



September 2003

RAINBOW'S END

Volume 5

Issue 1

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

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Volume 5, Issue 1

Editorial Statement

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 the burden of the editor and are final. Contributions do not necessarily reflect the views and opinions of First Person Plural, members of the steering group 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; artwork; personal experiences

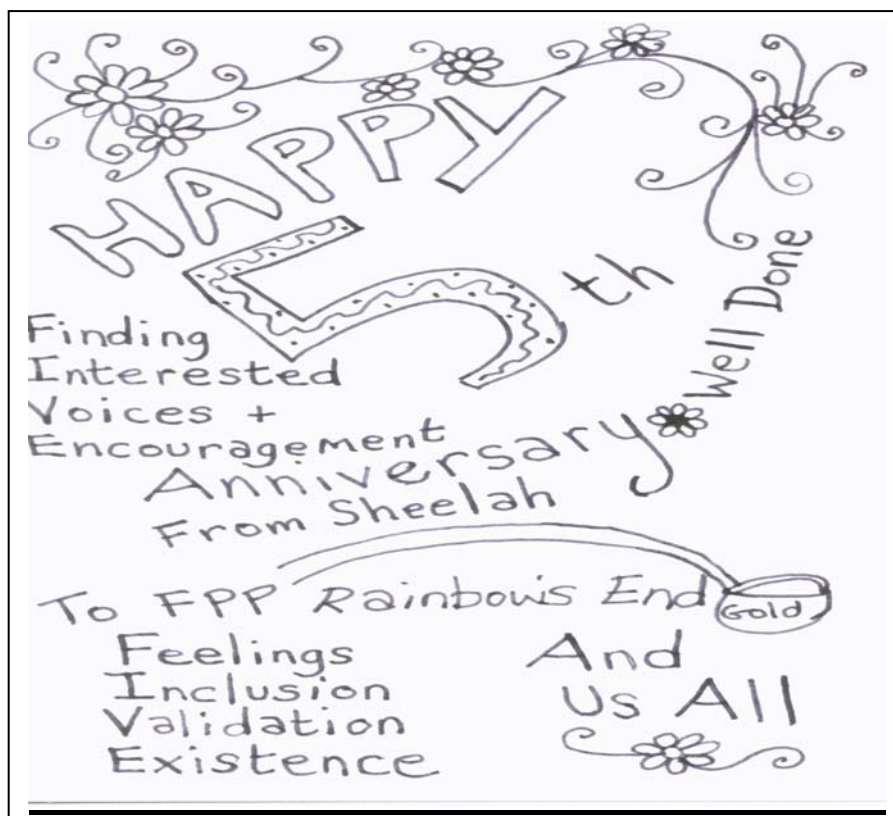
**To be considered for the next issue we need to receive them
by 21st November, 2003**

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





Dear Kathryn....

Booklet clarifies

I gave a copy of "Understanding Dissociative Disorders" to my GP, marking parts particularly relevant to me. He found it clarified a lot for him.

Trying to verbally explain dissociation is a tragic-comedy itself!

Sheelah

Booklet helps both staff & clients

Many thanks for sending us a free copy of "Understanding Dissociative Disorders". I just wanted to congratulate you on an excellent production. It is clear, 'easily' written, so easily read, to the point and with no sense of 'drama'. I have been looking around for a while for something like this and your booklet has saved me from having to work on producing something similar. Thank you!

We work with clients who live with dissociation for various reasons, mostly stemming from incestuous abuse to ritual and occult abuse. This booklet will help both staff and clients to clarify and accept a little more. It is so true that given access to good and 'correct' therapeutic intervention; people can begin to make remarkable strides towards healing.

Again thank you for the production of this excellent material. I didn't want it to go unsaid – it too often is!!

SAIFline

forwarded to FPP by Mind

We know how it feels

It is difficult to write about feelings but we want to tell members of the Steering Group that we read your experiences of being in the group (Rainbow's End 4.4) and it made us cry.

What touched us about the article is the fact that we can relate to some of the experiences described. When our friends say things like "I can understand how that must feel" unless you dissociate and live with all the complications that brings, it is sometimes not enough to hear that. We know it is not the same for everyone but we know how it feels to have some sense of safety only to be followed by a terrible fear. We know how it feels to think we are responsible for everyone's happiness, sadness or whatever else they may feel and to think we have to "fix" them. We know how it feels to have to hide ourselves from workmates and even close family members for fear of being made fun of or thought of as "not facing reality; living in a world of our own".

The sentence that stood out most was "Standing on the station platform.....too much in my life". It reminds me of all the times we have managed to do difficult things in order to "keep up" (when our only instinct is to want to curl up in a corner and be left alone) only to get back home and collapse in an emotional and physical heap from the sheer effort it takes to visit friends or travel long distances. But somehow, you get up and do it and then do it again.

FPP is the place we can recognise and be recognised; where we can understand and be understood and for that we want to say "thank you" to all the members of the Steering Group.

Angela & the others

What did you think of "Understanding Dissociative Disorders"

By completing and returning the enclosed questionnaire yourself and/or copying it and asking those to whom you gave/showed the booklet to complete it you will be helping FPP to plan for future information providing activities.

Members Open Meeting – Saturday. 4th October, 2003, 10:30am to 4.00pm

PLACES STILL AVAILABLE

If you have not yet booked your place to attend the Members' Open Meeting which is being held at The Gestalt Centre, 62 Paul Street, London, EC2A 4NA - **IT'S NOT TOO LATE**. If you are a member (any category) of First Person Plural you may **turn up on the day** without pre-booking - although if you could let us know we'd appreciate it. You may **bring one friend, colleague or supporter** with you.

For these late places we cannot provide lunch so the event is FREE but you must **bring your own lunch**.

The Memory Paradox by one of the Collective

"I" have many gaps in my memory. Great chasms and tiny holes in the narrative of my life story which "I" cannot fill because for those times, for those experiences "I" was not aware. It might be said that 'my' memory is poor. Indeed, with a diagnosis of Dissociative Identity Disorder, severe amnesia is the norm for "me".

Yet, for that which "I" have experienced, "my" memory is extra-ordinary. Many months, even years later, "I" can recall aspects of an event; a conversation; something "I" have read, heard, learnt; anything "I" have experienced. "I" am learning that the same is true for several of the various "I" 's who together make up the multiple system in which "I" am only one of many "I"'s who use this one body; who live this one life.

So, as we stumble our way towards more co-operation and sharing; as we become less dissociative, more integrated; as we find ways for each "I" to access and own the memories of all the other "I" 's are we destined to become a single "I" with extra-ordinary powers of recall. That would be a paradox. If "I" believe what "I" am told by my therapist and others, none of the "I" 's will be destroyed or lost through integration, so "I" will go from severe amnesia to having amazing powers of memory. And, knowing about (if not yet owning) some of what there is to be remembered - the horrors, the abuse, the neglect, the terror and torment - "I" find myself asking this question. Will the single "I" that we become be overwhelmed and destroyed by the 'gift' of near perfect memory that integration will bring?



Surviving or thriving? A Prognosis

by Gill Thomas, Chair of NAPAC

Is complete recovery from the damaging effects of childhood abuse currently possible within mainstream mental health services in England.

In my capacity as chair of NAPAC (The National Association for People Abused in Childhood), I recently attended a 3-day conference designed to promote the work of NIMHE (National Institute for Mental Health in England)

I was hoping to be assured by the mental health officials present, that the widely held view (now backed up by extensive research) concerning the correlation between mental health problems in the adult population and past experiences of childhood abuse (physical/emotional/sexual) was now sufficiently recognised to warrant extensive changes in the way mainstream clinical services support and treat adult survivors of abuse.

Unfortunately there was no such assurance forthcoming.

I was however, given the opportunity to talk to key individuals who were in the process of implementing change in clinical practice and front line services for mental health users. This was a welcome and long awaited chance for me to inform and educate them on the life long damaging effects of childhood abuse.

I produced research showing that at least 60% of psychiatric inpatients have experienced childhood abuse.

I explained the relationship between the traumatic aetiology of abuse and its associated affects

I discussed the significance of Dissociative Identity Disorder in adults who had experienced childhood abuse and how this, left undiagnosed and untreated leads to coping strategies such as, alcohol and drug addictions, eating disorders and, self harm.

It would seem to be the case that hundreds of survivors are categorized into mental health mis-diagnosis and inappropriate labelling, when the truth of the matter is that they are suffering from D.I.D due to childhood abuse.

Very few mental health professionals are recognising the presence of D.I.D in their clients and it is my firm belief that this diagnosis is one that survivors would welcome.

It explains so much about chaotic fragmented behaviour, amnesiac episodes, de-personalisation, anti-social feelings, depression and so many other dysfunctions. It gives the victim a chance to see that they are prisoners to these dysfunctions not bad or mad people and this in itself is very empowering.

I called for a shift in emphasis in clinical approaches appealing to the planners that they: -

1. Address the current symptom management culture that is fuelled and controlled by the pharmaceutical industry.
2. Listen to the rich experiential knowledge that recovered survivors of abuse have, respect that knowledge and use it to effect positive change in services.
3. Refuse to be fobbed off by the individuals who form the intellectual bastions of the past and who's motives are not conducive to the necessary changes that need to take place if we are to address the core issues of individual mental health disorders.

4. Dare to have the courage to engage with client's narratives and experiences in a way that encourages equality and respect and that is committed to supporting thriving not just surviving.

I was listened to quite genuinely but the response was disappointing. I was informed that this was a huge cultural and social issue to address and that opening the door on it now was not part of their plan.

I was surprised by this reaction because the Department of Health issued the following statement in their 2003/04 grant funding publication: -

“The overall aim of the Department of Health is to improve the health of the people of England, and to secure provision of high quality health and social care for those who need it.”

NAPAC is committed to working with survivors and the NHS to achieve these aims.

To give the NIMHE officials due respect, I do think that they are genuine in wanting the best for mental health service users in this country. My fear is that the good plans of a dedicated few will soon be swamped by those who hold the balance of power.

The wickedness of paedophilia, violence and bullying perpetrated on developing children and adults, is on the increase. All it takes for evil to prosper is that good men and women do nothing. The key to decreasing these social ills is to use the expertise of recovered survivors to effect positive and lasting change.

If we cannot rely on our government to promote awareness, fund and fulfil their obligations, concerning the issues I have raised who can we turn to, to support survivors through their recovery. Valerie Sinason, a child psychotherapist, adult psychoanalyst, author and one of the leading pioneers in the understanding and implementation of successful treatment plans for survivors of abuse has this to say about the current mental health climate in this country.

“What is the emotional experience of children and adults living in a country at a time when the condition that is troubling them (and its traumatic aetiology) is linked to a paradigm shift, rather than an area of clinical resourcefulness?”

(Sinason, 2002: 10)

I end this article on a positive note, because healing for all of us is possible. The problem is, we cannot do it on our own.

Judith Herman an American psychotherapist has this to say about healing:-

“I elect only one principle for the therapist and client, it is this: that the client takes responsibility by her own ability to be the arbitrator of her own recovery and healing programme.”

So what is the prognosis for all the millions of adult survivors of abuse in England. Will the small band of effective therapists, committed psychotherapists, psychiatrists and psychoanalysts working in the voluntary, private and statutory sector promote networking and become a voice for change. I doubt it, they are much too busy and often get burnt out and vicariously traumatised working in a profession bereft of clinical resourcefulness.

In the final analysis it's up to us, the survivors. We must no longer accept lip service, tokenism, marginalisation and isolation. We must work together, speaking as one voice to ensure mental health executives provide adequate funding for needs led, effective, supportive, services. Services that empower and encourage thriving not just surviving.

Sweetie Quiz

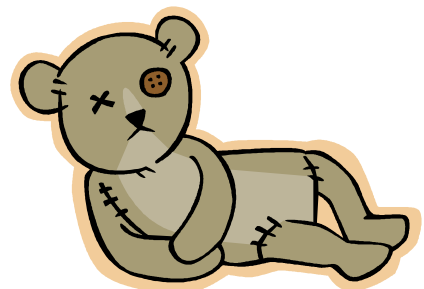
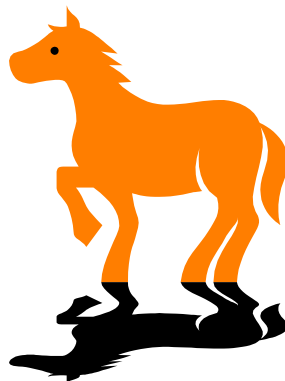
Each clue suggests a type of sweet or chocolate bar.

How many can you name. Ask your bigs to help you.

Answers at the bottom of page 9

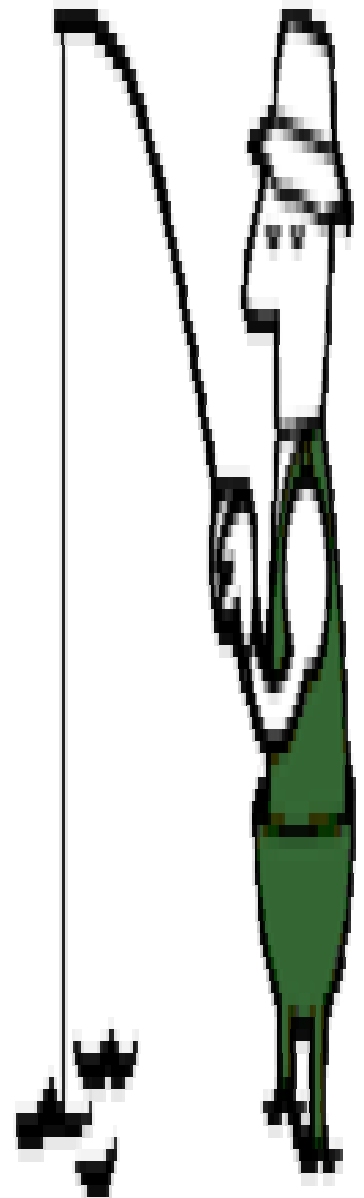
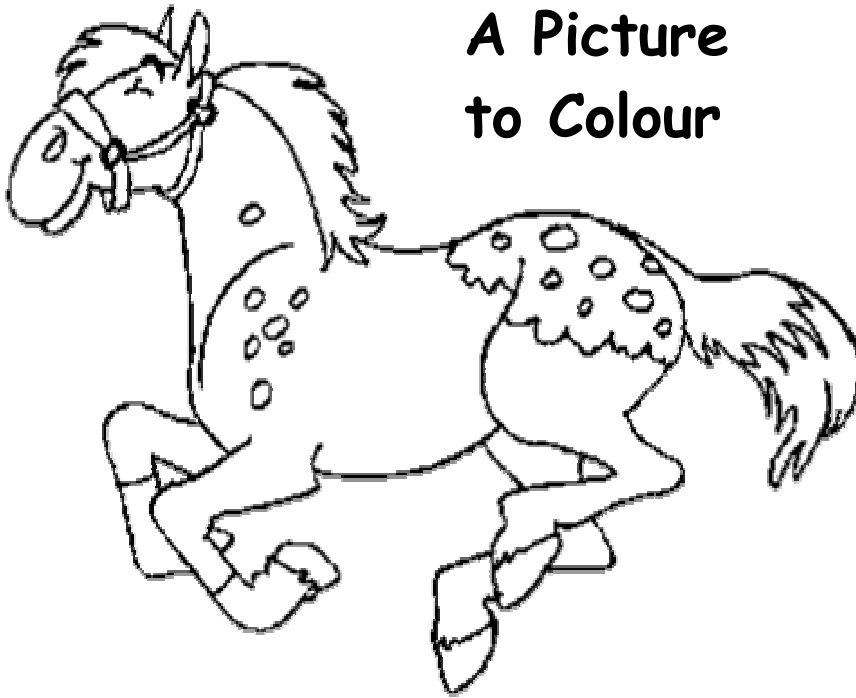
PLAY

- | | |
|---|---|
| 1) Wise guys | 20) One tenth of a dollar |
| 2) Olde worlde singers and musicians | 21) Repeatedly good in France |
| 3) Fine residential road | 22) Wobbly infants |
| 4) Making signs at the races | 23) Giggles |
| 5) What a doctor does | 24) Tattooed boulder from Scotland |
| 6) Male cow's peepers | 25) Extra pay |
| 7) 100% yellow metal | 26) Make coins with old non-metric measures |
| 8) Blow it or light it | 27) Pig's tail |
| 9) Nearly between the two | 28) Natives of Naples |
| 10) Ford's people carrier | 29) Little toy figure assorted |
| 11) People who arrange marriages | 30) Edible fasteners |
| 12) Corn, soap or snow, perhaps | 31) Alcoholic grape juice sticks |
| 13) Sounds like gravel underfoot | 32) Outdoor meal |
| 14) Is this 'plane' chocolate? | 33) Cadbury make this here |
| 15) Nine, ten, eleven etc | 34) College courses to remind you |
| 16) Add hesitation and it's a type of rocket or cushion | 35) Might be hydrochloric rain fall |
| 17) Sounds like the pub where mother drinks | 36) War of the reds and whites |
| 18) Adore blood pumping organs | 37) To forward and back off |
| 19) Finds the channels on a new TV | 38) Northern terrier that's not for girls |



CENTRE

A Picture to Colour



Animals and Plants Word Search

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

BEE
DAFFODIL
DOG
ELEPHANT
FERN
GOLDFISH
GRASS
GRASSHOPPER
HEATHER
HORSE
KITTEN
NETTLE
OAK
ROSE
SPIDER
SYCAMORE
TIGER
TULIP

Answers to Quiz on p8

1. Smarties; 2. Minstrels; 3. Quality Street; 4. Tic Tac; 5. Treats; 6. Bulls Eyes; 7. All Gold; 8. Fuse; 9. Twix; 10. Galaxy; 11. Match Makers; 12. Flake; 13. Crunchie; 14. Aero; 15. After Eight; 16. Boost; 17. Mars Bar; 18. Love Hearts; 19. Tunes; 20. Dime; 21. Bon Bon; 22. Jelly Babies; 23. Snickers; 24. Edinburgh Rock; 25. Bonus; 26. Mint Imperial; 27. Curly Wurly; 28. Neopolitans; 29. Dolly Mixtures; 30. Chocolate Buttons; 31. Wine Gums; 32. Picnic; 33. Bourneville; 34. Refreshers; 35. Acid Drops; 36. Roses; 37. Toffo; 38. Yorke

Plasters - a poem by Brian, age 8

If you can't see plasters
Doesn't mean that I ain't broke.
I can't get fixed with plasters,
But I've got hurts to poke.

I didn't trip and cut my knee,
My arm ain't in a sling.
I've got no spots to sit and count,
But touch me and I sting.

It's not like medicine for coughs
Or Vick for up your nose
It ain't no needle makes me scared
It's people in dark clothes.

I've got no scars for you to see,
You can't see where I hurt, but
Just 'cos you see no plasters
Don't mean that I'm not cut.

You can't put bandage round my
heart
Give me tablets for the ache
You can't put ointment on the fear
That makes my body shake.

I don't need no doctor,
I just need special friends
Then I can tell them when it hurts
Their love will help me mend.

I can't get fixed with plasters,
So you can't see my pain
Although you see no plasters
I'm bleeding just the same.

Last Night & This Morning

by Sheelah

Last night was another "is this my last night alive" times. I'd been wishing to die in my sleep for so long that I now feared it may happen. One of those "want to get away and sleep somewhere different" nights that go on till dawn.

Crying again. Holding teddy. Then finally sleep.

This morning, post arrived, my only hope in life at present. "Rainbow's End" with a cup of tea and a cigarette. Two of my drawings are published. I ponder a lot at the "Live or Die" one and thought if I'd died at the time of drawing it in 1997 then no-one would have seen it, so my continuing to live did produce something important..... other FPP members and even 'professionals' may have seen it and gained some validation of their own frightening thoughts.

For me it meant, well I am alive and I've gone through a lot since 1997. I've battled many demons and conquered some phobias. I feel deeply good for the first time in a long, long time. The rest of the day I spent doing the garden, feeling quite at peace.

So members, DO SEND ANYTHING to Rainbow's End – stick drawings, even one sentence. When you see it published a form of deep healing magic happens. You count. We all count. We all feel the same and it is we who help to heal us all.

First Person Plural at “Psychosis In Context” by Sandra Sunfire

Returning home from the University of Central England in Birmingham where the conference “Psychosis in Context” was held in June, I felt tired from the long day, as well as inspired and energised by my experiences.

First Person Plural were invited to present a workshop on dissociation at the conference which dealt with looking at psychotic experience within the whole context of a person's life, their family and their social world.

“What a refreshing conceptual framework for practice with people with psychosis it was!” as Professor Romme from Holland spoke of (about time too, say I). He pointed out that many of us hear voices and are not ill, do not experience increasing anxiety and distress with such experiences. Dr Ari-Pekka Blomberg and Marjaana Karjalainen came over from Finland to share their experiences of working with the Jorvi model of treating psychosis: Needs Adapted Treatment in Practice. They described their approach which involved “rapid early intervention” with direct access to the service, involving and mobilising the person's support network in treatment meetings. Their approach is multi-disciplinary and integrative, using various therapeutic approaches, giving good results in terms of reducing medication levels and hospitalisation.

Peter Hulme, head of Clinical Psychology from Hereford spoke about his work under the title “everybody means something”. He touched on the importance of meaning for us all and that in his view our perceptions of reality are all “simulations”. He acknowledged the power dynamic in the therapeutic relationship and his intention of “evening out the football pitch”, speaking of characteristics of the therapeutic relationship that can do that. He showed glimpses of a video with a session with a client so that the client could “speak for himself”.

There were many speakers and workshop leaders, too many to mention.

For FPP, I supported Kathryn Livingston who led the well-attended workshop “Dissociative Disorder or Psychosis? - that is the question!”. She spoke of the common experience of “people who are eventually diagnosed with dissociative identity disorder (multiple personality) to have had a previous diagnosis of schizophrenia, another psychotic disorder or personality disorder.” Kathryn facilitated a discussion concerning the similarities and differences between dissociative and psychotic experiences. People shared their perspectives from personal and professional positions, asking questions which Kathryn skilfully responded to. On the matter of one of the distinctions between the psychotic and dissociative experience of hearing voices, Kathryn said that from her experience, in psychosis voices are perceived as from being outside, whereas in dissociation the voices are heard inside.

The workshop asked what can be done to prevent continuing “flawed differential diagnosis and standard mental health assessments sentencing adult survivors of childhood abuse to re-traumatising and ineffective treatments through misdiagnosis or incomplete diagnosis”. It was heard how difficult it was for psychiatric nurses when they believed they were working with someone who was dissociative but had to work jointly with sceptical and/or un-informed psychiatrists. The professionals there, mainly nurses with some psychologists and others but no psychiatrists, readily revealed that they knew very little about dissociative disorders but they showed their keenness to learn more and also some recognition of the problems created in this country due to the lack of recognition for these disorders and consequent lack of appropriate treatment. It was a workshop of hope for me, based on being a part of a communication which is looking at a more whole picture of someone's life when they are in distress, that looks at that distress in context. It was great that First Person Plural was invited to be part of this communication and that dissociation was strongly on the agenda. A second workshop on dissociation looked at EMDR in the treatment of survivors.

Time is a funny thing. Sometimes it disappears down a black hole and I don't know where its been. Sometimes it stretches before me endlessly for a whole three or four days until I can reach the safe haven again, and be with someone who understands, someone who helps me release the time which is trapped long, long ago, which was endless too.

Will the time ever come when time behaves itself? Or will I run out of time before it does? Will I be OK this time next year? Too many years I've wondered this. Time seems to stand still for me, but I see all around me time goes on for other people. But I jump into *their* time and join in enough to pretend that time is behaving for me too. Its a gamble though. If I push through into *their* time too much and ignore the frozen traumatised time of long ago, trying to push up and overwhelm me, then I'm in danger from migraines, from being sick - really sick, usually more than once, and having to lie down flat for the rest of the day. But being in touch with traumatised time is draining and time-consuming. "What have you been doing today, dear?" "Well, I....er.....".

Getting in touch with newly released parts of me, no longer traumatised and trapped in time, but living with me now in the here and now, usually hiding in safety - being in touch with them and exploring 'being' in ways they never could *then*, feels good, but is also time-consuming. "What have you been doing today, dear?" "Well, er, I've been working on (playing with) my new doll's house. I've been painting (and colouring). I've been for a walk, just down the road and back, not far, but I could feel the sun's warmth on my back.

Shall I be strong today and join *their* time, or shall I make myself stronger by getting in touch with traumatised parts of me, or shall I celebrate with the new (so far) me? Have I got time to do all three? Have I got the energy? Perhaps I need to relax in 'grown-up *me*' time to recharge my batteries, to have space to breathe, to have time to just be. That's what I'd like to do, but the other 'three' are clamouring for my attention.

Time is a funny thing, so elusive, so in limbo. Where are we in the year? The panic of not knowing eases as I look out of the window to check - I can see its spring!

When I'm asked "Am I making the most of *this* day that God has given me?", I don't know the answer to that. Not many people understand about losing time, or the triumph of filling time, or the exhaustion but peace of releasing a little more trapped time into the here and now and claiming a bit more of me back, or marking time until that can happen again.

What I do in *their* time every now and then, may be an accomplishment for me, or a help for someone else, and sounds laudable, but often it seems to me, that it is what I do in the time in-between the real achievement, of surviving, of becoming stronger, of becoming more me. And however long my journey in time takes I still have all eternity in which to be fully alive. Time will not be rushed and I've learned to let go of the frustration, to trust in the right timing of the process and that I *will* have enough time to enjoy being me.

So, am I dodging the question? Am I making the most of this/each day? (And what about the night - the endless hours awake at night when sleep is elusive?) Only God knows, and I'm trusting God with the timing as well as the route of my journey to wholeness

Book Reviews

Resistance : a ritual abuse survivor speaks out by Mary Smith (pseudonym)
published by SAFE, 2003

Reviewed by the author

This is a collection of moving poetry about surviving severe abuse, together with accounts of aspects of a survivor's life and healing. It also has a substantial resource section of organisations, helplines, books and general advice.

Survivors have valued the mirroring of their experiences and the positiveness of the poetry. Professionals have been deeply moved and especially enjoyed the sharp logic of the section on False Memory Syndrome. Supporters have had their eyes opened to the reality of our lives, especially about multiple personalities, and come away with a deeper commitment to stand by us.

"Today a loneliness was lifted. Because, although I know other people have been through this terrible abuse, no one has ever before touched me so gently and said, 'You are not alone, little one. Not alone.'"

A survivor

"The broad canvas of the poems has the scale of an epic, the landscape mirroring the landscape of the mind. Like 'Pilgrim's Progress' this is an almost mythic story of emotional and spiritual endeavour."

A social worker

"Resistance" is available (£5.00) from DABS Mail Order, 4 New Hill, Conisbrough, Doncaster, DN12 3HA. Tel/Fax: 01709 860023

Trauma and Recovery : from domestic abuse to political terror by Judith Lewis Herman published by Pandora, 1994

Reviewed by Jane White

This is an excellent book and a very comprehensive read.

Part 1 identifies the different causes and effects of trauma, one chapter being specifically dedicated to child abuse. It explains very clearly the psychological processes that develop in response to trauma and the way in which the psych adapts to accommodate them. It offers a sound overview of the whole spectrum of dissociation, from mild to severe, which I found particularly useful, as I was able to identify my place within it.

Part 2 focuses on the process of recovery. It clearly identifies and breaks down the different stages, and again is very readable. It highlights the need for a 'healing relationship' in which it is possible to carry out the important task of remembering and grieving.

"Survivors who forget the past are condemned to repeat it"

I was very inspired to learn that the process does eventually come to a conclusion. Recovery occurs when the trauma has been fully integrated.

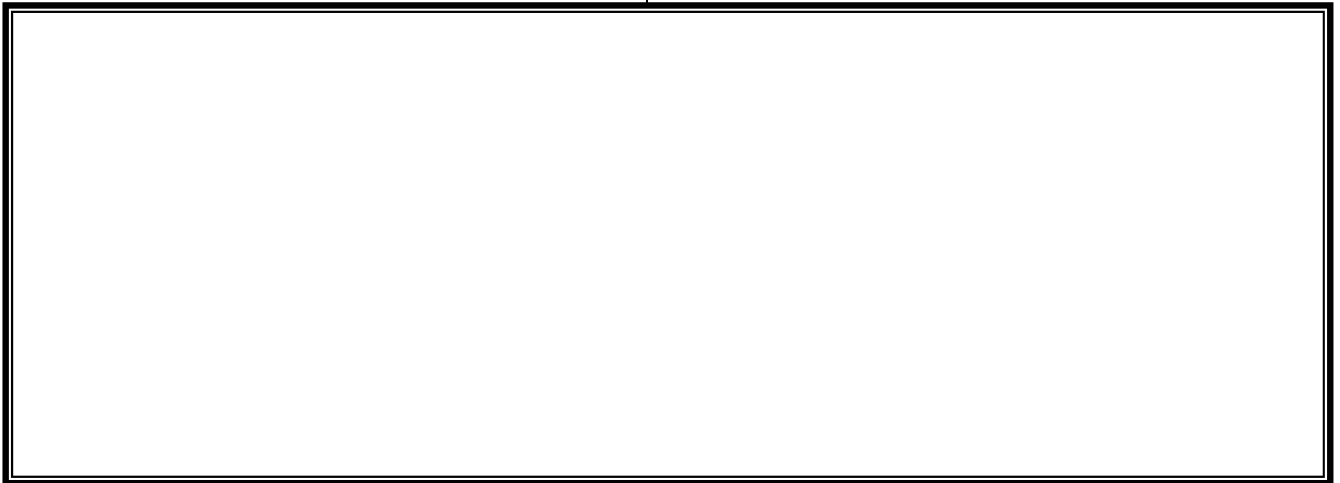
Judith Lewis Herman has been a practising psychiatrist for some 20 years, yet she has the ability to step outside of the 'medical model' of this 'disability'. She views the subject of trauma and its effects in a human and holistic way. Well done!

Also available (£9.99) from DABS Mail Order

Recently published

Abuse : Questions & Answers for Counsellors & Therapists by Moira Walker, published by Whurr Publishers, 2003

From the author of "Surviving Secrets" this book provides careful responses from a very experienced clinician, supervisor and trainer to many of the contentious and emotion arousing issues which present when working with abuse survivors. The Q&A format and good indexing makes the work accessible to the busy practitioner and the intelligent, enquiring survivor alike, although it is a tad on the expensive side at £17.50



Managing Association / Dissociation

extract from “Safe Passage to Healing : A Guide for Survivors of Ritual Abuse”

by Chrystine Oksana

1. Fill in the blanks and write in other statements that can remind you of safety.
2. The ideas in part two have helped survivors stay grounded and safe. Some may work better for you than others. There is additional space where you can write your own ideas. Use a highlighter pen when you are calm to highlight statements you want to see first when you are feeling disoriented. That way you can spot them quickly when needed.

1. **I AM SAFE**

THIS IS _____ (fill in the year)

I AM _____ (fill in your adult age) YEARS OLD. I AM A BIG PERSON. I CAN PROTECT MYSELF

2. BLINK HARD, BLINK AGAIN. DO IT ONCE MORE AS HARD AS YOU CAN
MAKE TEA, DRINK IT.
CALL A FRIEND
EAT A SNACK
JUMP UP AND DOWN WAVING YOUR HANDS
LIE DOWN ON THE FLOOR, FEEL YOUR BODY CONNECTING WITH IT, KEEP YOUR EYES OPEN

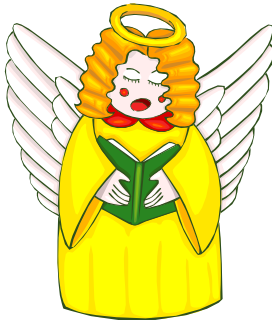
HOW DOES IT FEEL? DESCRIBE IT OUT LOUD TO YOURSELF
MAKE EYE CONTACT WITH YOUR PET. NOW HOLD IT.
CLAP YOUR HANDS
BREATHE DEEPLY, KEEP BREATHING, PAY ATTENTION TO EVERY BREATH.
HOLD A STUFFED TOY ANIMAL, PILLOW OR FAVOURITE BLANKET.
ALTERNATELY TENSE AND RELAX SOME MUSCLES
NOW ‘BLINK’ WITH YOUR WHOLE BODY, NOT JUST YOUR EYELIDS
MOVE YOUR EYES FROM OBJECT TO OBJECT, STOPPING TO FOCUS ON EACH ONE
WASH YOUR FACE.
GO OUTSIDE FOR SUNSHINE OR FRESH AIR

POEMS & RHYMES

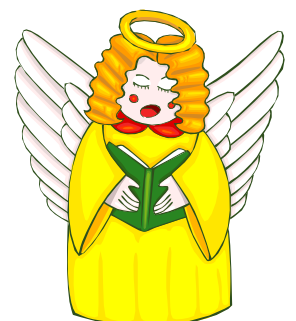
Angels in the dark

by K

I look in the mirror
What do I see?
Lots of frightened children
Staring back at me
One is all sad
Another full of spite
The second is scary
The other alright
The first I don't recognise
Looks nothing like me
The second I know her
Or is it a he?
I'm sorry I don't know you
You look so alone
Please don't be frightened
I can give you a home
I'm sorry it's cramped
We don't have any room
I'm sorry you were left out
To sleep in those 'tombs'
Come close let me love you
Let me hold your hand tight
Let me stroke your forehead
And kiss you goodnight
I know I've been bad
I can also be good
Give me a chance
I'm just misunderstood
I've never been lonely
I've always been blue
I'm always the coward
Never knew what to do
I will try not to hate you
You have pretty little faces
The things you get up to
The people, the places
I know you are scared
The same goes for me
Come let me hold you
Come sit on my knee
I will try and forgive you
I will try to be fair
I will try not to hurt you
I try hard to care



Give me your faith
And give me your love
We can win this fight
With some help from above
To steady yourselves
Sweet angels of mine
Come be with me today
And for the rest of the time
I won't shut you away
In the closet no more
I have made you a bed
And opened the door
I am trying to listen
To be a good mum
To nurture and care for
My own little ones
Please don't cry now
Don't be afraid
I want to be near you
Some friends to be made
You think I don't love you
That just isn't true
What can I do
To prove it to you?
I am grateful to you
To all of you see
I know why you're here now –
That was to save me
You've done a good job
You've really been great
You've got me to thirty
All I done was to hate
Just give me some time
Just give me a chance
This is all very new now
This whole merry dance
I am trying to accept you
I am trying to listen
I am trying to embrace you
You angels that glisten
I know you are right
I know I am wrong
I know that you are **me**
Just been gone for so long
I welcome you home
I welcome you back
Come in from the dark
I will help you unpack.



"Relations to Angels"

The second poetry collection by **Paula Puddephatt** (FPP member)

Available from November 2003 (approx)

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Email : paulatree@onetel.com

Limited copies of Paula's first collection "Paula Tree" are also available.

Angel by Paula Puddephatt

First published on MH in UK website 2002

See me through the pain, my guardian angel.
Although I feel I must surely die of shame.
See me through the dark night,
and don't blame me,
if I don't feel even remotely human,
overnight.

False Memory Syndrome 3 by Anon

No matter
no matter how many
no matter how many people they send
no matter how many people they send to refute my story
I shall not retract one word.

No matter
No matter how many times
No matter how many times they try
No matter how many times they try to refute my story
I shall not retract even one word.

No matter
how many lies they surround me with
how many experts they bring
no matter how many times they prove
that day is night or night is day
or madness sanity or sanity madness
no matter how fierce sounds their armoury of denial
no matter how much of their evil they accuse me of
I shall stand firm till I see the whites of their eyes

Then I will repeat the
truth
no matter
no matter how many
no matter how many
they are
I shall say
This is what was done
This is what I
remember

Behind the façade

by Rhymaster

Beyond and behind
the façade
the children are
always on guard;
sentries so vigilant
for feelings
subservient
can never allow
due regard

