

December 2009

# RAINBOW'S END

Volume 10

Issue 2

**Support & Information Newsletter of FIRST PERSON PLURAL**  
the survivor-led association for survivors of trauma and abuse who experience  
dissociative distress, and for their family, friends and professional allies

*Registered Charity No: 1109464*

## CONTENTS

Editorial statement.....	2
Editor's note.....	2
Book review.....	3
Chair's Report.....	3
Response to 'Therapy is'.....	5
PODS, partner of dissociative survivors.....	6
Letter re: Cutting Edge programme.....	6
Response to article from Bob...7	
Personal thoughts on integration.....	7
The 'I' word.....	8
Interact, TAG journal.....	9
Play Centre.....	10
Reflections on NHS.....	12
Recipe Ideas.....	13
CanDID, reflections on training in York.....	15
Poetry and Artwork.....	15



For better mental health

The Mind booklet about  
Dissociation has been updated  
and re-released. FPP has been  
involved with thanks to Kathryn  
for writing the content. It is well  
worth reading and can be  
found online at the contact  
below.

They can be ordered online and  
you can help others with  
Dissociative Distress by  
encouraging your local doctor's  
surgery, health centres,  
libraries etc to stock and display  
these informative booklets.

[www.mind.org.uk/help/diagnoses  
\\_and\\_conditions/dissociative\\_dis  
orders](http://www.mind.org.uk/help/diagnoses_and_conditions/dissociative_disorders)

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While every effort will be made to keep contributions complete and unedited we reserve the right to make amendments when necessary. Decisions about the inclusion and amendment of contributions are made by the editor and are final. Contributions do not necessarily reflect the views and opinions of First Person Plural, members of the executive committee or the editor. Inclusion of any reference to an individual or organisational resource is not a recommendation. The contents of this newsletter are for information and support purposes only. The newsletter is not a substitute for individual therapy or professional supervision. It is an addition to, not a replacement for, other networks of support.

**Contributions can be sent in at anytime** articles; stories; resources; book reviews; tips; poetry; personal experiences; written articles and poems are good; brief snippets & artwork are desperately needed. It would help if you can send your contribution electronically as an email attachment. This saves times and resources but handwritten and typed material sent by post will continue to be accepted. **Please send to the new editorial email address** [newsletter@firstpersonplural.org.uk](mailto:newsletter@firstpersonplural.org.uk)

Originals will only be returned if a suitable stamped addressed envelope is enclosed

**IMPORTANT:-** When sending material for publication please clearly mark "FOR PUBLICATION" and say what name or pseudonym you wish to use.

**ATTENTION**

Material in this newsletter may trigger painful memories and feelings.  
Read with caution and appropriate support if necessary

**Editor's Note**

Hello to Everyone. Another year has nearly passed, another passage of time for healing. For some of us it will have held difficult times as well as stronger moments. This issue of Rainbow's End comes just before the seasonal holiday which can hold mixed feelings for so many. I hope that in the newsletter there will be something for all, however small, that will offer strength and courage and lessen the feelings of isolation that being dissociative can bring. Best wishes to all our readers, *Bunchy*

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'No person is your friend who demands your silence, or denies your right to grow.'

*Alice Walker*



Book Review: **“The Time Traveller’s Wife”** *By All of Us*

I bought this book a few months ago after reading Oriel’s review of it and I have just finished reading it. The first time of reading it I only got into a few pages before I had to put it away as I found it very confusing and realised that it was triggering a lot of switching amongst our selves. Henry’s experience of feeling that he was going to travel but could do nothing about it felt too familiar and we found it very uncomfortable to read.

Then, a few weeks ago, we saw that the book has been made into a film so we thought it must be a good book to read, so we gave it another go. It was completely believable and it made me realise the difficulties involved in being part of a couple living with DID. It has to be just as difficult for the partner living with a person with DID and I envy the fact that Henry could tell Clare what his problems were, and they could face the difficulties together.

We shall certainly buy the DVD when it becomes available, but I have a suspicion it won’t have quite the same effect as reading the book.

### Chair’s Report

Dear Members

I would like to share a little about my feelings towards FPP. Over the years, it has been a privilege and a pleasure to be one of the main people involved in its development. It has also been incredibly challenging. I was in the very early stages of therapy eleven years ago and for those of you who live with being DID you will have an understanding of how difficult this is from every single aspect of your life. I am saying this because I think others sometimes forget those running FPP know very well, firsthand how hard it is. Kathryn and my main aims at that stage was to make sure people who were isolated through being DID would know there were others out there who could relate to their situation. For those we reach I think this remains the most important part of our work.

I also think that being a survivor led organisation is what makes us unique. The complexities that we all live with and manage somehow even though it doesn’t always feel like it and the commonality of many of our extreme, and that word doesn’t do justice to what I am trying to say, childhoods and for many well into adulthood lives makes it incredible that we are here at all.

I appreciate that dissociation saved us but I am beginning to feel that not enough respect is paid to how vulnerable many of us are at all times and ironically increasingly so as our dissociation begins to be less structured and absolute. The very nature of being fine one minute and not the next makes it so complicated and for most people who only see us at our managing stage and have absolutely no idea how we live.

The work achieved by FPP is done by people who do live with extreme DID and do spend a good part of their lives not functioning very well. They somehow manage as indeed do most people with DID to get hold of the good bits in any day and making the most of them doing ordinary things as you never know when you might get the next peaceful hour where the body and head are functioning together.

I want every member of FPP to feel this is their organisation and that we, hopefully, represent them in what we are doing. We are not and in my opinion do not want to become an organisation that you feel you have little in common with, yet again being done to.

## Volume 10, Issue 2

I read articles in publications that deal with trauma and attachment and they are often interesting, can be very enlightening and have helped me a lot on my journey, there is an incredible need for these to be out there for people working in the field and for people with first hand experience.

However, FPP is different and tries to meet different needs.

We are a forum where you can tentatively express what is happening to you, your hopes, fears and confusion; we really appreciate art contributions and poetry and you know it will be read by others who understand the courage it takes to not only write it but then risk others seeing it.

What I hope FPP captures, can continue to maintain and develop is the more personal link with their membership. I have struggled recently as to where we are going, what do you want, are we giving you enough. I suppose I have felt very guilty that when people offer to help I do not have an answer because we do want to grow, but what does that mean? The one thing we all know about is DID. Maybe at this time if everyone who would like to be more involved thinks about where they could maybe talk to people about what it is like for them to live with DID. Talk to two or three people at a day centre or a couple of members of your mental health team or some other group of people.

FPP, which at this time Kathryn and I are responsible for, do have a training programme and often people say they would like to get involved with this aspect of our work. For many reasons we are unable to expand this area now.

What those who are in a place and want to be involved can do is try to find an opening locally to them and talk to people. Your experience is invaluable and you do not need to have a training package to do it. What I feel people need to know is how DID affects us in our day-to-day lives and what helps and what does not. What happened to us is nobody's business but our own. Also, do tell them about FPP. I always give a lot of thought as to what I want a certain group of people to know by the time I have finished talking and then jot down reminders. I also make it very clear at the start that I will say if anything makes me feel uncomfortable and everybody seems to respect this. It is a wonderful opportunity to take a control that is appropriate and can feel very empowering. I spend a lot of time just before meeting a group saying 'Feel the fear and do it anyway'; it usually works because we are learning this is normal fear.

I know this is scary but that is what I am trying to do. I have no more qualifications and probably considerably, less than many of you, I feel terrified every time I do this on my own, locally, I get the doubters that make me think never again but I do it again because I want things to change for us all. The other thing you can do is download the leaflets off the website and put them in the local MIND office and any other outlets you can think of. Several committee members are doing these things and it does feel empowering. I have long given up on big changes and work on the drip, drip principle and very slowly, you hear of things changing. If you do anything, please let us know because we will possibly have a little insight of what it has meant to you and either celebrate or commiserate with you.

The voice of personal experience is also powerful as we all know by the articles appearing in Rainbows End. I know some people have felt unsure about writing for the newsletter but please do. We need fresh views on things, different opinions from those already printed. We want this newsletter to be for our membership and to feel it is theirs but we do also want to encourage professionals to read it, to learn firsthand about our everyday reality. It represents and appeals to many ages within our membership. I look back and cringe at my

English at times but if I kept waiting until things are better I would probably still not have put pen to paper. I use spell check but often have real problems constructing what I want to say. I miss out words as my brain fragments yet again, I struggle to get a sentence to make sense but often have to leave it knowing it is not quite right but the reader can hopefully grasp what I am trying to convey. For me this is what helps to make Rainbow's End our own and slightly muddled written bits are probably because we are DID, this is not an excuse but a very valid reason.

I think what I am trying to say is we value every member, this is your organisation and maybe rather than say what would you like me to do tell us what you would like to do. At this time we need your support as much as you probably need ours.

I hope you all have as peaceful a seasonal holiday as possible and maybe when it is very difficult feel metaphorically held by others who really do know what it is like

Best wishes  
Melanie (Chair of FPP)

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This is in response to 'Therapy is' on page 18 of volume 10 issue 1. I was going to call this a therapist's view, but it's not it **is my view, as a therapist.**

I am a therapist working in private practice, I consider myself very privileged, to be able to be apart of some one's life, on the inside. To create a holding, a safe and secure environment for self exploration, where we work to leave the pretence at my door, to have the option to pick all or part of it back up again when leaving, the clients choice. (for whatever reason, or reasons). My work differs with each and every individual who have the courage and who are brave enough to walk through my door. Not knowing where this session will lead them, or what they will experience this time. Respecting their choice, their determination and their dedication to see their journey through to the end, some times to the end of that day. Even at times when they don't really want to be there, wanting to hold where they are as what you know, can feel safer. No more changes or opening of hidden stuff, or other personalities of self. Then finding the strength to carry on....some how..... With an inner knowing that thing have to be better than this. Building a trust, that I am there for each and every client, Not judging, not making assumptions, but safe, secure caring, environment supporting the individuals journey. Getting things into the light, seeing them differently, removing the power from people, places, from events in the past. Joining together, or staying apart with more understanding, more internal dialogue, being more at ease with one self or selves. Why would I listen "to little old you," WHY WOULD I NOT Everyone is an equal, an individual worthy of respect and understanding, as this is your right.  
Christine



# PODS

*Partners of Dissociative Survivors*

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Hi! My name is Rob and I am both a trained counsellor and the husband of someone with DID. I have recently set up 'PODS' (Partners of Dissociative Survivors) as a parallel support group to FPP. At the moment we have a basic website ([www.tasc-online.org.uk/pods](http://www.tasc-online.org.uk/pods)) and are having our first Open Meeting on 21 November 2009 in Huntingdon, Cambridgeshire (the same venue as the last FPP Open Day). We are planning on publishing a regular newsletter and I am available for email and phone support for any partner who would like to contact me. The phone helpline is available each Wednesday from 6.00 pm to 8.00 pm on 07746 799221 but if you leave a message at another time, I can arrange to phone you back. I can also phone you back if you are phoning from a landline. My email address is [rob@pods.tasc-online.org.uk](mailto:rob@pods.tasc-online.org.uk).

I wrote an article "For Better, For Worse: Life as the Partner of a Dissociative Survivor" which was published in the September 2009 edition of *Interact*, the journal of the Trauma and Abuse Group (TAG). If you would like to read the article, let me know and I can email it or post it to you.

Please do pass on the PODS details to your partners and let them know that support is available for them too.

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Dear FPP newsletter,

I write because i am so very disappointed that the channel 4 documentary was axed. In fact i was crying in my house because how on earth can awareness ever reach the world if the people who make these programmes wont make them because the subject matter is 'too complicated'?? i was livid. I was one of the people who was telephoned and contacted and told my story on the phone and was hoping and waiting to hear further and never did? then i read in the newsletter that the programme was to be axed due to what i ask? DID is too complicated to put a documentary out on it or is it that the people who are making the programme feel inadequate themselves on how to put it together? I am so upset that this has not gone any further and no awareness was put out into the world.

People with DID are not responsible for people in the world who are 'ignorant' and dont know how to talk about it ,,the very fact that people were contacted and willing to talk about it to me is the 'programme'.

I wonder what they will make a programme about now perhaps Victoria Beckham's next thing she is doing? now that would really benefit the world. Catherine

By Angela – on behalf of All of Us

We would like to respond to the article in the last Newsletter from Bob. First of all, congratulations on having one of your paintings accepted for an exhibition.

We also have an “inside artist” called Kate. Last Christmas she painted a picture for my future daughter-in-law. This person was very pleased with her picture and asked “me” if I would sign it next time we visited. As I knew I had not actually painted it myself I felt I would be lying if I took the credit for it, so I took the bull by the horns and asked her if I could tell her the truth. She knows I have MPD but we have never actually talked about it before.

I told her that Kate had done the picture and she is 8 years old and then stood well back – emotionally. She said she would love Kate to sign her picture and said that she felt privileged, both that I had told her about one of “my people” and also, that we felt we could trust her with the information.

Like they say “small steps” and, sometimes, a lot of courage can bring about changes and acceptance.

## Integration

There are often a variety of thoughts on the subject of ‘integration’ through therapy for those with DID.

The articles below express the views of two FPP members.

We have been looking for a subject that can be discussed in the newsletter. Perhaps you have some comments on this topic you would like to send for publication?

## Personal thoughts on “Integration”.

by Diane

### Integration:

- Is not for everyone. A lot of people live happily with their dissociation without integrating.
- Cannot be forced on anyone. It’s your choice, no-one else’s. It’s worth all of your parts spending time communicating (however you do that) about what you want from therapy, in the short and the long-term; you can change your minds about it too.
- Will happen in its own time, if all the parts in your system really want that, and it’s right for you. I think it may be able to just happen naturally then. Hope so. But you can’t make it happen too early, until the time is right.
- Is probably a question of degree, anyway, and may feel different for different people.
- Is definitely **not** about losing any parts. You need them all.
- Is not about any one part dominating everyone else, either.
- Should make life better, and be about becoming **more**, not less.

The 'I' Word

On my recent travels I have met several people who are questioning what therapy does and their dissociated parts are very frightened that they will be killed off if they enter into it. In some cases this is causing a lot of self-harm as the battle rages.

Others tell me about being asked what their final goal is, do they want full or partial integration, probably not quite so directly but that is the message that is reverberating throughout their systems.

I feel very sorry that the use of the word integration is happening much too early in therapy and seems to create a barrier to any progress in the necessary client/therapist relationship. Until the last year or so I could not begin to imagine what integration might mean. I know many people experience two or more parts joining up, blending. I see that as those parts having done a lot of their trauma work that originally kept them separate and by joining forces they feel more complete.

We tried to integrate one part very early and succeeded but it was disastrous, nearly fatal. The whole felt she would have taken over as she was very dominant while at the same time very narrow in how she managed life. She also did not have the ability to grow and change as that would not have fitted her job description. We quickly separated out again and this was a very sad time for us as she had to be physically restrained so she did not take us all down and out. After that we never gave the subject any more thought, it just did not feel relevant to the work we were doing.

More recently it is on the agenda and it feels perfectly right for all of us. It came into the shared part of consciousness naturally. There is some sadness that little people will never be happily alive in a young body but after many years of time doing things they like there is a knowing that they are fine.

It has never been now lets think about integration. Very gradually it has felt more like why are we separate? I know I have written before about this but things are changing and evolving all the time. There is an internal sense that each and everyone will become a part of the whole, a very felt part not a loss but a gain. We all feel that we will share one blood supply, one brain, one heart and we will still be able to do all the things everyone has liked, eat all the things they have eaten. We will all be able to think about things but it will be a shared, more rounded thinking; it feels like from a more informed place.

None of this has been planned it is and continues to evolve as therapy allows us to deal with the most difficult part of our history.

For us if integration had been talked about earlier it would have been a pointless, academic exercise that would have frightened insiders witless. I would have tried to be the good girl and understand something that made no sense, sounds familiar from my childhood. Please do not worry or be frightened about parts being killed off, you won't be. IF and when the time is right for you it might feel better to become more of the whole or this may never be the way forward for you. I don't think final goals and integration need going near until everyone finds it is something that they want to look at, a natural evolution. Throughout therapy, even when it felt impossible it has also felt that we are going the right way. I think that is the best it could be for us. I also knew if it was wrong and learnt to say so. This is where my very slowly growing trust in my therapist has been paramount as he has held and shown me the bigger picture when I could only occasionally get a glimpse and he has also taken very seriously when it has felt wrong and indeed sometimes it was. It is so much more important to feel able to enter into therapy, building up a genuine trust with your therapist without having a hidden terror that some of you might die, that is too

awful to even think about and I am unable to see how therapy can achieve much if the handbrake is continuously pulled up very hard.

Over-time we have had a much more integrated way of being and slowly it becomes who we are. We have then been able to understand a little about the subject because we have felt aspects of it. How can anyone who has been severely fragmented from a few months old know what it may feel like to be less so until it actually happens. For me there was no template in the brain to go back to, we have had to make one from scratch and I feel that has been possible because we have over many years developed a secure enough base that I can then move out from as one but also as many. Melanie



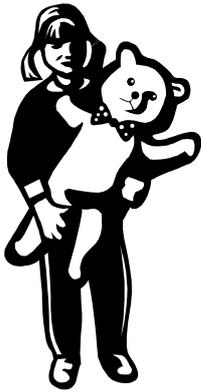
TAG (Trauma and Abuse Group) is a charity that works to raise awareness of dissociation and trauma and to support therapists working in this field. It is open to therapists, other professionals, survivors, partners and allies of survivors – in fact pretty much everyone! Membership is currently £15.00 per year and includes a bi-monthly e-newsletter and two copies per year of “Interact”, the TAG journal / magazine.

“Interact” is also available on its own for £3.50 inc P&P and carries many articles of interest to survivors. The editorial remit ensures that each edition is relevant to as wide an audience as possible, and so survivors and their allies are always supported. In the latest edition, there is an article by Rob (who runs ‘PODS’ – ‘Partners of Dissociative Survivors’), “For Better or Worse: Life as the Partner of a Dissociative Survivor”; a report of the TAG conference by Carolyn Spring (a DID survivor) entitled “Different, Normal, Surviving, Outraged”; and also a report on the same conference by FPP’s very own Oriel! There is also a helpful article on “Shame and the Legacy of False Responsibility” by another survivor.

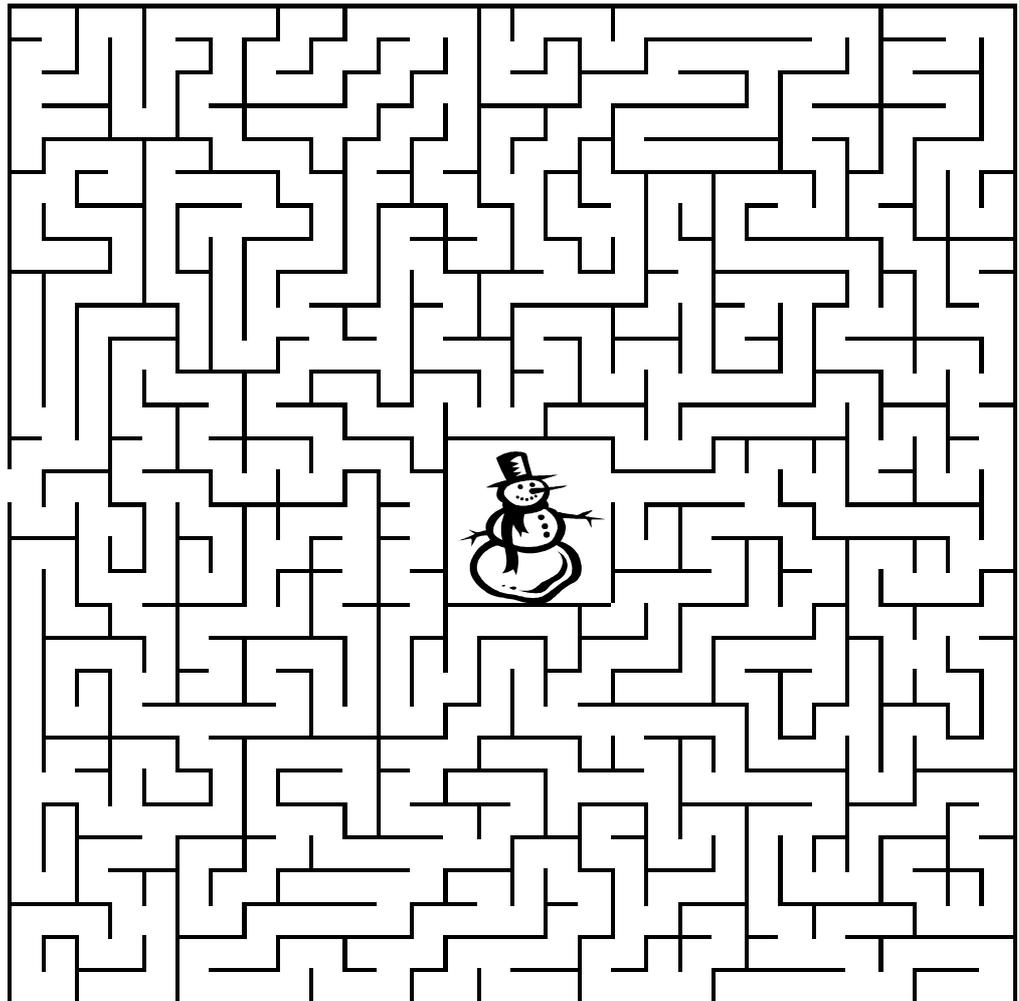
To order copies of Interact, please email [newslettereditor@tag-uk.net](mailto:newslettereditor@tag-uk.net) for details of how to order. Alternatively, the TASC website at [www.tasc-online.org.uk](http://www.tasc-online.org.uk) will be carrying details, as will the PODS website at [www.tasc-online.org.uk/pods](http://www.tasc-online.org.uk/pods).

“Interact” is useful not just to read as a survivor, but also to give out to friends and family, CPN’s, GP’s – anyone in fact that you know who needs to take DID and trauma more seriously.

# PLAY CENTRE



Can you  
find the  
way to the  
snowman?



Q. Where does a snowman keep his money?

A. In a snow bank.

Q. What do you call a snowman in the summer?

A. A puddle!

Q. What do snowmen eat for breakfast?

A. Frosted Flakes.



Pictures to colour



**Q.** What's a good holiday tip?  
**A.** *Never catch snowflakes with your tongue until all the birds have gone south for the winter.*



Find the wintery words in the word search

Q U A N F Q X T D F M R Q C T  
 D R V M O R I S V L M S B Q M  
 N D W S A I C A A G R E J W I  
 D I J A N M W V Z B D T Z S N  
 Z W B X J O H X G G F A Y E R  
 T Q T O B Q W L I R X K L L K  
 L J M Z R U L M O J U S L I A  
 A C E Q G A M Z A Y S E O C B  
 E F X T B A E W M N D C H H V  
 U D T W K N M I H Z B I Z M I  
 H C O L D M R N A M J W F X J  
 D N R A U B R T X T L I X E C  
 S D A X H B Z E U N X B C W H  
 E G D E L S M R W G C R R E X  
 S L I P P E R Y H T X G J M D

**COLD**  
**FROZEN**  
**HOLLY**  
**ICE**  
**ICESKATES**  
**ROBIN**  
**SLEDGE**  
**SLIPPERY**  
**SNOW**  
**SNOWBALL**  
**SNOWMAN**  
**WINTER**

## **Volume 10, Issue 2**

### **Reflections on Personal Experiences with the National Health Service.**

(In response to Rosie, Little Rosie, Calesta, Lauren and Joanne, in Rainbow's End volume 10, number 1).

We sympathise totally with the anger, frustration and stress felt by Rosie, Little Rosie, Calesta, Lauren and Joanne, as we are having a lot of hospital experience for physical medical conditions lately. It seems to us, that mental and physical health are often kept in two separate boxes, and even people with two purely medical conditions can find it hard to get co-ordinated (never mind holistic) treatment. Sounds dissociative to us! However, there is plenty of research now showing the links between mental and physical health, and some places do a lot better than others.

Unfortunately, we have found that some hospital departments are very old-fashioned and controlling of their patients. They don't seem to have heard of the words 'collaboration', 'empowerment' or 'personal'. They can treat you like a child, not an adult, and that is particularly bad for those of us whose childhood was not happy. We found this particularly distressing and confusing, until we worked out what was going on, and it did have a negative impact on our mental health. We have had nightmares that we haven't had for years, since going into hospital.

If the NHS could get it right for people with mental health issues, it would benefit everyone. We don't think it would take a lot of resources, only different attitudes. TLC, kindness and everyday understanding can go a long way!

We would like to reassure Rosie, Little Rosie, Calesta, Lauren and Joanne that they did the right thing in expressing their concerns to their doctor, and we are very sorry that he let them down. We have some suggestions and "tips" for people with dissociative conditions going to the NHS, learnt from our experience:

:

- When going for appointments, be prepared for long waits, although they don't always happen. Take advantage of this opportunity to do some reading, crosswords, colouring, whatever you like, to turn it into a more positive experience.
- Take back some control: Take something nice and comforting with you e.g. little treats like sweeties, a small teddy that can sit discreetly in your pocket, a 'lucky' badge or brooch. Get up and wander around. Don't sit in the seat you are pointed to, sit in a different one. Talk to other patients, if they look friendly. Pass the sweeties around.
- Take a trusted friend with you. Work out in advance what your concerns are, what you want to tell them, where you stand on certain issues, what you want to ask; write it down, and use your list! Don't be afraid to list the smallest concern: if it's a worry for you, it's a worry. Share this with your friend, so they can speak for you, if you get very stressy. Have a pre-agreed signal, so you can indicate if you want them to take over. Mental health providers often

have advocacy services that can perform this role, but I couldn't say what they are like.

- Do whatever you need to, so you can stay calm. Anxiety is catching, and you need your NHS professionals to be calm too. Greeting your consultant with a hand-shake, a "good-morning" and a smile will make you both feel better. Remind yourselves that, there are all sorts of people working in the NHS, as there are everywhere, but most of them actually do want to be helpful. (It is often staff shortages that stops them from delivering the kind of care they would like to be able to deliver).
- People in the NHS may not always know anything about mental health conditions, but they do know about the medical procedures they use. Ask to talk through what will happen in advance with the medical staff involved. They may well be able to reassure you, and offer practical ways around the problem e.g. having a look at the treatment room before-hand. A friend of mine was even offered a video to watch of the quadruple bypass heart operation he was going to undergo (he turned the offer down)!
- Ask for them to contact your counsellor or therapist, if you are in therapy, with their agreement. Ask for a different G.P. Ask for a second opinion, if you are unhappy with the one you are given. Ask! Ask! Ask! You don't lose out by it.
- You don't have to disclose full details of the nature of your mental health issues, if you don't want to, just that you have mental health problems, and you would like to talk through your worries and the implications of this in view of the medical procedure being offered. A specialist nurse, or clinical psychologist could do this.
- Use your personal support network, any support groups. Once you start talking about your experience, you'll find other people often have their own to share, and everyone starts opening up. It really can help. Going for any medical procedure is very scary, especially if you've not had anything before, and extra especially if you are dissociative, so be extra especially good to yourself!

Diane Lili Rebecca

### **Tips and Recipe Ideas** **By Oriel**

We all know how hard it is to eat well in the difficult times, let alone start thinking about meal planning and cooking.

These are a couple of tips and recipe ideas that I have found are simple, fairly inexpensive and freeze well, so that in better times I can fill the freezer up and then use them in the hard times, and still get vegetables down me!

Firstly, jars of sauce (pasta sauce, Korma sauce etc.) are a godsend. They are fairly cheap, often on special offer in supermarkets, and keep in cupboards for ages. They can turn vegetables and odds and ends into decent meals quickly. I try and make sure I

## Volume 10, Issue 2

always have pasta and Korma sauce in my cupboards. Below are a couple of recipes I rely on. Most of the vegetables in them can be substituted for others depending on taste and what you have available. I am sure there are loads of variations.

Both of the dishes below go well with rice. Both brown and white rice freeze well, and defrost quickly in the microwave or in a steamer. For difficult times, when cooking rice is too much, most supermarkets now sell instant rice sachets, which can make a real difference to how easy a meal feels to prepare. They are available in wholemeal rice as well, for a healthier option. However, they get a bit pricey if used too often. Keep an eye open for offers on them too.

### **VEGETABLE AND HALLOUMI KORMA**

Although this takes around 30mins to prepare, it is almost impossible to go wrong, makes 5-6 portions and freezes very well.

#### **INGREDIENTS**

Olive Oil  
Two Large Onions  
Two Courgettes  
One red or yellow pepper  
One packet mushrooms  
One packet of Halloumi  
(low fat versions are available)  
One Jar Korma Sauce  
(low fat versions are available)

#### **METHOD**

Chop all the vegetables into large-ish chunks.  
Fry the onions in a wok or large sauce pan for 4-5 mins until tender.  
Add all the remaining vegetables and fry for a further 5 mins.  
Add the jar of korma sauce and reduce to simmer for 10 mins.  
Chop the Halloumi into chunks and add to the pan and simmer for a further 10 mins or until Halloumi begins to soften.

Serve with rice or Naan Bread.



### **AUBERGINE AND CHICKPEA BAKE** **Makes 4-5 portions**

#### **INGREDIENTS**

Two large onions  
Two aubergines  
Red Pepper  
One tin of chickpeas  
(cubed halloumi can be used instead!)  
One large jar of tomato-based pasta sauce

#### **METHOD**

Roughly chop the onions and place in a casserole dish or deep baking tray with a little olive oil.  
Chop the aubergines and pepper and add to the dish.  
Drain the chickpeas and empty the tin into the dish (or add halloumi).  
Pour over the jar of sauce.

Bake in the oven at 200 C or gas mark 6 for 40 mins stirring occasionally.

Serve with rice.  
Also goes well with mashed or baked potatoes, which can be baked alongside in the oven.

## CanDID Learning. 19 November 2009. Priory Centre, York.

As an interested layman of all things DID I had no idea what to expect on arriving in the Main Hall at the Priory Centre, York. The noise of silent activity greeted me, and a concentrated frown of 'working out all things projecting', was sent across the room too me, I was early. "To put it bluntly, would you give us 10 more minutes please....?" One of the people said. Fair enough, I thought, I know exactly what a struggle setting up your own lap top in a new environment with all the added extra's of putting out an informed seminar entails, and I left the room. Eventually people turned up, in total about 30 of us, I'd say we were a mixed bunch, that is, a mixed bunch of women, for there was only one man. Oh, and Tigger was there, sitting quietly, watching us all, for a friendly beanie, he was disconcerting.

We were given an introduction in to what Dissociation is, how many types of it there are and an excellent DVD "You're not crazy and you're not alone". I found it beneficial from the point of view of being able to hear several different descriptions from several different people, admiring their bravery at coming forward and trying to explain something as complicated as DID.

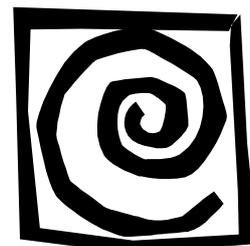
The group exercise where we all unknowingly became a different member of the same 'System' was particularly beneficial, each group set up to defend and argue for what they / one, wanted. The lovely young girl, desperate to stay at home, the army girl and the young man who held, oh so much. It was a moving and emotional yet ultimately fascinating exercise, and should be used far and wide. Then Kathryn, punctual and to the minute was reminding us all that this was an example of only one decision, that this process went on from morning to night and beyond, every single day, brought us back to the reality of coping with DID. In a word, exhausting. The important *learn* that I hope most took away from this is, *compromise*.

My admiration for both Kathryn and Melanie is huge. Their presence in the room encouraged us all, and in particular the brave ones, diagnosed DID, who openly told us. Amazing. Their (oh so) valuable insight and personal disclosures were powerful. These are the people the professionals should be listening too. We all know what horrors it takes to ensure DID. I would like to know what to do to help repair any damage done, resolve conflicts, sleep / not sleep, detach / attach, yes / no. Maybe it is these two who will canDIDly lead the way.

## Art Work and Poetry

### Poems, drawings, artwork

Sharing can help with the feelings of 'aloneness'. Send your work to be included in Rainbow's End.





*Always trying to reach for elusive butterflies of happiness - even when they are invisible. Keep looking for the flash of colour.*

Anon

Snow  
Covering the colours  
of the world  
WHITE

A reminder of the fact  
that the world  
is not pure  
is not kind  
is not peace

REMEMBER  
to look  
for the rainbows  
that sparkle  
inside each snow crystal  
they are not easily seen

A reminder of the fact  
that the planet  
is bright  
rainbow coloured  
and Her love  
is joy  
is sorrow  
is peace

Always play in the Snow  
for laughter  
is the rainbow inside.  
by Bunchy

You asked me what I want to be.  
I want to be free to be me.  
To be able to sit and feel at peace with  
myself.

To be able to sit in a chair  
without tears.  
To be able to sit in a chair  
without fears.  
To just be still  
without voices in my head.  
To just be still  
without feeling I have to do what I hear  
them say.

NO I scream a silent scream  
that echoes in my mind  
NO to the memories  
NO to the pain  
NO to the chain  
that binds me.  
Anon