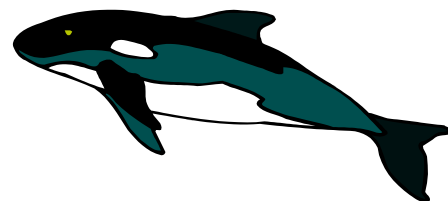


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"It is useless to attempt to reason a man out of a thing he was never reasoned into."

—Jonathon Swift

10 Things You Can Do to Reduce the Cancer Risk from Cell Phones

1. Children should only use cell phones next to their heads for emergencies. Children's skulls are thinner than adults', and their brains are still developing. Hence, radiation from cell phones penetrates more deeply into their brains and is likely to cause more damage. **Texting (while holding the phone away from their body) is still fine for kids!**

2. While talking on your cell phone, try to keep the cell phone away from your body as much as possible. The amplitude of the electromagnetic field (radiation) is one fourth the strength at a distance of two inches and fifty times lower at three feet. **Whenever possible, use the speaker-phone mode or a wired headset (not a Bluetooth).**



3. Avoid using your cell phone when the signal is weak or when moving at high speed, such as in a car or train, as this automatically increases power to a maximum as the phone repeatedly attempts to connect to a new relay antenna.

4. Avoid carrying your cell phone on your body at all times. Do not keep it near your body at night, such as under the pillow or on a bedside table, particularly if pregnant. You can also put it on "flight" or "off-line" mode, which stops electromagnetic emissions.

5. If you must carry your cell phone on you, make sure that the keypad is positioned toward your body and the back is positioned

toward the outside, so that the transmitted electromagnetic fields move away from you rather than through you.

6. Only use your cell phone to establish contact or for conversations lasting a few minutes, as the biological effects are directly related to the duration of exposure. For longer conversations, use a land line with a corded phone, not a cordless phone, which also uses electromagnetic emitting technology similar to that of cell phones.

7. Switch sides regularly while communicating on your cell phone to spread out your exposure. Before putting your cell phone to the ear, wait until your correspondent has picked up. This limits the power of the electromagnetic field emitted near your ear and the duration of your exposure.

8. When possible, communicate via text messaging rather than making a call, to limit the duration of exposure and the proximity to the body.

9. Avoid using your cell phone in places like a bus, where you can passively expose others to your phone's electromagnetic fields.

10. Choose a device with the lowest SAR possible. SAR = Specific Absorption Rate, which is a measure of the strength of the magnetic field absorbed by the body. (SAR ratings of contemporary phones by different manufacturers are available by searching for "sar ratings cell phones" on the internet.)

Source: <https://ehtrust.org/educate-yourself/10-things-you-can-do-to-reduce-the-cancer-risk-from-cell-phones/>

Who Deserves Mental Health? It Should Be Everyone

Recently, Senator Bernie Sanders asked Americans to share their most “absurd” medical bills, and he received a tidal wave of ludicrous numbers in response. The obvious message was don’t get sick in the United States, unless you’re hoarding gold under the mattress, or you run a tech start-up.

Canadians responded on social media as well, letting Mr. Sanders know that we occasionally have to pay exorbitant hospital parking rates, or get hosed when buying a muffin at the clinic coffee shop, but that’s about it. My heart swelled reading those responses, because that’s been my experience, too: When we need the medical system it’s there for us, and we don’t have to sell a kidney to access it.

But as I watched the heart-warming responses roll in, I realized that everyone was talking about the cost of their physical health, not their mental well-being. What would it have looked like if everyone totted up the price of maintaining their family’s mental health—the visits to a therapist or psychiatrist, the private inpatient clinics, the monthly expenditures on medication for those who don’t have company drug plans?

We’re told, endlessly, to talk about our mental health, but so much of it is just hot air. For one thing, even though a significant portion of us will experience mental-health challenges in our lives, we still are worried about the repercussions of opening up, even to colleagues. A recent survey conducted by Ipsos Mori for Teladoc Health revealed that more than 80 per cent of respondents had not revealed their mental-health problems to anyone at work, worried about the possible negative consequences for their careers.

For a country of price-complainers—did you see how much cauliflower costs this week?—

we seldom talk about how much we shell out to keep our minds in good running order. Maybe it’s a misplaced sense of shame, or a concern about privacy, or fear of being seen as “less than” in a society that values only triumph and success. Those are all understandable reasons. But until we talk about how much it costs us all individually, we’re not going to go far collectively toward making mental health services affordable and accessible for all.

In my case, there were many months when my family’s mental-health bill hit several hundred dollars, mainly for therapy. I’m not complaining; in fact, I would personally throw a parade for therapists if they’d let me, and I’d buy all the balloons and cake. My family is among the lucky ones. My husband and I have health benefits through our employer, which pay for drugs and for some therapy; but the cut-off is quickly reached, especially if you’re paying for more than one person’s regular treatment.

After the cut-off, we pay out of pocket. Again, we’re fortunate that we’re able to; we can buy our way around the endless lines for publicly subsidized care. So many Canadians are not in the same position. If our

health-care system is going to seriously tackle the mental-health crisis, and if it’s going to fulfill its legislated pledge of universality, that has to change.

It’s a godawful cycle: The poorer you are, the less likely you are to be in a position to afford private care. The more you suffer from a debilitating illness, the less able you are to do the grinding work of advocating for yourself. There’s a chapter heading in journalist Anna Mehler Paperny’s invaluable new book on living with depression that sums it up: *Mental Health is for Rich People*.

“As far as national chauvinisms go, Canada loves being The One With Universal Health Care. But if your illness is in your brain, that universality is a lie,” Ms. Paperny writes in *Hello I Want to Die Please Fix Me: Depression in the First Person*. She outlines the ways in which Canada fails the legions of people who need mental-health support—



Indigenous youth, those on waiting lists, children, the not-fully-employed. “If you don’t want mental wellness to remain the purview of the privileged, if you don’t want poverty to doom people to debilitating anguish, you need to cover pharmacotherapy and psychotherapy like you mean it. Universally. For everyone.”

The cost to individuals and families may be quietly swept under the carpet, but the cost of untreated mental-health problems to society as a whole has been widely studied. According to the Conference Board of Canada, depression and anxiety cost a cumulative \$50-billion in lost productivity. According to a recent report from Children’s Mental Health Ontario, the provincial economy loses \$420-million a year when parents stay home from work to look after children who struggle (and some of those children are on wait lists of up to one and a half years for treatment.)

As the Canadian Mental Health Association’s research has shown, more than half of us consider depression and anxiety to be at “epidemic levels” and yet 1.6 million Canadians feel they’re going untreated. The CMHA has called for a federal parity act to bring mental-health spending “into balance” with spending on physical health (right now, only 7.2 per cent of health-care spending goes to mental health).

This has not exactly been a hot-button issue on the election trail, although both the Liberals and the NDP have pledged to increase their funding commitments, as well as supporting a national pharmacare plan. But the evidence of crisis is there, especially among young people.

At one campaign stop, a young woman told NDP Leader Jagmeet Singh that she and her friends struggled with depression and anxiety. He listened and told her, “Please get the help you need.” “I can’t afford it,” the woman interrupted. “A therapy session is \$200”, and there’s “a long wait time” for publicly available support. (At this point, I was hoping the young woman would run for office so I could vote for her.) Mr. Singh responded that his

party would make the system work for her, with “all the checks and balances ... I don’t care what the cost is.”

It takes guts to admit these things, especially publicly, and the young woman became emotional. I’m glad she spoke up, because someone needs to. Whether anyone listens is an entirely different matter.■

—Elizabeth Renzetti, *Globe and Mail*, Oct. 18, 2019

Negative Thinking: A Most Dangerous Addiction

We can't stop thinking about the things that make us feel terrible because we're caught in the mind trap

Nancy Colier

Have you ever noticed how much time you spend thinking about negative or painful situations, ruminating and replaying what’s not working in your life?

It’s not just you. The last statistic I read claimed that 80 percent of our thoughts are negative and 95 percent are repetitive. Strangely, the more negative an experience, the more we return to it. Like vultures to a carcass, we’re drawn to what hurts.

As the Buddhist saying goes, we want happiness and yet we chase our suffering. Why?

What’s at the root of our mind’s addiction to suffering?

Why do we compulsively cling to our pain, and how can we change this unhelpful habit of ours?

We return to our suffering because, fundamentally, we’re trying to make the negative experience come out a different way.

Our mental replays are attempts to re-script what we don’t want into a new reality. If we can just understand our pain more clearly, spend more time with it, we’ll be able to figure it out and make it go away. If we can know the cause, who’s to blame, and what needs to be done about it, we’ll be okay.



We hold onto our pain, paradoxically, in an effort to figure out how to let it go.

With pain or any sort of negative experience comes a host of uncomfortable feelings. In response to the feelings we don't want to feel, our mind takes control and steers us in a more familiar direction. Over and again, the mind restructures and reframes the contents of our pain in an effort to avoid directly feeling it.

The mind always will choose to think about pain rather than experience it directly.

So, we counterintuitively cling to suffering as a way of taking care of ourselves. Continually thinking about what has hurt us helps us feel like our pain matters, that it didn't happen for no reason, and that it won't be forgotten.

Our ruminations award our suffering importance and value, which it doesn't always receive from those it wants it from. To stop revisiting our pain can feel like abandoning it, moving on before it's truly been heard or taken care of.

Pain is also profoundly intertwined with our sense of identity. We remind ourselves of our pain as a way of keeping alive our personal narrative—the story of me, what's happened to me, and my life. We're deeply attached to our stories of suffering. In one way, you could say we love our pain.

As a result, we're reluctant to let it go, even when it's no longer useful or active. To do so would be to lose touch with who we believe we fundamentally are.

If we didn't keep reminding ourselves of our story, we might forget who we are in our minds—and then what? Who would we be, and what would life look like if we didn't relate from an already formed idea of who we are?

[On] an existential level, returning to our suffering allows us to feel a primal sense of I-ness, to feel that we exist. We experience ourselves as a distinct self when we're thinking about a problem. With a problem in its grasp, the mind can feel alive and working. And be-

cause we imagine ourselves to be synonymous with mind, our sense of self is also alive and strong in this process. It is actually through the process of thinking that we create a sense of self; we literally think ourselves into existence.

To give up ruminating over problems feels threatening at a primal level. How would we know that we were here if we didn't keep engaging the mind [with] the very activity that allows it to feel itself? What would happen if we stopped remembering and reestablishing who we are all the time? Without an agenda of what needs to be fixed, we literally lose our separateness from life.

Our addiction to suffering, at some level, is driven by a desire to feel better. But, regardless, the result is that it makes us feel worse and causes us to suffer more even than we actually need to. What can be done, then, to

break this addiction to pain?

Solutions:

1. Awareness

The key to breaking any habit is awareness.

Start noticing those moments when you're actively choosing to revisit your pain, to literally direct your attention back to what could bother you. Become conscious of your tendency to interrupt moments of peace with morsels of suffering. Notice that you are doing this to yourself.

2. Acknowledge That You're Caught

When you notice that you're down the rabbit hole in your story of suffering, take a moment and acknowledge that you're there, that you're caught. Say it out loud, "Wow, I'm really caught." "I'm really doing this to myself right now," or whatever words fit. Stop for a moment and—with kindness—be with yourself exactly where you are. Acknowledge the truth of feeling powerless or stuck inside your pain story.

3. Inquire

Ask your mind (without judgment) what it's hoping to accomplish in luring your attention



back to your suffering. Is it to figure out your problem, make it come out a different way, make your pain feel heard? Do you need to remember the pain to protect yourself from it happening again? Is it scary to just feel good? Does remembering your problem ground you?

Get curious about your mind's intentions: Does the rehashing and ruminating lead you to peace? Does it make you feel better?

Eventually, you will discover that trying to get to peace with the mind is like trying to open a lock with a banana—it's simply the wrong tool. The next time you return to the scene of your pain, you can remind yourself that more thinking doesn't actually work, and you will know this from your own experience, your own inquiry. Failure is a great teacher, here.

4. Shift Your Focus From Thinking About the Problem to Actually Feeling It

Sense where and how in your body, through what sensations, you are experiencing this pain story. You can place your hand on your heart as you do this and offer yourself some kind words, perhaps even a prayer of healing for this suffering. Unhook from your head story and drop into a body-felt experience.

5. Say 'No' or 'Stop' Out Loud

We can learn to just say "no" to our mind's inclinations just as we say "no" to a child who's doing something that will harm her. Sometimes a wiser and more evolved part of us has to step in and put a stop to the harmful behavior the mind is engaged in. Say "no" or "stop" out loud so you can hear and experience it directly through your senses, rather than as just another thought inside the negative-addicted mind.

6. Ask Yourself, What's at Risk if You Let Go of Your Pain?

Investigate what feels dangerous about living without reminding yourself of what's happened to you and what's still wrong. Make the active choice to not fill your now with the past. Be bold: Create a new identity that's not pieced together from your personal narrative, but always fresh and endlessly

changing.

In the process, you will discover that you can be entirely well and happy at this moment without having to go back and make anything that came before it different. ■

—*The Epoch Times*, April 28, 2019 (updated Feb. 9, 2020). Nancy Colier is a psychotherapist, interfaith minister, public speaker, workshop leader, and author of *"The Power of Off: The Mindful Way to Stay Sane in a Virtual World."* For more information, visit NancyColier.com

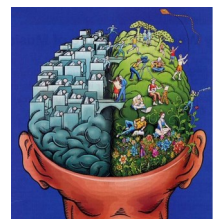
Brain Development in Children: Making the Most of Brain Neuroplasticity

Brain Neuroplasticity and Brain Development in Children

Did you know that 90% of a child's brain develops during the first 5 years of life? Baby brain development sets the stage for the child's intelligence, emotional stability and personality.

Research also shows that parental involvement with a child during these early years is directly related to the child's vocabulary development, reading readiness and eventual academic achievement.

In fact, a baby's brain begins development in the early embryo when cell division proliferates into millions of neurons in the brain. Soon after birth, billions of neurons begin making connections with each other to create neural pathways within the nervous system.



Each neuron has the ability to make as many as 15,000 new connections. In a strong [and] healthy brain, these connections become the wiring or circuitry that defines the child's experiences and capabilities.

An infant's brain at birth has 100 billion neurons. If the brain is not stimulated from birth, these neurons wither and die, impeding the

child's ability to learn and develop properly.

The brain of a 6-month-old infant is at least 25% the size of an adult brain. By 3 years, a child's brain is about the size of an adult brain.

It is during these early years of neuronal growth and proliferation that the brain is most neuroplastic.

This means the brain is most malleable and formative during these early years.

The Role the Environment Plays in Brain Development in Children

Environmental factors such as nurture, love, stimulation and proper nutrition have a direct impact on the psychological, physiological and cognitive development of the child.

Emerging research shows the importance of essential fatty acids like DHA in promoting the cognitive functions and development of children. Their intelligence and mental stability can be enhanced with brain food.

In fact, the environment can change gene function and determine how the brain develops. Social and emotional factors, like nurturing and love, can also alter genetic expression. That's why early stimulation is crucial for brain development in children. The brain grows like a sponge as it absorbs input from the world around it.

Animals in the wild have much greater brain volumes than animals raised in captivity. Why? Animals in the wild are exposed to greater stimulation. Similarly, children exposed to opportunities for stimulation in early life make more synaptic connections in the brain.

Stimulation provides opportunities for these connections to occur. And the more these connections are made, the greater the cognitive and social intelligence of the child.

Music, for example, stimulates the cognitive, verbal and emotional centres of the brain. Music is vital to brain development in children. Social interaction is critical to brain develop-

ment in children.

What Kind of Activities Promote Cognitive Stimulation?

Music, art, exercise, books and play — all of these activities stimulate the child's mind. Babies should also be encouraged to explore and play safely. Allowing an eight-month-old baby to crawl safely around a room nurtures the development of his brain. Toys are also means for safe exploration.

By the same token, a toxic environment can kill brain cells. [Familiar use of] alcohol, drugs, anger, stress and abuse produce high levels of cortisol (stress hormones) in the child's brain. Cortisol can cause brain cells to wither, thus reducing the connections between cells in the brain. New research suggests that loss of brain connectivity is the cause of aging. Do we want our children's brains to age even before they have a chance at life?



Babies who grow up in a loving, nurturing environment develop strong emotional bonds with their nurturers. These emotional bonds can become buffers protecting them from the negative impact of stress. I cannot emphasise

enough how much the early environment of a baby's experience is critical to brain development in children.

Because of brain neuroplasticity, our direct impact on the child's development is critical. A new study done by a team of researchers at McGill University shows that traumatic experiences in childhood can alter the genetic profile of the brain. Known as "epigenetic alterations," these changes in DNA can occur even before birth — during gestation. Researchers also found epigenetic alterations in the stress-response genes of suicide victims who had suffered abuse or neglect during childhood. These alterations had compromised their ability to deal with stress.

Research also shows that the expression of "violent" genes in youth can be moderated through family and social interventions. Something as simple as having a daily meal

with parents can alter the way a child with the genetic DNA for violence actually behaves.

As parents and grandparents, we have a responsibility for the wellbeing of our children. This wellbeing goes beyond food and shelter. This wellbeing is the security that allows them to grow into independent, confident human beings who will in turn pass on this Light to their children.

Why is Gamma Wave Activity Important During Brain Development in Children?

Gamma wave activity in brains of infants provides a window into their cognitive development and language skills. The first 36 months of a child's life are crucial for laying the groundwork of a healthy, intelligent, curious and creative mind. From 16 to 36 months, the child experiences a tremendous growth spurt in language, increasing vocabulary to more than 1000 words.

Dr. April Benasich, a professor of neuroscience at Rutgers University in Newark, and her colleagues have recently identified the role gamma wave activity in the frontal cortex plays in the brain development in children during the first 3 years of life.

What Are Gamma Waves?

Gamma waves are fast, high-frequency rhythm brain waves associated with higher level mental activity when higher cognitive functions are engaged. In general, gamma waves are associated with insight and consciousness when the brain comes to a higher form of information, such as the "aha moment," precognition or intuition. The gamma brainwave state corresponds to frequencies of 40 Hz or higher.

Studies have found that seasoned meditators (like Tibetan monks) produce high-frequency gamma waves during their meditative state. Many researchers account for this unusual level of gamma waves to the mental training of the monks.

What Does Gamma Wave Activity Mean for Brain Development in Children?

In her study of children 16, 24 and 36 months

old, Dr. Benasich found that those with higher language and cognitive abilities showed higher gamma power than those with poorer cognitive and language scores. She also found that high gamma power was evident in children with better attention and executive functions control. These children had the ability to moderate their behaviour when told to do so.

By contrast, infants with low cognition and language skills showed below average gamma activity.

Through her research, Dr. Benasich has identified a window during which dramatic linguistic and mental growth can be seen to correlate with gamma wave activity.

This window can be used to identify children at risk of language problems. By measuring gamma activity in the frontal cortex, doctors will be able to evaluate the status of brain development in children; they will also be able to make necessary interventions at critical points to ensure proper mental functioning.

What Are the Effects of Trauma and Stress on Brain Development in Children?

Early brain development sets the stage for the child's physical, emotional and mental health in later life. In the past 15 years, we have discovered much about the brain's plastic and malleable nature, specifically its ability to develop new circuitry in response to experience.

Contrary to the well-used adage that you can't teach an old dog new tricks, neuroscientists are discovering that the immense formative power of the brain is infinite; it can change, even in old age, if it is given proper encouragement and stimulation.

A child's brain is even more malleable, which means that every experience in early life has a significant impact on brain development. Growth in the brain is predicated on neural connections that create neural pathways within the nervous system. Connections evolve into wiring or circuitry that define the experiences and potential of a child.

Source: <https://www.dornchiropractic.com/fileupload/Brain%20Development%20in%20Children.pdf>

How minding our thoughts is a prerequisite to controlling our emotions and our experience of life

Scientists continue to find ways that our thoughts help create the world around us. That makes learning to supervise how you think critically important to have the best life humanly possible.

Your body and the world around you [are] a virtual reality that was manifested by your thoughts. Your virtual future is being created right now as we all think. We are co-creators of our good and bad reality, virtual heaven, or hell on earth.

Researchers in transcendental meditation found that when thousands of meditating people (synchronized) meet in one location and focus their thoughts (coherent) on peace and love, violence in that location drops.

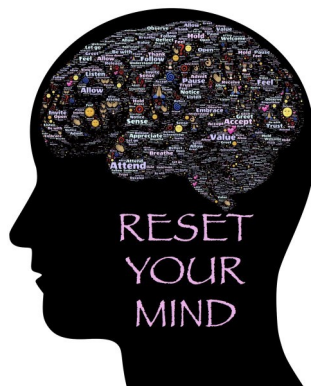
On the other side, a 2012 study by psycholo-

When on autopilot, your mind wanders almost of its own volition. You analyze, second guess, ruminate about past regrets and worry about the unknown future. This unsupervised thinking creates emotions that make you miserable, anxious and depressed.

Bruce Lipton is a former researcher at Stanford University's School of Medicine, a developmental biologist, and early advocate of the potential role epigenetics can play on gene expression. He made the controversial assertion that thoughts can alter gene expression.

While lounging in those comfort zones, you allow life's golden opportunities to pass by. When you later reenter the world, you beat yourself up by saying you could have done this or should have done that, things you may have done had you not been so fear influenced by the conditioning of your unsupervised thinking.

When you use this ability to supervise the tendency of your brain to think habitually, you switch off the autopilot and keep your mind engaged. Then you have the power to



self-regulate how to think, feel and act.

And now you're thinking, *Come on, all I have to do to create a kind of heaven on earth is supervise my thinking?*

According to the mystics of our time and past sages, from the Stoics to the Buddha, this is the only way any of us can create a better reality. Philosophers and spiritual leaders have been trying to tell us this for over two thousand years. Scientists are finally catching up to them.

The field of integrative medicine incorporates the mind and spirit to help heal the brain and body. Meditative practices, clinical hypnotherapy, and the mindfulness revolution all rely on supervised thoughts to ease stress and facilitate healing.

At some point in our not-too-distant future, we'll no longer be able to get away with blaming other people or our circumstances for the pain and suffering we sometimes experience. If you do, someone might interrupt you and say, *"Hey, you created that experience. If you weren't so lazy, you could've just as easily created a better experience. Stop whining and start supervising your thoughts like the rest of us. Our collective consciousness is depending on you."*

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Source: The Epoch Times, JULY 11, 2019

When Trauma Gets Trapped in the Body

How we can overcome the shame and face the pain of life's unexpected jolts of agony

Conan Milner

Imagine if the sound of footsteps made you fear for your life. It's a feeling author Karen Stefano has suffered with for over 30 years.

"When I go out on my runs, I'm very conscious of anybody running behind me and the sound of feet slapping concrete," Stefano said. "Sometimes I want to pat myself on the back about how I cope, but then I go through episodes where I think, 'Dammit, I haven't grown at all. I haven't gotten over this'."

Not all footsteps trigger a panic attack, but Stefano never knows when her fear will strike. She recalls one episode a few years ago where she was walking down the street on a sunny San Diego morning. It was a safe area. Plenty of people were milling around. But when Stefano heard the sound of a man jogging behind her, she became overcome with dread.

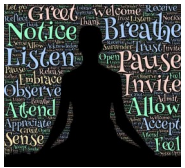
"I spun around and almost screamed at the poor guy. He was just mortified and apologized profusely even though he had done absolutely nothing wrong," she said.

Stefano explores the source of her fear in her new book, *What a Body Remembers: A Memoir of Sexual Assault and Its Aftermath*.

In the summer of 1984, Stefano was a 19-year-old sophomore at UC Berkeley. One night, as she was walking to her apartment off campus, she heard the footsteps of a man who would cast a long shadow on her life.

As she made her way to her apartment building just before midnight, Stefano saw the man on the street. At first she dismissed his presence—probably just a grad student—but once she heard his footsteps change course and follow her into her building, she felt a twinge of concern. A few moments later, the man's wild blue eyes met hers and his motives became clear.

"My body knew his intentions," she said.



The man cornered Stefano in the tunnel-like concrete hall that led to her apartment. He revealed a knife, and grabbed her 110-pound body tightly from behind. He held the knife to her throat with one hand and covered her mouth with the other. She was stunned at first, but then she began to scream. Her attacker struggled to silence her, but her screams only grew more ferocious. As the sound of neighbors opening their doors crept into the hallway, the attacker released Stefano. She fell to the ground as his footsteps trailed off into the night.

Mark of Shame

Stefano sustained little physical harm—just a puffy bruise on her lips where her assailant gripped her mouth—but even today, the aftermath still lingers like a scar that refuses to heal. She says the worst part is the shame that accompanies it.

“Back in 1984 PTSD was not a well-known term. It was just coming into the lexicon. I certainly didn’t know there was a name for what I was going through. I didn’t cope. I just denied what I was experiencing with the mantra: ‘I’m fine’.” Stefano said.

Part of what generates shame for a victim following trauma is a loss of control. First, you find yourself at the mercy of high-stress circumstances. Then, your panic gauge seems to be broken. Days, weeks, or even years later, when it’s objectively clear that there’s no danger in sight, your body may still react as if another threat is just around the corner. You try to convince yourself that everything is fine, but your body is still stuck on high alert.

“There is a societal pressure to project an image of having it all together,” Stefano said. “But you don’t just get over it, as much as you’d like to.”

Why does fear maintain its hold on us long after the traumatic event has passed? Accord-

ing to Erica Hornthal, a licensed clinical counselor and board-certified movement therapist specializing in PTSD, your body isn’t working against you. It’s just trying to protect you.

“At the heart of it is safety,” Hornthal said. “This is a survival mechanism that we’ve had since the beginning of time. It’s that very primal part of us that we forget is there sometimes, but that’s the part that’s really trying to keep us safe.”

Hornthal describes a panic attack as a kind of flashback, plunging you into the past to relive the feelings of a traumatic event, even when your environment poses no actual threat. She explains that memories aren’t formed in the same way in trauma as they are when we’re

not under stress. So when we confront a trigger that resembles the traumatic event—like footsteps, for example—those same fight-or-flight feelings can come flooding back.

“The body doesn’t know everything is okay. It’s just responding to the stimulus,” Hornthal said.



Giving Voice to the Pain

Hornthal says that when trauma victims are faced with losing so much control, they often blame themselves as a way to regain some control. However, this only amplifies the shame.

“We can internalize it and make ourselves feel like we brought it on. We will rationalize that it was our fault: ‘If only I would have done this or hadn’t done that’,” Hornthal said.

According to Stefano, we can only counteract this shame by finding a voice for those feelings.

“By talking about it, you take away the shame,” Stefano said. “Secrets don’t help you heal. It’s only by shedding some light on our issues that we can make them go away. We can make them more manageable, then we can help other people.”

But being able to process and talk about these feelings can take a lifetime, especially if you don't have the skills or the support necessary when the trauma first strikes.

Stefano says her panic came and went over the course of her life on its own mysterious time frame. It slowly faded a few years following the incident. And it seemed to disappear completely during the years she worked as a criminal defense attorney. During that time she represented many violent individuals, some of whom committed sexual assaults similar to the one she suffered. But Stefano

says she didn't feel any panic, only compassion.

"It's a paradox, but I came to develop compassion for these very flawed human beings," she said. "I was honest to God the only person on earth fighting for them. Many of them didn't have a family. They didn't have money. They didn't have any prospects. They were severely psychologically damaged, and the prosecution was out to string them up."

Stefano's panic returned with a vengeance about five years ago when she was enduring several new traumas: financial problems, a devastating divorce, and her mother's dementia. During this time, the old memories and panic attacks related to the assault of her college days came flooding back. The difference was that now she had acquired wisdom, perspective, and knowledge she lacked when she was 19.

"That's when I started to actually do some beneficial coping mechanisms, like going to therapy," she said.

Hornthal sees a similar pattern in her patients. She says even those who think they've processed their experience and have successfully moved on are often forced to confront these feelings again.

"They'll say, 'I thought I processed this. Why is it coming back?' It's because a part of your brain is still storing it," Hornthal said. "As we've seen with the recent Me Too move-

ment, people are coming out 15 or 20 years later to tell their stories, and it's often because they're just not able to speak about it [until then]."

Listening to the Pain

In addition to talking with a therapist, Stefano has also found relief through running, and EMDR (Eye Movement Desensitization and Reprocessing)—a proven trauma recovery method that involves lateral eye movements.

We typically think of talking as the primary mode of processing an experience, but movement may be a significant part of the puzzle. Experts say the body also needs a way to voice its own story in order for us to truly move on.

As a movement therapist, Hornthal believes addressing the physical body is essential for trauma recovery. She says movement is what allows the stuck feelings to resurface so that we can vocalize them.

"That's what it takes to release those trapped emotions, and for us to really rewire, reintegrate and change the brain," Hornthal said. "Movement is the first language that we learn. As we get older, typically our higher brain takes over, and we can start to rationalize why we feel a certain way. We don't necessarily listen to our body like we used to."

In addition to moving our body in ways to release the trauma, we also need to be open to what our body has to say once the feelings come bubbling to the surface. Most of us tend to ignore the signals our body gives us, but it's especially difficult when it's trauma-related because the messages our body has to deliver in these cases can be very painful.

"It's about identifying those feelings, and when you're working with trauma and people who have experienced incredible pain, a lot of it is painful," Hornthal said. "It feels counterproductive to feeling better. Why would I want to sit in my misery? I just want to feel good."



It's certainly not fun, but it is necessary. Because unless we take the time to sit in our discomfort and acknowledge the pain we feel, it will continue to haunt us.

Stefano sees the same dynamic playing out in her most recent trauma: her mother's passing. She died just a few months ago, and Stefano says she's watching herself do the same dance of denial she did when she was 19. She says she knows better now with everything she's learned, but still finds herself avoiding the pain.

"I believe our minds will do anything to avoid pain and processing pain," Stefano said. "But if your mind keeps pushing it down because you don't want to feel the pain, your body is going to make you address this one way or another. It says, 'We can do this the easy way, or we can do this the hard way'."■

—*The Epoch Times*, June 20, 2019

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... a place to which to return.

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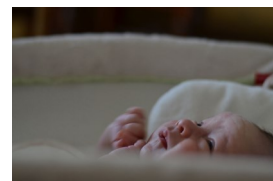
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ESSAY

All Children Deserve Far Better Than What This World Too Readily and Frequently Throws At Them

Frank Sterle Jr.

In the book *Childhood Disrupted*: it's written that even "well-meaning and loving parents can unintentionally do harm to a child if they are not well informed about human development" (pg.24). Regarding early-life trauma, people tend to know (perhaps commonsensical-ly) that they should not loudly quarrel when, for instance, a baby is in the next room; however, do they know about the intricacies of why not? Since it cannot fight or flight, a baby stuck in a crib on its back hearing parental discord in the next room can only "move into a third neurological state, known as a 'freeze' state ... This freeze state is a trauma state" (pg.123).



This causes its brain to improperly develop. It's like a form of non-physical-impact brain

damage. Also, it is the unpredictability of a stressor, and not the intensity, that does the most harm. When the stressor *“is completely predictable, even if it is more traumatic—such as giving a [laboratory] rat a regularly scheduled foot shock accompanied by a sharp, loud sound—the stress does not create these exact same [negative] brain changes”* (pg.42).

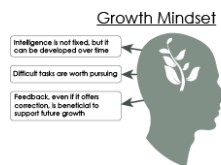
Furthermore, how many of us were aware that, since young children completely rely on their parents for protection and sustenance, they will understandably stress over having their parents angry at them for prolonged periods of time? It makes me question the wisdom of punishing children by sending them to their room without dinner.

Meanwhile, general society perceives and treats human procreative ‘rights’ as though we’ll somehow, in blind anticipation, be innately inclined to sufficiently understand and appropriately nurture our children’s naturally developing minds and needs.

Meantime, in protest to newly mandated elementary school curriculum that teaches something undoubtedly controversial, a picket sign read, *“We don’t co-parent with the government”*. But maybe a lot of incompetent yet procreative parents nowadays should.

People will procreate, some prolifically even, regardless of their questionable ability to raise their children in a psychologically functional/healthy manner. Thus I wonder how much immense long-term suffering might have been prevented had the parent(s) of a future tyrant received, as high school students, some crucial child development science education by way of mandatory curriculum? After all, dysfunctional and/or abusive parents, for example, may not have had the chance to be anything else due to their lack of such education and their own dysfunctional/abusive rearing as children.

Owing to the Only If It’s In My Own Back Yard mindset, however, the prevailing collective attitude (implicit or subconscious) basically follows: ‘Why should I care—my kids



are alright?’ or ‘What is in it for me, the taxpayer, if I support social programs for other people’s troubled families?’ While some people will justify it as a normal thus moral human evolutionary function, the self-serving OIIMOBY can debilitate social progress, even when social progress is most needed. And it seems this distinct form of societal penny wisdom but pound foolishness is a very unfortunate human characteristic that’s likely with us to stay.

As a moral rule, a physically and mentally sound future should be every child’s fundamental right—along with air, water, food and shelter—especially considering the very troubled world into which they never asked to enter. And the health of all children needs to be of real importance to everyone—and not just concern over what other parents’ children might or will cost us as future criminals or costly cases of government care, etcetera—regardless of how well our own developing children are doing. Simply mindlessly ‘minding our own business’ often proves humanly devastating.

I believe that high-school students should be educated for the most important job ever, even those who plan to remain childless. Understanding the science behind every child’s healthy/functional development can at least enable a prospective parent to make an educated decision on how they wish to go about rearing any future children.



If nothing else, child-development science curriculum could offer students an idea/clue as to whether they’re emotionally suited for the immense responsibility and strains of parenthood.

It would also teach how children’s mind/emotional development begins as early as gestation. Inside the womb, children are already aware of their mother’s emotions—and perhaps even later emotionally damaged by them.

According to an online article by body psychotherapist Linda Marks:

“When a mother both consciously and subconsciously wanted to be pregnant and welcomed her baby, the child thrived. When the mother either consciously or subconsciously wanted the baby, the child was fine. When the mother neither consciously nor subconsciously wanted the baby, the child felt the effects of this hostile emotional climate. I remember a story of a woman who not only didn’t want her baby but also resented his intrusive presence in her body.

“When the Italian doctor would use an ultrasound to view the baby as the mother talked about her resentments of him and the pregnancy, the baby would curl up in a tiny ball in a corner of the uterus, trying to make himself very small. Even in-utero, a baby can feel the power of his/her mother’s heart. When considering having children, making a thoughtful, heartfelt, integrated decision is important for the overall wellbeing of a child.”

Neurodiversity Could Be a Very Valuable Lesson

Along with the K-12 Sexual Orientation and Gender Identity curriculum already taught (at least in Canadian public schools), cerebral diversity curriculum could also be implemented. Through this the incidence of vicious bullying against, for example, students with an autism spectrum disorder might be reduced.

When all teachers are fully educated on ASD, there could be an inclusion in standard high school curriculum of a child development course, albeit not overly complicated, which in part would teach about the often-debilitating condition.

It would explain to students how, among other aspects of the condition, ASD people, including higher functioning autistics, are often deemed willfully ‘difficult’ and socially incongruent, when such behavior is really not a choice for them. Furthermore, when around

their neurotypical peers, people with ASD typically feel compelled to “camouflage” or “mask”, terms used to describe their attempts at appearing to naturally fit in. It’s an effort known to cause their already high anxiety and/or depression levels to worsen, an exacerbation that’s reflected in the disproportionately high rate of suicide among ASD people.

“I shall have to assert that impressions of the second year of life, and even the first, leave an enduring trace upon the emotional life of subsequent [neurotic persons], and that these impressions ... may furnish the earliest and profoundest basis of a [neurotic] symptom.”

—Sigmund Freud

If nothing else, such child-development science curriculum would offer students an idea/clue as to whether they’re emotionally/mentally compatible with the immense responsibility and strains of parenthood, especially with such special-needs children.

There could also be instruction in regards to children born with ASD. Low-functioning autism is already readily recognized and treated, but higher-functioning ASD cases are basically left to fend for themselves. ...

In great crises, almost every parent would go all-out to make their child feel secure; however, in stable times those parents may not notice their more subtly dysfunctional rearing. For instance, how many people are aware that even a parent’s prolonged silent yet nonetheless noticeable anger towards his/her young child can, if frequently practiced, leave the growing child with a strong sense of vulnerability? The perceptive child relies on the parent for survival and is therefore susceptible to hunger, etcetera, if the angry parent’s protection/provisions are withdrawn. It makes me question the wisdom of sending children to their room without dinner as punishment.

Meanwhile, general society perceives and treats human reproductive “rights” as though we’ll somehow, in blind anticipation, be innately inclined to sufficiently understand and appropriately nurture our children’s naturally developing minds and needs.

As a rule, a physically and mentally sound future should be every child’s fundamental right—along with air, water, food and shelter—especially considering the very troubled world into which they never asked to enter. ■