



HEALTH and HEALING



Healing and Health

The Ancient Art of Healing is rooted deeply in Womens' Culture of caring and sharing. From the beginning of time, Women have been most intimately connected with birthing, nurturing, preparing and storing food, and caring for the sick and dying. These experiences have increased our sensitivity and awareness, and through them, we have developed healing methods and practices essential to health and well being.

Before the age of technology, people lived closer to the earth, the rhythms of their lives and the rhythms of the seasons. People were guided by intuition. The connection between inner and outer worlds, body and minds, thought and action, were strongly sensed and felt. Healing springs from these connections, and from the recognition that there exists a universal life force which flows through and around all living things, animate and inanimate. This life force, or energy, is channelled between people when healing occurs. This energy flows through us and when it is blocked dis-ease occurs. When our bodies, minds, and spirits are connected and in balance our energy is flowing and we feel a sense of health and well being. Healing is a re-uniting and balancing of all aspects of our selves: emotional, physical, intellectual and spiritual.

Healing is an act of loving, of nurturance, and self love. Thoughts, emotions, past experiences, positive and negative, affect our health and well being. If we have repressed feelings of anger, grief, loss, self-hate, if we believe and internalise messages that we are worthless, stupid, inadequate and unloveable human beings, our energies are blocked, traumas are locked in our bodies and illness and disease manifest in our bodies, minds, and hearts. We become self haters, powerless victims who mistrust ourselves and cannot believe in our essential beauty, our power for self healing and possibility for hope and change. To work towards change all these aspects of our lives have to be examined, explored and experienced from the perspective of personal power and inner resources, using the positive power of love, positive techniques that restore our balance, and restore us to ourselves. Healing is an inner journey where we confront our beliefs about sickness and health, our beliefs about our power to heal, recognition of why a particular illness occurs, how it connects with the rest of our lives and experiences, and willingness to change and look honestly at our patterns of behaviour, our thoughts and our connection to everything around us.

Bob Hayes

FOR INFORMATION ON DAY OF RENEWAL PLEASE SEE PAGE THREE

PHILOSOPHY

The Antigonish Women's Association operates from a feminist perspective. This means that we are committed to women's values, goals, and ways of knowing. We strive for a dynamical structure that changes as the issues change and as the voices of the women themselves change. We celebrate the diversity among women and are committed to offering information about issues and options in a balanced manner so that all women, regardless of their point of view, are able to trust that the Association is an organization that supports women. The Board of Directors for the Association is a working group committed to the ideal of consensus in decision making; the consensus of the collection of women's voices among us. There is active encouragement for all women to feel free to develop, and to voice their own point of view. There is a lateral structure within the Board of Directors, and the Board encourages participation and input regarding decisions from the membership at all times.

Shirley Buckett

At an early age we instinctively respond to our parents' disapproval of our feelings by learning to control and suppress them. Usually we do this by controlling our breathing and tensing certain muscles. These responses evolve over time into unconscious postures or patterns which become triggered when we encounter certain feelings or situations associated with these feelings. After years of habitually avoiding our feelings, this reaction may take place so quickly and automatically that we hardly have a chance to feel the initial emotion.

Growing up in a culture that discourages us from acknowledging and expressing our feelings may lead us to believe that certain feelings are wrong or bad. Which feelings do you judge as wrong or bad in other people? In yourself? How do your judgments about certain feelings influence your willingness to experience these feelings?

We may look for ways to avoid experiencing certain feelings we believe to be unacceptable or inappropriate. We may have fears about the safety of experiencing our feelings and be confused about what to do with them. We may turn to alcohol, drugs, sleep, sex, or suicide in an attempt to escape from our feelings. Or perhaps we will try to keep ourselves distracted by compulsive busyness, workaholicism, eating, or watching T.V. Other defenses against experiencing our feelings are intellectualizing, analyzing, explaining, judging and censoring what we feel. When we try to deny what we are feeling, or label it as childish, or consider it an obstacle in our way, we are inhibiting the experience and expression of our feelings. Many problems arise from hiding our feelings from ourselves; many other problems stem from hiding our feelings from others.

Experiencing our feelings enables us to remain connected to ourselves, others, and to life itself. Getting to know our feelings is part of getting to know ourselves as a unique person. Feelings are natural responses that provide us with useful messages from which we gain insight and the ability to make wise choices. Feelings, even painful ones, are allies, telling us what's going on inside and, often, how to respond to the situations in our lives.

It's the nature of feelings to ebb and flow, to change. You can be furious one hour, sad the next, full of love an hour later. Pain turns into rage, and rage into relief. If feelings are not jammed up, they shift with a natural rhythm that matches our experience in the world. Paradoxically, the best way to get rid of a feeling is to feel it fully. When you accept and express a feeling it often transforms. Many of us no longer experience this natural process because we have become disconnected from our feelings and are not always aware of what we feel. To restore this process and reclaim our feelings remember these three basic steps: 1) Stay with the feeling, 2) Name the feeling, and 3) Express the feeling.

STAY WITH THE FEELING

Most of us spend our lives racing to stay just one step ahead of our feelings. Slow down enough to ask yourself, "How do I feel?" Don't run from it, or try to cover it with humor. Check in with your body. Feelings are not thoughts. Feelings are felt in the body. If no one paid attention to what you felt as a child and you never learned to name your feelings, you will be starting at the beginning, teaching yourself to read the messages your body gives you.

Choose a private, quiet place and sit quietly, perhaps with your eyes closed. Breathe deeply and slowly and just let the feeling come up in your body. Try not to think about anything except allowing yourself to stay with the feeling. You may experience a wide range of physical sensations: tightening in your throat, trembling, tightness in stomach or chest, shortness of breath, moistness behind your eyes, tingling in your hands, fullness in your heart, tightness in your jaw, neck, or shoulder, headache, etc. If you are afraid that the feeling might overwhelm you or "get the best of you," be reassured that for months or even years you have stopped that feeling and that your ability to do so isn't going to immediately disappear. Remember, your feelings exist for a good reason. You may not know exactly what the feeling is, but you do know something is going on inside you. In order for a feeling to be useful it must be allowed to stay around for a while to gather some strength and build a relationship with its owner.

NAME THE FEELING

Many women have difficulty accurately naming exactly what it is they feel. Unless we had the good fortune to grow up in an unusually healthy family, many of us were never taught specific names for our feelings. Instead of being helped to identify or distinguish specific feelings, we only learned the difference between feeling bad or feeling good. Consequently a wide range of feelings get mislabeled by women as depression. For some women it may seem safer and more desirable to feel "depressed" than a specific feeling we are uncomfortable or unfamiliar with. Depression may also be a more appealing label because it is accepted as "normal" in women.

Sometimes a list of feeling words is helpful in identifying or naming a feeling. Try to use the actual name of a feeling, like glad, sad, mad or scared. You might think, for example, "I'm feeling cheated right now" or "What I'm feeling now is determined" or "This makes me feel uncomfortable" and so on.

Even if you are unsure what the feeling is, name it anyway. The very process of naming it will help you know if the name is accurate. Try saying the name of the feeling word out loud. Pay attention to your feelings as you say each word. What sensations does it stir up? How does your body feel? Do some words describe the feeling more accurately than others? "I feel good. I'm feeling happy right now." This might eventually lead you to "Actually what I'm feeling is satisfied and proud." You gradually zero in on specific feelings.

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Naming a feeling helps us understand the feeling and accept ownership of the feeling. "This is my feeling." Feelings might share names but, like their owners, they are unique.

EXPRESS THE FEELING

When we express something we get what's inside, outside. The feeling needs to be given some type of physical expression outside the body. In an ideal world, you could express your real feelings anywhere, any time. Since we don't live in such a world, we need to make a balanced decision each time we consider whether to express our feelings directly to another person. Balanced decisions take into account feelings, intellect and judgement. When communicating feelings to others it's important to be able to express what you feel in a way that's satisfying and also increases the likelihood it will be heard. Timing is also important.

Sometimes it is not in our best interest to express feelings directly to the person we have the feelings toward. Our feelings in such cases are still valid and should not be hidden or swallowed. We just need other outlets or ways of expressing them. Would talking with someone we trust or with a counsellor provide us with the opportunity we need to express what we feel?

Are there any physical outlets we can use to express our feelings (pounding pillows, running, swimming, dancing, screaming in the car, twisting a towel, beating a drum, etc.)? Are there any artistic or creative outlets for this feeling (drawing, painting, sculpting clay, letter writing, journal writing, music)? Are there any spiritual ways in which we can connect with or express our feelings (ritual or ceremony, imagery, meditation, prayer)? It is equally important to find ways to express what we consider positive feelings as well as sadness, anger, etc.

Here are some examples of feelings being expressed: snapping one's fingers to express frustration, writing a symphony as an expression of love, speaking out to express one's rage, yelling to show enthusiasm, jumping for joy, crying from sadness, dancing from happiness, and sighing from contentment. Some expressions last a moment, others span a lifetime. The possibilities are endless.

How feelings are felt, named and expressed is profoundly important because it determines the very quality of our lives. Allowing our feelings to be transformed through this natural process assures us that they do not become buried and later attack us in the form of addictive behaviours or serious illness. To decide not to express a feeling at any given moment is not the same as burying it, even though the sooner and more immediate the expression, the better. One can, and at times should postpone the expression of feelings. The danger is that we will not return to the feeling and give it expression later, and that it will slip into the burial vault. Keep in mind the danger of postponement: burial. Feelings that are not acknowledged do not go away, they go underground and bind us to the past.

What feelings do you tend to suppress or bury? Fear? Anger? Happiness? Write your answer on a piece of paper and carry it in your wallet. Take it out and look at it occasionally as a reminder to honor what you feel.

FEMINIST COUNSELLING SHIRLEY BURKETT, M.ED.

Personal Growth, Healing from Trauma, Substance Abuse, Career Development, Life Stages, Grief and Illness.

For Information or appointment Please phone 863-0277

"For centuries women have been told not to be "hysterical." If they felt strongly about something, they were not lauded for their commitment and passion but told that they were being unreasonable. If they expressed a grievance with anger they were told they were out of control." Maureen Murdock, The Heroine's Journey



DAY OF HEALING AND RENEWAL

AN OPPORTUNITY FOR WOMEN TO COME TOGETHER TO REFRESH AND RENEW SPIRITUAL AND EMOTIONAL ASPECTS OF THEIR LIVES. A TIME TO REFLECT ON LIFE'S CHALLENGES AND EXPERIENCE THE WITNESS STATE

WHEN: SATURDAY, JUNE 25TH
WHERE: COUNTRY SETTING -- SIMPLE ENVIRONMENT

LIMITED ENROLMENT

CALL BARBARA HAYES
HEALING DIMENSIONS 286-2344

Barbara Hayes C.M.T.

206B Kirk Place 219 Main St. Antigonish

Therapeutic massage/personal growth counselling
Stress reduction/emotional release work

BY APPOINTMENT 863-2344

Dear Friends:

Most people who know me are aware that I am "into" health promotion in any way possible. In a recent conversation with AWA members, I realized not everyone knows about one of the best preventative screening programs available at the Halifax Shopping Center, in Tower, Suite 103. This walk-in service is available for any woman, with women over 50 receiving a personal invitation. Although not quite 50 (yet) I decided to look into this Breast Screening Program and "walked in." I was pleasantly surprised to find the most inviting waiting room ever - pleasant wall paper, almost informal atmosphere and the greatest receptionist who put me immediately at ease. After perhaps five minutes, I was ushered into a receiving room by the Screening Technician (no uniform I might add) - comfortable gear! She had me sit down and we discussed the fact that this was my second mammogram. My first was not in my own community because the waiting list was nearly a year long. It was in a nearby hospital, with an ordinary, cold, dark, x-ray machine which was uncomfortable -- and my breast vanished from sight temporarily (I didn't like that!) I mention this for a reason, so please bear with me and I will explain shortly. The technician allayed my discomfort, and said this was the only type of work she had done since the clinic opened and most participants return year after year. Diplomatically, the technician asked me to show her how I do my monthly breast check-up. I showed her and felt pretty confident (being a nurse and past breastfeeding Mom after all... I know all about breasts!) She was so "nurturing" and showed me how my method was not quite thorough enough to get the sneaky lumps or bumps that could be deep in the breast tissue. - none know that each of us has totally different breast tissue - none is the same? So as I was gently "cued" I impressed myself by finding more lumps which we kept track of by counting). There is so much more to searching for these little bumps/cysts than I was aware of (posture/depth) and it made me wonder if my young C.B. friend who died three years ago under the age of 30 ever found her deepest bump/lump. By the time she found any and was put on a waiting list for X-ray, it was too advanced. By the time her turn came for X-ray, she was already dead, leaving three young children and a puzzled husband, who is still grieving, behind. Most of us have lost someone to breast cancer and if we haven't, statistics show many of us will. In an attempt to avoid becoming a statistic, I strongly urge you all not to take your health for granted.

If I had been interested in viewing a film there was a variety of choices to watch by myself in the receiving room. I opted out of that for my first trip as I wanted to get on with "it" - the Vice, or as some call it, the X-Ray of my two breasts. We walked through to the third room where "it" was located. The technician asked me to check my breasts, then asked permission for her to do so (which surprised me) - Just by her thoroughness in checking for tender spots, lumps, bumps and cysts, I saw she really knew her stuff. She was more thorough than my doctor whose examination seems briefer every year. Anyway, that being done and tender spots recorded, I was introduced to the latest in Mammography technology - not an intimidating grey/black machine, but a "see-through" apparatus. It looked like a plastic tray to me, only "see through." Once it was positioned correctly, she gently and firmly lowered its see-through cover on top, and double-checked my comfort level (which was fine because I could actually still see my breast going through the procedure, unlike my first unpleasant experience with old fashioned machines that looked/felt like a vizor, and left me wondering if I'd get my breast back again!!!) Unlike that first experience, this was wonderful and over in seconds.

You may wonder why I have taken up so much space to explain my own journey into this preventative health measure, but having talked with multiple people about their uncomfortable experiences, and some not planning to go for re-checks because of it, I am sure that if more of us heard about positive experiences such as this we would not neglect our bodies. Some of us do. Between the pleasant, non-intimidating, non-clinical environment, and the nurturing, yet very efficient technician, and a "see through" non-threatening mammography machine, I found this to actually be an educational and pleasant experience. You do not need a referral to this NS Screening Program, nor an appointment, (though you may call to make one if you desire) to begin your preventative program. If your x ray does show changes that should be followed up they write you and your doctor so that you can go to your local area for further diagnostic work. For this reason it looks that we may not get funding for Mobile Clinics to go from community to community doing this work since it "appears" that MSI would be paying out twice should follow up be necessary. I feel this is short sighted considering that it might actually be a teaching/prevention tool of breast cancer that it is worth the effort. Statistics still show that women are still dying due to breast cancer which is often correctable or preventable. Meanwhile, live life to the fullest!

With Affection and concern,
Judy (Donovan Whitty)



Greenham Common Women.

Sue Adams

Many of us have heard of the legendary Greenham Common Women's Peace Camp, which was begun in 1981 to protest the deployment of U.S. nuclear weapons in southern England. Many of us remember the inspiring pictures of women circling the military base, weaving symbolic parts of their lives into the fence, dancing on the missile silos. Many of us probably also assumed that the Greenham Women had long ago packed up and left. A short magazine article that came through my hands in January said otherwise.

I was lucky enough to be able to spend a little time at Greenham while I was in England recently, and got to know some of these remarkable women whose unflinching resistance to nuclear weapons continues to result in arrests, court cases, and often prison sentences. Most of the women who are at the camp full-time live in tents year-round, and still face periodic evictions by the local bailiffs.

At present, most of their campaign of nonviolent direct action centres around cutting the fence and entering the Burghfield Atomic Weapons Establishment, and marking the convoys which are used to transport plutonium-based Trident missiles to Scotland.

These convoys assemble about once a month, and travel for three days throughout the length of Great Britain to Faslane, where the missiles are loaded onto submarines. There is no indication on the convoys, which travel on the public roads, that they are carrying plutonium, one of the deadliest substances known to humankind. The Greenham Women follow the convoy on its journey, and when possible mark the missile transporter by throwing bright paint over it.

This action usually results in arrests and charges of "criminal damage" to military property. The women usually conduct their own defences in court, and often serve prison terms in lieu of paying a fine. While I was at the camp, three women, Claire Pearson, Lisa Medici, and Aniko Jones were awaiting sentencing for painting a convoy earlier this year.

On May 11th, Claire and Lisa were sentenced to a month in prison each for their act of "criminal damage". Aniko Jones, who did not actually commit the damage but who drove the car, was sentenced to three months. Aniko has lived at Greenham Common full time since 1987, and has served thirteen prison sentences for nonviolent direct action.

These three women, who speak with great animation about their activism, become subdued and pensive when describing their experiences in prison. I got the sense that this is a punishment which most of us who have not experienced it cannot even begin to imagine. One of the key elements is the enforced sense of isolation.

If ANYONE has time to send a card with just a few words of support to Aniko (the other two will be released before messages could reach them) I know she would appreciate it. Her address is:

ANIKO JONES
HER MAJESTY'S PRISON HOLLOWAY
IX PARKHURST ROAD
LONDON W7 ONU
ENGLAND



This dedicated peace-woman needs our solidarity right now.



FED UP!

SHOW UP!

JOIN YOUR FELLOW WORKERS AND THEIR FAMILIES ON SUNDAY FOR A MARCH
ACROSS THE CAUSEWAY TO PROTEST THE ANTI-WORKER LEGISLATION
CURRENTLY BEFORE THE N.S. LEGISLATURE.

BRING YOU UNION BANNERS. WEAR ANY CLOTHING THAT WILL IDENTIFY
YOUR ORGANIZATION

TIME: 2:00 P. M. SUNDAY, JUNE 12TH, 1994
PLACE: AULDS COVE SIDE - CANSO CAUSEWAY

Contact: Alex MacDonald, President at 625-1967 or Judy Castle,
Secretary at 625-2542

Voice of Women.

May 11, 1994

Hello to all the Voice of Women women!

I am writing this at turbo speed because as usual I have a thousand things to do in the short time that I am in my office undisturbed.... There is some Voice of Women news that I wanted to pass on to you. Here it is:

3) In the effort to launch a peace education initiative I suggest that we donate some peace education books to the Antigonish Regional Library (as a first step to reach the largest possible audience), and follow up these donations with a letter to schools in the district announcing which books were donated along with a short summary of each. This will require some money. With your permission I will put \$50.00 from our VOW account into a fund to buy books. Then I will thankfully accept all donations that each of you may be able to contribute toward these funds. We can all think of it as perhaps buying a book that we share with the county! I have enclosed a list of books

that are peace education oriented and ask that you peruse the list and mark all the ones you think would be either not good, good, or excellent choices for donations to the Antigonish Regional Library. If you have other suggestions please send them to me c/o StFX, Antigonish, B2G 2W5. Can you please send back this list with your ratings even if you can't donate now, with your donations if you can, and with your permission to take \$50 to start up the fund if you agree.

Following this launching, and depending on the interest, perhaps we could think about other peace education initiatives we may want to be involved with. Anyone can contact me at anytime to give me their ideas and I can pass the word along to others that are interested. Who knows, maybe we could even have a wee meeting somewhere down the road.....

4) I apologise for not getting to people with VOW news earlier, but the baby thing came up, and then the back to teaching thing, and now its the summer aversion to meetings thing. But I am working myself up to launching an all new series of Women's Peace Gatherings in the Fall - social, informal, gatherings to talk about peace issues of the day as the spirit moves us. One thing that went by the wayside last year was renewal of membership. Our agreement with NS VOW is that the dues are paid to Antigonish VOW, we get the NS Newsletter and the National Newsletter, and send only the National portion of the fees. NS VOW did not want a 'cut of the action' and was happy to foot the bill for postage since we are a small group. Given that National VOW is having financial problems it would be a good idea for everyone to renew their membership now - coinciding with the general meeting - I have enclosed forms that can be returned to me and then I will send the National Portion of the money off to Toronto. We still have a PO Box - Antigonish Voice of Women for Peace

PO Box 1015

Antigonish, N.S. B2G 2S3

or send it directly to me: Tara Callaghan, Psychology, St. FX, Antigonish, B2G 2W5, my phone number is 863-4951.

Books to Lend

WHO'S CALLING THE SHOTS? How to Respond Effectively to Children's Fascination with War Play and War Toys, by Nancy Carlsson-Paige and Diane E. Levin. Teenage Mutant Ninja Turtles might be all the rage, but they are driving many parents crazy. Children want all the toys and accessories, and many parents don't know how to cope with their children's incessant demands for imitative rough play. As reviewed in *Today's Parent*, *Mothering* and other magazines, *Who's Calling the Shots* offers a wealth of specific, practical advice to parents grappling with the ever-present reality of war play. 204 pages. Illustrations. Resources. \$15.95.

KEEPING THE PEACE: Practicing Cooperation and Conflict Resolution with Preschoolers, by Susanne Wichterl. A handbook for all parents, daycare providers, kindergarten teachers and playgroup leaders striving to create harmonious groups, to bolster children's self-esteem and to foster cooperative, creative interactions among young children. Over 35 innovative and inexpensive activities. 112 pages. Bibliography. \$15.95.

THE FRIENDLY CLASSROOM FOR A SMALL PLANET: A Handbook on Creative Approaches to Living and Problem Solving for Children, by Children's Creative Response to Conflict. Help develop a community in which children are capable and desirous of open communication; to enable children to gain insight into human feelings and become aware of their own strengths; and to help each child develop self-confidence about his or her ability to think creatively about problems and preventing and solving conflicts. Recommended by *Parents Magazine*, *The New York Times*, *Soljourner*. 134 pages. Illustrations. Resources. \$17.95.

SPINNING TALES, WEAVING HOPE: Stories, Storytelling and Activities for Peace, Justice and the Environment, edited by Brody, et. al., foreword by Holly Near. A vibrant collection of 29 wondrous stories for children of all ages about living with ourselves, each other and the Earth. Drawn from around the world and throughout history, the stories each contribute to a more compassionate, just and healthy world. Each story is presented with a brief history of the story, tips for the telling, and follow-up activities.

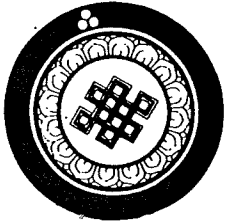


EVERYONE WINS! by Sambhava Luvmour and Josette Luvmour. This handy book is packed with over 150 cooperative games and activities that work well and are really fun! Materials and props are simple and inexpensive. The most important ingredient is humour. Founders of the Center for Education Guidance, the authors have taken special care to select games that are particularly helpful for resolving conflicts, enhancing communication, inspiring creativity and building self-esteem. 112 pages. Bibliography. \$10.95.

DISCOVER THE WORLD: Empowering Children to Value Themselves, Others and the Earth, edited by Susan Hopkins and Jeff Winters. For teachers, parents, and other caregivers helping children reach out beyond the classroom or home to engage in the world. Full of activities and resources. Discover the World enables adults to create an environment of respect and curiosity that allows children to feel their own worth, to appreciate the worth of others, to learn about different peoples and cultures and to explore nature. 160 pages. Bibliography. Planning charts. \$17.95.

A MANUAL ON NONVIOLENCE AND CHILDREN, compiled and edited by Stephanie Judson. This is an invaluable resource for creating an atmosphere at home and in school where children and adults can resolve problems and conflicts nonviolently. It includes sections on affirmation, creating an environment, meeting facilitation, parent support groups and more. It contains over a hundred exercises, games and agendas developed, tested, or used by the Friends Committee on Nonviolence and Children. Annotated resource lists and bibliographies. 160 pages. Illustrated. Games. \$17.95.

ONE WORLD, ONE EARTH: Educating Children for Social Responsibility, Merryl Hammond and Rob Collins, foreword by Rosalie Bertell. An excellent handbook for adults who want to work with children to explore peace, environmental and social justice issues. Featuring how to co-learn and co-lead with young people, and suggestions for organizing a group within existing institutions, creating a cooperative learning environment, involving the wider community, and sustaining enthusiasm. Full of activities, examples, sample hand-outs and useful resources.



AN EXPERIENCE IN HEALING

My journey on the road to serious ill health started when I was twenty-three years of age and pregnant with my second child. It began as a back problem which manifested itself with muscle spasms which would render me quite helpless often for several weeks at a time. With two babies to care for, this was truly a frustrating situation.

It seems that the original cause of my back problem can be traced to an injury at age seventeen. Through the years, the problem became progressively worse. In my thirties, it had developed into a condition that was causing me constant pain and complete disability. After a spasm, I would have to lie on my back on a hard surface, often for months at a time. In desperation, I consented to a spinal fusion. This surgery left me much more disabled than I was before. My neuro-surgeon indicated that the only alternative was to perform another spinal fusion. This second surgery resulted in no improvement.

From the time of my surgeries (1975 and 1976) until August of 1993, it was a continual struggle just to keep myself on my feet and to try to keep going.

Through the years, I went to numerous doctors, general practitioners and specialists, but none with any answers to my problem. Chiropractics kept the condition under control to the extent that I did not become completely incapacitated, but I was never able to gain any quality of life. I was never free from pain, and the constant pain sapped my energy to a terrible extent. Even minuscule tasks became a hardship.

The pain and the inability to function eventually spread to my jaw, my knee joints, my arms, and my hands. I was losing the use of my muscles, and attempts to exercise often made the problem worse. I was developing other health problems, such as "irritable bowel syndrome", for which I was getting no answers from the medical profession. This led me to seek out alternate health care.

In August, 1993, I visited a naturopathic doctor. Up to that time, I had been on pain killing and muscle relaxing drugs continually and was looking at the inevitability of having to take narcotics. Under the care of my naturopath, I have been able to become drug-free. The treatment

that I have been receiving from her has resulted in improvement in all areas of my health. I went to her with the hope of finding answers to my bowel problem, and, to my surprise, she also had an answer to my back problem. The method of treatment that she used is called the Bowen Therapeutic Technique, which is a system of muscle and connective tissue therapy which has been developed by the Bowen Therapy Academy of Australia. This therapy involves a dynamic, yet gentle, system of muscle and connective tissue moves which balance the body and stimulate energy. The musculo-skeletal symptoms that I suffered with for so many years diminished in severity a great deal, and I have had the treatment repeated only a few times since my first visit ten months ago.

If you have a chronic health problem, there are two points that I would like to make: First, it is very important not to give up. Once you give up, there is no place to go and nothing to hope for. Secondly, it is important to educate yourself about alternate health care. To do this greatly enlarges the spectrum of possibility to become well.

I am still under the care of my naturopathic doctor, but my quality of life has improved markedly. I still have to be careful not to traumatize my muscles and I must always be careful of the fact that I have to pace myself. Each month, however, I feel stronger and closer to being able to meet some of the challenges of an everyday normal life.

Joan Randall



Astrology is one of the many tools we can use to help understand ourselves better. It looks at why things are happening in our lives, why we find the same relationship patterns being repeated, what techniques we have been using to defend ourselves and what barriers we have between ourselves and others.

We are here to work on the emotions. Doing emotional work leads to the spiritual. When the intellect and the heart (mind and emotions) are in balance there is a spiritual process that occurs. Here we learn compassion and understanding for ourselves as well as others. Here we learn to love ourselves and others unconditionally. To understand the emotional issues that are influencing us, and to work on letting go of them is to become who we really are and then we are able to share our gifts with others and the world.

Karmic Astrology is just one of many ways to shed some light on the "inner life". It can help to heal us by providing an intellectual understanding of age old conflicts and challenges. However doing emotional work is a slow process of change. The emotional body is almost like a child that needs to be comforted and coaxed along and it can just go one step at a time.

Deborah Varney

For further information, consultations, chart readings call 863-6347.

SURVEY OF MEMBERS' OPINIONS ON WOMEN ONLY EVENTS

In the past year, the AWA/RC has received positive and negative feedback about the fact that some of our events, International Women's Day Cabaret in particular, are for women only. This survey is an attempt to take the pulse of the membership on the subject.

Here are some comments we've heard on both sides:

PRO WOMEN-ONLY EVENTS

- A chance for women to celebrate themselves.
- Women often feel freer to dance and celebrate with each other at an all-woman gathering.
- A women-only atmosphere is special and relaxed and can't be duplicated in a mixed group.
- Some events are not educational but celebrational. The intention of IWD Cabaret is to celebrate women's culture, not to necessarily educate men about women's culture.

CONS WOMEN-ONLY EVENTS

- Women performing in events are not able to invite male friends or partners and share their experiences with them.
- Our partners and male friends feel excluded.
- Reverse sexism. Excluding people on the basis of sex.
- We are working toward creating a society where women and men feel comfortable with each other and relate to each other as equals. Our events should promote this.
- Supports the misconception that feminists are angry at men.



Hello All!

WELCOME THE SPRING!

A quick update on the activities of the AWRC.

We spent much of the early winter meeting with groups of women with diverse histories: senior women, native women, black women and others, to hear their concerns and to listen to their suggestions as to how the Women's Resource Centre might best serve them. These women told their stories, and the meetings were rich. They talked of the isolation of winter rural living, their economic struggles, and the frustrating tenacity of discrimination based on their sex, economic status and races. These women swapped strategies and phone numbers, told us their needs, and helped us identify priorities for the centre.

In tandem with this, we conducted a small telephone survey, and a survey of community agencies and health professionals to sample some of the issues the greater community identifies as pertinent to women. We gathered community insights around how these might be addressed. The AWRC and representatives from other women's groups met with Francis LeBlanc, MP, to discuss these and other concerns.

The Center continues its involvement with the Inter-agency Committee on Family Violence, the Regional Development Board of the Kids First Project, the Antigonish Literacy Network, The Antigonish Family Support Committee, and also hosted a two-day Self-Help Workshop sponsored by the Self Help Connection and funded by Health Canada.

"COME ON IN VIDEO"
A fabulous and informative video on Women's Centres in Nova Scotia. Come to the premiere June 29th! Time and location to be arranged. For more information contact the AWRC.



Katherine has been the primary link with the Antigonish Family Support Committee which is dealing with issues arising from Taking Control, Making Changes' proposal to Health and Welfare to set up a Family Resource Centre in New Glasgow and employ outreach workers in Antigonish and Guysborough Counties. There is incredible broad-based involvement in the local committee and they have set up a regional structure to oversee the project and to deal with issues of accountability, liability, and fairness in funding. The board struck a hiring committee and developed a unified position on some regional funding discrepancies. The North Shore Region and especially Antigonish and Guysborough Counties are being shortchanged by Health & Welfare Brighter Futures' program in that Antigonish County will receive less than 30% of the North Shore Region's funding. The local board is leaning towards deciding that this is better than what was originally proposed and it will at least enable us to get things going in the area. Katherine will continue her involvement with this project.

Workshops in...

Linda Bakers and Sandi CareW of The Self Help Connection facilitated a fabulous "Women Helping Women" workshop at the end of May. Twenty women attended (as many as the roster allowed)

and there is astounding potential and need for new self-help groups to emerge. The workshop was informative, energetic and fun, but gentle, given that many of the women there were motivated out of a need to begin self-help groups for difficult issues. All of the participants will do a practicum over the summer, and return for a follow-up workshop in the fall. We are all very excited about the next session!!

Workshops out...

Katherine facilitated a workshop on Race and Gender for the Students of the Guysborough Learning Centre as well as a Workshop on Women and Poverty for Lee Place staff in Port Hawkesbury. Both sessions were well received and instrumental in educating the public on essential issues.

We have also begun the groundwork for our Women in Community Economic Development project which will identify opportunities for and obstacles to increasing the involvement of women in generating small scale economic-initiatives. Martha met with Marli MacNeil of the Antigonish Downtown Development Society regarding a strategy for involving the ADDS in our economic development work and test interviews for the project have begun. We are excited about breaking new ground in BUSINESS!!

There are many other tids and tads going on as is always the case at the centre, but the larger pieces are covered here, and I'm getting dangerously close to filling my space quota!!

WE WOULD LIKE TO SEND A SPECIAL THANK-YOU TO THE VOLUNTEERS who have helped staff the centre, handle mail outs, water our plants, photocopy, transport dividers,... THANK-YOU!!!!

We greatly miss Martha, who is in Nepal, and enthusiastically await her return.





Approximately eight million American teenagers and adults have some symptom of the life-threatening eating disorders anorexia nervosa and bulimia nervosa (Meehan, 1990).

Statistics about Eating Disorders



The *Campus Health Guide* reports that researchers estimate one to 20 percent of college women have had fully developed symptoms of bulimia (Otis & Goldingay, 1989).



10 to 20 percent of women, and possibly more, who are not clinically diagnosed as having an eating disorder suffer from at least one symptom.

Why are some people more susceptible than others? Some theories suggest that a combination of psychological, physiological, and cultural factors tend to have a major impact on people who are vulnerable. Those classified at high risk are individuals who place an emphasis on slinness, body image, or making a certain weight—for example, wrestlers, dancers, models, or long distance runners. Other people at risk are those, especially women, with socially demanding or powerful jobs. Eating-disordered people also tend to come from families who emphasize weight control or families with members who have eating disorders or who abuse alcohol or drugs.

While anorexia used to be termed the disease of the affluent and appeared to be most common in white, upper-middle class teenage girls and young women, it is now clear that others, such as men and boys, older adults, blacks, other people of color, and the economically disadvantaged, are susceptible to eating disorders. According to an *FDA Consumer* article (Farley, 1986) five to 10 percent of bulimics and anorexics are men. The *New York Times* estimates that one in 10 people who seeks treatment at eating disorder clinics is male (Brody, 1990).



Personal/Self System

Compulsive and addictive behaviors are often a search for personhood—a desire to have a self that is significant, worthwhile, and lovable. Eating-disordered individuals seem to be medicating, through misuse of food, negative feelings such as shame, abandonment, depression, rejection, and anger. There is a fear that one must prevent others from knowing one's faults. Individuals who feel shame at their core will believe they are "defective," "a mistake," and "not as good as others." They strive to perform, to keep others at a distance, to control, and to achieve. There is an intense conflict—the individual wanting desperately to have close relationships while afraid to have others get too close and risk knowing "how bad and defective I really am." These individuals carry shame that rightly belongs to someone else, in the sense that someone else has imposed it. The process is to separate the shaming events from the person's being and significance. When one constantly hears "You never get anything right," "Who gave you the right to think for yourself?" "Why can't you be more like _____?" or "Don't feel that way," these shaming experiences begin to feel "normal." Being pressured to be someone other than oneself or given messages not to talk, think, or feel is shaming. Living with shame is not "normal" or "okay." It is a sign the patient needs to discover his or her own needs, thoughts, feelings, and behaviors.

Authors in the eating disorders field have identified shame as well as low self-esteem, depression, lack of joy, aries, control, and fear as present in the eating-disordered individual (Bradshaw, 1988; Holleran, Pascale and Fraley, 1988; Orbach, 1978; Chernin, 1985). Shame, fears, abandonment, unmet needs, and fantasized parental bonds are the core emotional issues to be explored in treatment. Shame may have been experienced in the form of sexual abuse, family secrets, rigid religious beliefs and rituals, overly critical comments, or other controlling behaviors. The control-release cycle created by shame may include such controlling, compulsive behaviors as too much dieting, working, helping others, rigidity, and exercising.

These behaviors may be accompanied by such personal traits as being self-righteous, overly critical, blaming, and overly concerned with pleasing others. When the release comes, it may be in the form of abusing food, sex, alcohol, other people, money, or self. One may self-mutilate by inflicting pain with cuts, burns, bruises, and the like. Issues of physical, emotional, and sexual abuse may also be present.

It is important to recognize that when people live fear-based lives, they will set up conditions to make that fear become reality. For example, if they fear rejection, they may (1) reject others before they have the chance to reject them, (2) exhibit offensive behaviors that distance others from them, (3) present excessively pleasing, dependent, or clinging behaviors which actually result in distancing others, (4) tend to wait for others to initiate any interactions, or (5) keep relationships on a superficial level, not allowing intimate relationships to develop so as "not to get hurt." Intimacy is defined as the sharing of our innermost thoughts, beliefs, feelings, fears, and aspirations with another. Being intimate means being vulnerable, taking risks, and allowing oneself to experience the rewards of discovering inner potentials. It is difficult to let others know how one feels and thinks when one's self-esteem is low, identity confused, needs unknown, and boundaries nonexistent. Intimacy is a process never taught or allowed to develop in far too many families.

Treatment involves teaching these individuals to identify their needs, get in touch with and express their feelings, and learn new ways to get needs met. Identification of needs begins with an awareness that it is okay to have needs. Every individual has five basic needs:

1. Belonging—to feel included and connected with others.
2. Love and affection—to love and to be loved.
3. Nurture—to have one's well-being taken care of; to receive care when sick, exhausted, or stressed.
4. Separateness—to feel important and worthwhile because of *being oneself* rather than *doing*.

5. Spirituality—to know a higher power exists that is greater than oneself alone—this may be God, nature, a group, meditation, or such.

It is important to discuss and experience "pressed down" and "denied" feelings along with the experiences and messages patients use to keep themselves hurting and victims. These experiences and messages may be years old, yet are kept alive and seen as "truths" by the patient who replays them in his or her thoughts and emotions. Early childhood trauma needs to be addressed to allow the individual to experience the pain and overcome it. As long as the pain is denied or suppressed, the individual cannot move out of the pain towards healthy growth.

Letting one's emotions out and learning new behaviors allow the patient to replace self-defeating messages and experiences with positive views of self and new life skills. Individuals can learn to accept and value themselves. They can begin to take responsibility for their own thoughts and actions.

Boundary setting is a necessary part of treatment of the personal system. There are three types of boundaries: social, physical, and psychological (personal). Individuals need to learn they have a right to their feelings, beliefs, and needs as well as a right to express them. Stating a boundary means expressing what one will share, how far one will go, what one will and will not accept, and having the right to say "no." One patient in treatment, upon a discussion of social boundaries, remarked, "I never knew I had a right to decide whom I could have in my life." A social boundary indicates the kind of people with whom one wishes to be associated. A physical boundary states where and how one wishes to be touched and how far/close others are to come. A psychological boundary includes the expression of needs and feelings. Individuals really do have a right to talk, to think, to feel, and to be who they are—not just what other people want them to be. People can be trusting and loving without allowing others to use or abuse them.

Healing is a journey into yourself; a journey into different and new worlds that you were not aware of before. Healing is a timelessness, an attitude, a belief. Healing is a power within us waiting to be captured and used. Healing is the white light, the power within. Healing is joy and pain, laughter and tears. Healing is the Great Spirit, the Goddess, the Great One, the Power above. Above all healing is something we can all do. My own experience with healing has been intensely personal, exhilarating, frightening, and full of despair and over-flowing hope all in the same moment. Whatever we do, whatever we are involved in, I think conquering the fear is the most important part.

What is needed for healing and how do you conquer the fear? Synergy between the mind and body, positive energy flow, belief in oneself, one's body, and one's power, visualization, meditation, yoga, exercise, clean water, clean air, clean food, love, conversation, and laughter - all of these things are part of healing.

It's quite interesting that our society has chosen chemically synthetic drugs in a bottle and doctors with medical degrees to heal us. At the same time that we hand ourselves over in faith to this form of medicine, we drink water with bleach in it and breathe an ever-increasing cloud of chemicals. Drugs, doctors, and hospitals all have their place but there is much more to the healing process than offered by our current medical system. Above all, it is important to realize that healing is an inner thing. We can not have a healthy body without a healthy spirit. Sometimes I think that it is only through pain, loss, and debilitation that we really see ourselves. Sometimes I think that it is only through examining these things that we really journey into and find ourselves. In this finding, we will eventually do some healing.

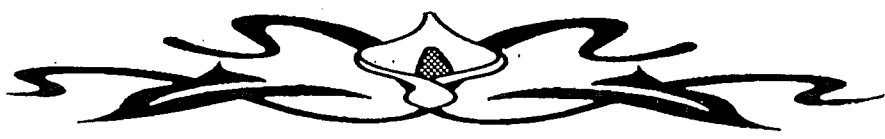
The perennial dilemma of course is that sometimes despite our best efforts - no matter how much yoga we do, no matter how well we eat, no matter how hard we try, our bodies still decide to rebel against us. This is the one of the mysteries of healing and should not daunt us. In every physical ailment I believe there is a message for the soul. It's the finding, tending, and nurturing of our soul that is the important thing. Maybe the physical debilitation, pain, or discomfort is a necessary part of the care of the soul and a necessary part of our own personal spiritual journey. It is important to remember that each person's journey is a different one and that we all understand different meanings from the same moment. It is your own personal meaning which is the important one and the one which you must take hold of in healing.

In caring for the soul I have a bias that we also must begin to tend the earth better than we have. I am now a canary in this coal mine we call Earth and I am saying that it is time for us to leave the coal mine or fix it. Let us begin to heal ourselves, each other, and this lovely, sacred place we call home. Let us leave to our children a safe place. Let us pray that we are not the last generation who could go out in the sun and breathe the air. In parts of Australia and New Zealand now during periods of intense ozone depletion, children have to stay in for recess on sunny days and can only go out when it's raining. When I travel to the city I must wear a mask or the fumes make me ill. I can not take a bath in chlorinated water without developing rashes. Maybe above all else, healing is about respect. Respect for ourselves, our sacred temple, the body that we live in and this planet we call home.

NOTICE

Do you suffer from Candida, Chronic Fatigue, Chemical Sensitivities or Allergies? Would you like to join a self-help group to exchange support, information, recipes, etc.? Initial meeting at the Sunflower Cafe, June 29th, 7:00 p.m.

PLEASE come scent free.



The Antigonish Women's Association invites you to its

ANNUAL GENERAL MEETING

GUEST SPEAKER 8:30

STEPS IN HEALING: RECOVERING FROM TRAUMA

A talk by Toni Ann Laidlaw, therapist and co-author of Healing Voices: Feminist approaches to therapy with women. Please come and bring friends to hear her speak. We feel this will be an important event for all women and service providers.

*Where: Club Sixty
When: Wednesday June 15th*

*Time: 7:00 p.m. Business meeting
8:30 p.m. Toni Ann Laidlaw
9:15 p.m. Question Period*

SURVEY OF MEMBERS' OPINIONS ON WOMEN ONLY EVENTS

In the past year, the AWA/RC has received positive and negative feedback about the fact that some of our events, International Women's Day Cabaret in particular, are for women only. This survey is an attempt to take the pulse of the membership on the subject.

Here are some comments we've heard on both sides:

PRO WOMEN-ONLY EVENTS

- A chance for women to celebrate themselves.
- Women often feel freer to dance and celebrate with each other at an all-woman gathering.
- A women-only atmosphere is special and relaxed and can't be duplicated in a mixed group.
- Some events, are not educational but celebrational. The intention of IWD Cabaret is to celebrate women's culture, not to necessarily educate men about women's culture.

CONS WOMEN-ONLY EVENTS

- Women performing in events are not able to invite male friends or partners and share their experiences with them.
- Our partners and male friends feel excluded.
- Reverse sexism. Excluding people on the basis of sex.
- We are working toward creating a society where women and men feel comfortable with each other and relate to each other as equals. Our events should promote this.
- Supports the misconception that feminists are angry at men.

Please Complete Insert



CHANGES TO U.I. COME INTO EFFECT

The changes made to Unemployment Insurance in Paul Martin's February budget came into effect in April, 1994. The budget cut \$725 million from U.I. in 1994-95, and will cut an additional \$2.4 billion in 1995-96. This means that unemployed people claiming U.I. will face shorter benefit periods, and smaller benefits. 3.5 million unemployed people across the country will be affected by the UI cuts. The February budget was a severe attack on unemployed people. This reflects the fact that the burden of the current financial crisis, arising from the decrease in federal revenues being collected, is being carried by the unemployed.

The Liberal Government is also shamelessly using single mothers to create a two tier U.I. system, and to introduce needs testing into the program. Single individuals with dependents are now eligible for a higher benefit rate (60% of insurable earnings), than all other recipients who will receive 55% of insurable earnings. Single mothers will have to demonstrate they are solely responsible for their dependents. This will open women's personal lives to regulation by the state, and also uses the Unemployment Insurance system to provide support for dependents. U.I. is primarily income support for the unemployed, and should remain as such. Any means to transform the program to include other forms of social assistance will only further undermine the program.

It would seem that now the government is considering further cut into UI in its social policy review process. The Social policy Task Force is currently considering cutting the benefit period in half to 26 weeks,

CONTRIBUTORS

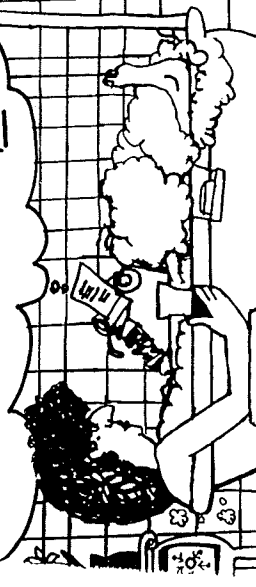
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DO YOU HAVE CHIPPED, PROBLEM NAILS? ARE YOU BALDING? TROUBLED BY SPOTS, ALLERGIES, ACID INDIGESTION? NO?



THEN COME AND MEET OTHERS LIKE YOURSELF, AND SPEND A DAY IN FELLOWSHIP, AND INNOCENT SELF-CONGRATULATION, AT THE FIRST MEETING OF "WE'RE OKAY". CONTACT YOUR LOCAL V.F.W.

