Trauma, Internalized Mad-Phobia, Suicide and Recovery  
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Objectives

After this workshop, participants will understand (1) how unresolved trauma can bring intense powerlessness, hopelessness and other extreme feelings, thoughts, voices and experiences—which can also push suffering individuals toward suicide; (2) how hospitalization, re-traumatization, and internalized mad-phobia can fuel a vicious cycle; (3) how mindfulness based coping skills—including a practice of unconditional self-acceptance--may help strengthen our ability to (a) accept our extreme experiences; (b) "stand up to" those which disparage us or even threaten our lives and (c) eventually move more intentionally into a journey of recovery and healing.

Summary of Presentation

1. This presentation is based on experiences which include my work as a therapist with traumatized individuals—including many who have been suicidal and/or experienced extreme states. But I will begin by talking about my own involuntary hospitalization after experiencing extreme states which included tormenting voices and having my mind and face seized by a terrifying demon. After release, I experienced depression, anxiety and inner torment I believed were caused by an incurable brain disorder. Only then, I became suicidal. No attention was paid to the teasing, bullying, death threats, and sexual abuse I survived before hospitalization. No attention was paid to the impact of being handcuffed, put in isolation and restraint, medicated with Haldol until I could barely walk, or told which behaviors and beliefs I must demonstrate to be released from the locked ward.

2. (While this approach is supported by evidence—including the writings of mainstream trauma experts Peter Levine and Bessel van der Kolk—it is offered as only one possible way of understanding our experience.) Post-traumatic stress may be understood as an instinctive response to inescapable defeat. When both fight or flight are impossible, a prey animal cornered by a predator will collapse into immobility. For wild animals, this freezing response is brief. If not killed, the prey animal will burst back into motion--into fight or flight--then shake off all the stress energy and come back fully into vital living.

Unfortunately, humans easily become stuck in immobility when the animal levels of our own being are unable to complete this same process. Faced with inescapable defeat, our reasoning minds are shut down by our instincts. We may be flooded by "primitive" non-rational forces—thoughts, feelings, sensations, voices and other experiences—which replay the traumatic experience (often symbolically) and as if it were still happening. Tormented by these extreme experiences, we may sink deeper into an experience of powerlessness, hopelessness and immobility that is as much a
bodily experience as a mental state. We may also experience recurrent explosions of rage, terror—or wild, ecstatic images of escape—without knowing how to channel these forces safely toward resolving trauma.

Instead, we may be carried instinctively by these internal forces into external re-enactments of the trauma. For example Peter Levine, the author of Waking the Tiger, writes about the survivor of a horrifying firefight in Viet Nam. Back in the United States, this man repeatedly robbed convenience stores on the anniversary of the firefight—and then found himself again surrounded by men aiming guns at him. Levine explains that instinctive forces will move us to re-experience—and sometimes re-create—past traumas. This will continue until the deep animal levels of our being complete the alarm response cycle—moving from immobility, through fight or flight, back into vital living.

3. The good news is that this release can be gradual and does not require an all-or-nothing explosive release from immobility. This process of recovering from trauma may be supported by two aspects of mindfulness practice. One is learning to accept these extreme experiences --understood as part of our natural response to overwhelming events, or as a spiritual experience or in whatever way works for each individual. The other is learning to live and behave more intentionally—moving however slowly toward a more empowered, connected life. We may gradually learn to live more purposefully, even while remaining mindfully aware of any extreme states—including any recurrent experiences of rage, terror or wild images of escape—which gradually lose their destructive power, as trauma energy is released. This process may be understood as trauma re-negotiation. (Voice hearing groups are only one example of peer support for this process.)

4. Unfortunately, this healing process can be disrupted by many conventional mental health interventions, especially involuntary hospitalization. Many of us have learned, for example, that clothing and cologne like those worn by a perpetrator can be triggers for traumatic re-experiencing of sexual abuse. After hospitalization, these kinds of traumatic responses (and our own emotions in general) can become triggers themselves. We shut down--now also reliving the traumas of hospitalization—which came in response to these “symptoms.” In this way mad-phobia may be "engraved" into our experiencing selves.

We may learn, from a deep non-verbal level, to dread our own emotions and natural responses to trauma. We may come to see ourselves as worthless, unlovable, and incapable or undeserving of respect and autonomy. We may find ourselves frequently frozen--instinctively responding to the external world where so many people express this view. We may feel more and more inescapably defeated in the role of mental patient.

Then, instead of being channeled into recovery, for some of us, recurrent explosions of fight-or-flight energy may also be channeled into suicide thoughts and attempts—as the only escape we can imagine from our torment and hopelessness. (Our
internalized views of ourselves as worthless and unlovable trauma victims and mental patients frequently contribute to our willingness to consider killing ourselves.) If we survive, this may fuel a vicious cycle of re-hospitalization and deepening trauma. Then, we ourselves become a source of life-threatening danger—as our instinctive fight-flight-freezing responses become even more deeply confused.

Then, anything which triggers our own thoughts of suicide may also be experienced like a predator leaping in mid-air. As our rational mind shuts down more and more completely, we miss opportunities for trauma re-negotiation, being carried instead into trauma re-enactments. Then, suicidal individuals may also re-experience and re-enact previous suicide attempts, leading to recurring hospitalizations and sometimes death. Unfortunately, conventional mental health systems also frequently respond to these re-enactments as relapses—also missing the potential role of trauma and the opportunities for trauma renegotiation and healing.

5. Having internalized both intolerance and misunderstanding of own natural responses, it can take considerable effort and perseverance to develop practices of intentional living and mindful awareness of experience—which can move us toward recovery. In this workshop, a number of basic mindfulness tools will be offered to support this healing practice. Among these, a practice of unconditional self-acceptance (see below) may help strengthen our ability to (a) accept our own extreme feelings/thoughts/voices/ experiences (b) "stand up to" those which disparage us, push us toward destructive behaviors or threaten our lives, including our internalized mad-phobia; and (c) eventually move more intentionally into a journey of recovery and healing.

Two decisions supporting a practice of Unconditional Self-Acceptance

--"I have decided to believe my life is worth living and I am worth loving no matter what happens and no matter what I feel."

--"I have decided to believe the potentials for 'love' (mutual connection), 'work' (a valued social role/activity/identity) and coping with emotions (even during periods of distress) are within me."

The Albert Ellis description of Unconditional Self-Acceptance

“Accept yourself as good, worthy, or deserving of life and enjoyment just because you are human, alive, and a unique person; and don’t evaluate, rate, or measure your self or personhood at all, but only [rate] your individual thoughts, feelings and behaviors on the basis of your chosen goals and purposes.”
Mindfulness Tools for Wellness, Self-Actualization, and Trauma and Mental Health Recovery

[If anyone finds medications or a medical view of symptoms helpful, I would certainly not want to take that away. But I do sometimes ask individuals to consider putting that medical view "on the shelf," at least briefly, while they look at their own experience from a different perspective. Although I will not be discussing medication issues, I have listed a few related resources in this handout. And if anyone is considering medication reduction or discontinuation, please don’t stop medications suddenly, without a well-developed plan.]

Changing our relationship with emotion/experience

It may be helpful to accept and observe our emotions, thoughts, feelings, sensations and other experiences--those that come without intention--and then also to remind ourselves what our own chosen intentions and purposes are. (Two versions of a Mindfulness Journal are provided on pages six and seven to help this practice.)

Ways to understand living mindfully with emotion/experience:

It is like surfing a 30 foot wave. We can't control that wave with our mind, either, but we can learn to surf (and to get back up when we fall).

It is like sailing. It is important to be aware of the wind (how strong it is, what direction it is blowing). With experience, we can learn to sail in different directions than the way the wind of our emotions and other experiences is blowing.

This approach is also like the children’s book, Where the Wild Things Are. We can think of the place "where the wild things are" (where we face our extreme emotions/experiences) and also the place where the main character is back home, safe and "loved most of all" (at least by ourselves, as we work toward living more intentionally) as two different spheres or stories within our lives. With practice, we can learn different skills for building, cultivating or attending to both stories. Although we usually experience both stories at once, it may be helpful having these methods available, especially when one or the other stories needs more attention.

In time, meaning, direction and self-healing do often emerge from these practices of wholeness. At the same time, it can be important to learn to "stand up to" emotions and experiences when they berate us, or push us to behave in potentially harmful ways--or to adopt new beliefs about ourselves or our lives, without reflection.
Ways of "standing up" to emotion/experience:

We can read about or participate in hearing voices groups which support us to accept our experiences, within our own freely chosen worldview, and to learn to stand up to voices or other inner experiences when they "denigrate you, interrupt your thoughts, or tell you to do harmful things." We can apply this approach not only to experiences which are often called "psychotic," but to all our experiences, including those often called "depression" or "anxiety."

Like a "pinhole of light," we can practice holding onto a valued image or affirming statement--onto anything intentional, however small--in the face of intense emotion/experience which might sweep that practice away.

We can learn to stand up to intense emotion/experience by developing a "short list" of "bare necessities" that we can learn to practice even during stormy times (like getting out of bed; exercising even a little; making some social contact; taking any step toward a goal; eventually, going to class, work or another valued activity)

We can learn to stand up to disparaging and destructive emotions/experience with statements of Unconditional Self-Acceptance. We can practice deciding to value ourselves and to believe in our own basic potentials no matter what happens, no matter how we feel and no matter how other people view or treat us. We can learn to persevere in this practice even when experiencing repeated obstacles, setbacks or failures:

Two decisions supporting a practice of Unconditional Self-Acceptance

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Mindfulness Journal: Write on each side or use this page as a guide.

Emotion/Experience

Intention/Purpose
### Mindfulness Journal: Write in each column or use this page as a guide.

1. **What is it like?**
   Emotional feelings, body sensations, thoughts, other experiences and how I behaved in any ways that went along with this. (Just observe the experience.)

2. **Did anything appear to trigger the experience?**
   Any outside event or replay of a previous event? (If unsure, explore briefly.)

3. **How did I behave or how did I choose to think in ways that were mindful and consistent with my intentions?**

4. **What else might I have done or do next time?**
   (How else might I behave? What can I “tell myself”? What idea might I have held onto even while I was experiencing the emotion or experience?)
Changing our relationship with stress-vitality system

One way of understanding stress, anxiety and even trauma is that the fight-flight-or-freezing response of the deep body-mind easily gets out of sync with so many moment-to-moment challenges of our modern lives.

We can learn from wild animals, like zebras, which orient toward unknown experiences with a "What is it? Response"--asking with their senses, "Is it a lion? Is it another zebra or the wind?" There are always lions "out there," which could attack, at any time. But wild animals cannot afford to waste the tremendous energy of a full-blown fight-flight-or-freezing response for every unknown experience which grabs their attention--dozens or hundreds of times a day. That energy is conserved for the moment when a lion or hyena does appear.

One part of getting ourselves more in sync, as humans, is asking that same question--"What is it? Is it a lion?"--whenever we find ourselves becoming stressed. Involving our senses may help with this. It is not asking, "Is this real? or "Is this something that may bring real suffering?" It is asking ourselves, "Is what is happening, externally, anything for which a powerful adrenaline/alarm response would be helpful, right now?" as we gradually learn to work with these energies more effectively. As we do this, we may also get better at recognizing when experiences are actually neutral or even potentially helpful or enjoyable.

There are always lions "out there," and from time to time one does come after a zebra. Then, a zebra may experience terror (flight) which empowers fast legs to escape. Lions are also fast, and so rage (fight) may empower a zebra to kick the lion hard enough to survive the attack. These energies are natural but can often be destructive in human life, unless we learn to channel them in healthier ways. (Sometimes we may even avoid experiencing them entirely by realizing immediately when something is "not a lion.")

Zebras don't need meditation or tai-chi to release alarm energy and return to a state of relaxation or everyday vitality when there is no lion or when the lion is now gone. Although our deep body-mind also knows how to do this, humans do often need to develop some kind of regular practice to release that potential.

A simple practice of meditation is to focus on what it FEELS like to breathe. Distraction is inevitable (and not doing it wrong). So whenever you forget about breathing entirely, gently but firmly bring your focus back to how your body FEELS as you breathe into it. Sometimes, eventually, everything else will evaporate into stillness--except the awareness of breathing into your body. This is a wonderful thing, but it is not the primary goal of this practice. The goal is learning to sit with intense emotion without fleeing. Gently but firmly, focus on feeling yourself
breathing through the turmoil of the thoughts, feelings, emotions, sensations and other experiences which continue moving through your mind and body.

We can borrow an idea from neuroscience, that people have a "triune brain"--including a human/reasoning brain, a mammal/emotion brain and a reptile/instinct brain. When we perceive anything as a "lion," we are told, the reptile brain overrides emotion and reason--and also the body's healing systems. The writer Matthew Fox calls meditation a practice of "Nice Crocodile"--learning to calm the inner reptile, especially when our emotional experience remains intense and chaotic.

Our emotion/experience itself is never a "lion," never something from which an alarm response can actually defend us. Reacting to our own emotion/experience as if it were a dangerous predator creates a vicious cycle, as more and more alarm energy actually makes our emotion/experience more and more intense. We may even become immobilized if we experience our own emotion/experience itself as a source of inescapable defeat. Meditation, yoga and similar practices can help ease us out of that cycle.

Peace of mind is not achieving complete stillness every time we meditate. It is the process of practicing "nice crocodile," as a gift to ourselves, especially when we are most stressed. It is like leaning inward toward calm and peace--however far out into the stress of a fight-flight-or-freezing response we have been carried.

[For some people who have been traumatized or overwhelmed in some other way, it may be too much to sit with our body's intense energies in meditation. Some traumatized individuals find yoga, in particular, more tolerable and helpful. (See Resources, later in the handout, for a trauma-sensitive yoga guidebook.]

Recovering from trauma/overwhelm (including my own experiences)
(Peter Levine & Bessel van der Kolk are known for their trauma recovery work. Their self-help books are also listed in Resources.)

Back in the animal world, as Peter Levine explains, when the lion draws near and fight and flight have both failed, the zebra will experience "inescapable defeat" and collapse into immobility (freezing). This is not "playing" dead. Something deep within the zebra (the "reptile brain," according to Levine) seizes control and throws the animal into a state which simulates death. Indigenous cultures viewed this as a surrender to death. But, Levine explains, it is also the animal's last defense. If the zebra is not actually eaten, it will burst back out of the frozen state into fight or flight (in case the lion is still near). If that does not release the tremendous energy of the alarm state, the zebra will shake until it is released--and then bound off, fully recovered, as if nothing happened. And Levine tells us, as humans, that the animal part of our being also needs to complete that same process--although it can happen more slowly and gently--for us to eventually bound off recovered.
Unfortunately, humans easily become stuck in paralyzing immobility, where we experience enduring hopelessness and inescapable defeat. We may periodically begin the process, bursting out of immobility with an experience of terror, rage--or wild, ecstatic images of escape. Unfortunately, without learning to channel and release these energies in safe, effective ways, we often channel them into our current everyday lives. Then, we may find ourselves re-living similar destructive patterns over and over--without actually releasing the energy or "resetting the alarm system"--and falling back into a deepening sense of inescapable defeat.

In this immobility state, Levine and Bessel van der Kolk tell us, the reasoning mind is shut down. We are immersed in the strange non-rational world of emotions and animal instincts--a world of "dreams, feelings, images and sensations"--which frequently replay our original overwhelming experiences. These descriptions of the trauma response echo descriptions by psychiatric survivors. Anton Boisen saw psychosis as a "psychospiritual crisis"... "as if the conscious self has descended to some lower region where it is no longer in control but at the mercy of primitive and terrifying ideas and imagery which throng upon it."

Both Levine and van der Kolk report that healing trauma requires a mindful awareness of these dreams, feelings, images and sensations--of the "living, feeling, knowing organism." (This is very different from other mainstream mental health practices which seek to block awareness of intruding emotion/experience--understood as a disease process.) Levine calls the healing process a "mythic-poetic-heroic journey" and explains that the ultimate source of healing comes from within our own experienced self and not the rational mind. These descriptions are similar to a description of mental health recovery by Dan Fisher and Laurie Ahern. With enough support, they write, a person experiencing a severe emotional crisis may experience a process of "self-renewal" and they quote John Weir Perry who also described that transformation in mythic terms.

Long before I ever found the mental health recovery movement, I found mythology. I recognized--in the ancient myths of cultures around the globe--descriptions of the same forces I felt moving through my own being and which had been diagnosed as symptoms of severe and incurable mental illness. I realized these experiences were actually part of the human condition and a potential source of healing and meaning. (I respect that some of us view "mythology" as a spiritual approach to our experiences while others may view it only as an "experiential map" of the inner human world--developed by more the introverted cultures which came before ours. I also respect that some of the people I have worked with have not liked mythology or spirituality at all and preferred to stick as closely as possible to more modern, scientific explanations of trauma.)

I myself learned mindfulness from the mythologist Joseph Campbell. I read Campbell’s directions for undertaking a mythic journey--which is to live with awareness of the demands of our current external world at the same time as living
in the "inner" world illuminated by myth. This is almost identical to van der Kolk’s description of healing trauma. That is to "respond according to the current requirements for managing one’s life" while also observing sensations, emotions and other non-rational, autonomous forces—without avoiding them entirely and without becoming completely overwhelmed and swept away by them. As van der Kolk explains, these experiences bring a felt sense of inescapable defeat and are often triggered by external events which resemble the traumatic past in some way.

This process can also be understood in terms of the two sides of the mindfulness journal (intention/purpose and emotion/experience)—or the two stories from Where the Wild Things Are. Other tools presented earlier in this handout may also help a person with this work—for instance asking ourselves, "Is this event which is happening right now a 'lion?' or is it only reminding me?" "Is this anything for which a powerful adrenaline/alarm response—fight, flight or freezing—would be helpful, right now?"

Van der Kolk tells us that ancient cultures used theater, ritual and drama to engage the returning feelings, sensations and impulses of trauma while using their imagination to enact safe outcomes that directly contradict their original experiences of inescapable defeat. (A village, in which many people were killed during a recent battle, might stage a play which engages the surviving villagers' feelings of helplessness before moving toward a different outcome that does not feel helpless and is not inescapable defeat. This will not bring back the dead, but it may allow survivors to come out of immobility and continue living with more vitality.)

Similar to the mindfulness journal, a famous Gestalt therapy technique called "Dialogue" could also be adapted for this work. To practice this, set up two chairs facing one another. While sitting in one chair, we can focus specifically on intention and purpose—on decisions and behaviors to make our current external life better in terms of our own goals. In the other chair, we can focus specifically on emotion/experience, gradually creating a safe place to reclaim/express whatever we experience, without judgment—and without disrupting our external life. Drawing, painting, creating writing and other arts may help with this expression. Movements which allow the body to release fight-or-flight energy safely and gradually can also support the healing process.

In addition, moving back and forth between chairs can help us gain more clarity about how to cope externally, during times of intense experience—as well as how to adapt our intentions to take better care of our emotional needs. When we begin to feel too overwhelmed, it may help our recovery to take a break from this whole process, to focus on something external which evokes a greater sense of safety or feeling alive. This shift in focus can also be a step within the process—for a moment, moving back into the intentions chair, where we are "loved most of all," at least by ourselves.
We can decide to understand this entire process as mental health recovery or trauma recovery, spiritual awakening or simply gaining self-awareness. (In neuroscience, for instance, the "triune brain" is only one model used for understanding the many autonomous forces at work beneath everyday human consciousness. And van der Kolk suggests humans are rarely even aware of these forces unless they become stuck in an enduring alarm response.)

By practicing this same general approach, I eventually learned to make more room for wild-poetic-visceral-visionary experiences to pass through my own being without disrupting my external life as profoundly. (I know, now, for instance, that I easily become physically ill if I do not regularly make time to tend to this aspect of my life.) But when I was 20, I had many experiences like watching Superman being bullied in a movie, after he lost his powers. Then, I saw him standing up for himself, re-empowered. I had been bullied and sexually abused when I was younger, and something deep inside me recognized, "I'm like that! I could do that!" Only, then, I was swept away by the wild and ecstatic idea that I actually was Superman. I had not yet found a way to have this kind of "poetic experience" and release trauma energy while still holding onto myself and my life.

Becoming God was another experience that returned over and over, in a disruptive manner, until I learned to cope with it differently. Paul Baker of the Hearing Voices Movement gives the example of an individual who chooses to understand his or her own voices as a psychic experience. And Baker suggests, that individual might begin learning to stand up to destructive suggestions from voices by learning how other psychics have done this--at least as a starting point.

Hearing this from Baker, I immediately thought of my own discovery of various world spiritual traditions, in which experiencing a union with the divine is actually a goal. The writers I discovered also described pitfalls and dangers along this path, which helped me learn to re-negotiate my recurring experience of "becoming God." The experience was transformed from being disruptive, traumatic and painfully connected with my memories of hospitalization into a deep source of meaning and sustenance--and into experiences that are now more gentle, subtle and peaceful.

I do know from my own life, and from other peers I have worked with, that accepting these kinds of extreme experiences in order to change our relationship with them can be challenging. Frequently these states of mind are associated with involuntary treatment, seclusion and restraint, adverse medication effects, loss of civil rights and other conditions of helplessness and disempowerment. And so, if hiding our extreme experiences once helped us escape additional trauma, then bringing them out of hiding--even within the privacy of our personal recovery and wellness practices--may be difficult.

We may sometimes need to work through the traumas of hospitalization before we can fully access other traumas or healing resources. And unfortunately the trauma of hospitalization may sometimes be re-experienced in a way that is hard to
recognize—as a fear of current or future involuntary interventions. This was true for me even long after the fear of re-hospitalization stopped being very realistic.

A trauma memory may eventually be recognized because it feels as intense as if the traumatic experience were happening for the first time—because in many ways the body and mind are responding as if it never stopped happening the first time. It may take us time to realize that we are experiencing fears of hospitalization as if we were actually back in the hospital—or as if the danger or hospitalization were like a lion in mid-air, right now in this moment, even when it is not. We may come to realize that this kind of trauma memory is mixed in with our reasonable thoughts about how to maintain or regain our civil liberties and avoid more trauma. But if it shuts down our reasoning mind, emotions or immune system—or drives us into internal or external re-enactments—the trauma memory may impact our health and quality of life or even increase our likelihood of being hospitalized again.

Although they may remain nearly unspeakable, if we can imagine/remember our past traumas—including involuntary interventions—as anything other than completely inescapable defeat, we may heal more deeply. Van der Kolk wrote about a holocaust survivor who began to recover more fully after deciding to imagine laying flowers inside the death camp. In this way, without denying any of the unspeakable horror, the survivor communicated to the deep parts of his being that the experience of being inside the camp was not currently happening externally—that he had survived it. (He would never have been allowed to lay down those flowers while still interned in the camp.)

Preparing to face future crises—in which we might be hospitalized again—may also help us to recover more fully from traumatic stress. For example, the kind of crisis preparation included in Wellness Recovery Action Planning may increase the likelihood of having more say in what happens to us during any future crisis. By working to perceive future crises as anything other than inescapable defeat—we may also gradually decrease the degree to which our reasoning minds are shut down whenever trauma memories and other extreme states do return.

By planning how we would survive hospitalization—if it happened again—we may actually increase the likelihood of both avoiding hospitalization and healing trauma more deeply. As we regain external control, we may eventually see the return of traumatic experiences as an opportunity. As we learn to avoid being carried into destructive re-enactments, we may learn to channel that energy toward recovery, healing and self-actualization.

(All of this may be seen as an aspect of unconditional-self acceptance. We may stand up to the world’s mad phobia—including any that is internalized within ourselves. We may decide to believe that we are worth living and loving even if we are ever again eclipsed by extreme states—and whether or not others have yet learned to respect our human rights, our human dignity and our capacities for empowerment and recovery.)
If all of this becomes too complicated, we survivors/consumers/ex-patients who experience painful memories returning might just seek out other peers, to talk. Those peers might support us to acknowledge the intrusion of old nightmares while occasionally encouraging us to focus our senses back on the here-and-now of our current world of recovery--to which we have, in fact, already escaped. At least, we might use our senses to observe a world in which we are actively working toward more empowerment--which can also make a difference, moving us more deeply into recovery or wellness.

**Resources**

**Self-Help Books for Healing from Trauma**


Emerson, D. and Hopper, E. (2011). *Overcoming Trauma through Yoga: Reclaiming your Body*. Berkeley, CA: North Atlantic Books. [Another pragmatic approach to healing from trauma, this one focused in yoga—and developed out of Bessel van der Kolk’s Trauma Center.]

**The Hearing Voices Approach:**


Hearing Voices USA: [http://www.hearingvoicesusa.org/about-us.html](http://www.hearingvoicesusa.org/about-us.html)

**Self-Help Books for Body-Mind Healing**


**Regarding Medication and Other Related Issues**

Deegan, P. National Empowerment Center - Article, "Reclaiming your power during medication appointments with your psychiatrist" Available at http://www.power2u.org/articles/selfhelp/reclaim.html (accessed 12 April 2011).


**Other References**


Fisher, D. & Ahern, L. National Empowerment Center Article: "People can recover from mental illness." Available at http://www.power2u.org/articles/recovery/people_can.html (accessed 24 January 2012).
Fisher, D. National Empowerment Center Article: "What Are the Characteristics of a Person Who has Recovered from Mental Illness?" Available at http://power2u.org/articles/recovery/characteristics.html (accessed 12 April 2011).


