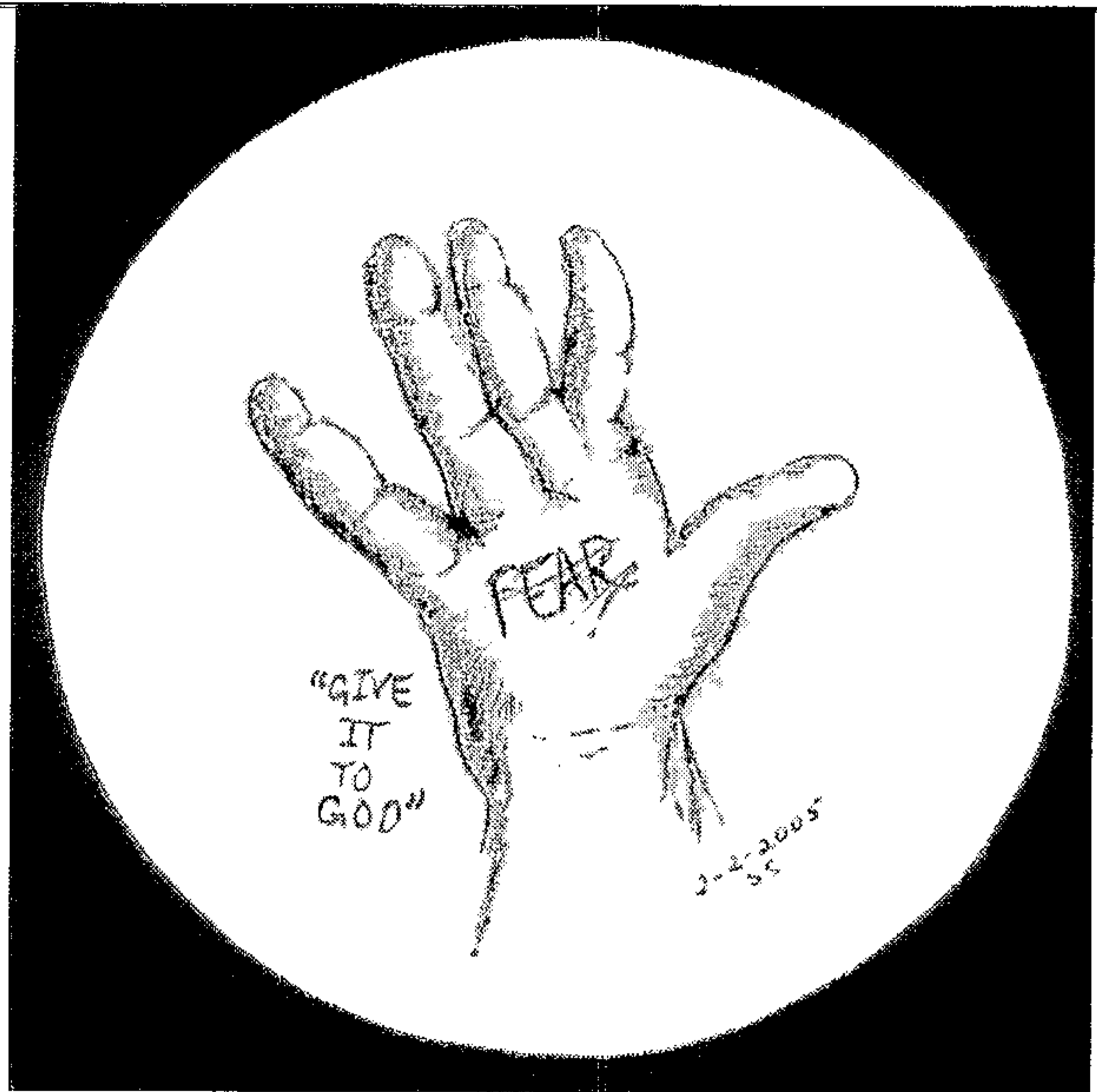
Best ways to communicate with yourself, your therapist, your friends, strangers. Who should you tell and what do you tell them? Humorous encounters. ART: Cartoons about communication

DEADLINE: June 1, 2005.

October 2005

Outpatient or Inpatient? Appropriate treatment settings for Dissociative Disorders and PTSD. ART: Best therapy for you.

DEADLINE: August 1, 2005.



Share with us!

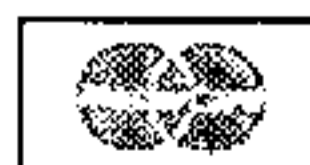
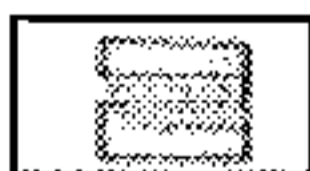
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